Home and Community-Based 1915(c) Waivers for Respite Support
Medicaid is a program in every state that pays for medical assistance for certain individuals and families with low incomes and resources. It is the largest source of funding for medical and health-related services for America’s poorest people. Because Medicaid is funded jointly by the federal and state governments, the services paid for vary from state to state. In addition to medical services, Medicaid will pay for home and community-based services (HCBS) through the state plan as well as through Medicaid waivers that offer services as a lower-cost alternative to treatment in a medical or long-term care facility, such as a nursing home. Respite is usually paid for through one or more of the following types of waivers: research and demonstration (1115), managed care (1915b) and HCBS (1915c) waiver programs. This state’s Medicaid waivers that include respite are

**ID Developmental Disabilities-DD Waiver**
Provides residential habilitation, respite, supported employment, specialized medical equipment and supplies, community support, FMS (financial management services), support broker, adult day care, behavior consultation/crisis management, chore, dental, environmental accessibility adaptation, home delivered meals, PERS (personal emergency response systems), skilled nursing, non-medical transportation for individuals 18 years and older diagnosed with autism, developmental disability or intellectual disability.

**ID Aged and Disabled Waiver**
Provides adult health, day habilitation, homemaker, residential habilitation, respite, supported employment, attendant care adult residential care, chore, companion services, consultation, environmental accessibility adaptations, home delivered meals, nonmedical transportation, PERS (personal emergency response systems), skilled nursing, transition services, and specialized medical equipment and supplies for individuals ages 65 and older and for individuals ages 18-64 who have physical disabilities.
ID Developmental Disabilities (DD) Waiver (0076.R06.00)
State Operating Agency: Bureau of Developmental Disability Services

**Description**
This waiver provides services to eligible participants with a developmental disability to prevent unnecessary institutional placement, provide for the greatest degree of independence possible enhance the quality of life, encourage individual choice, and achieve and maintain community integration.

Services include residential habilitation, respite, supported employment, financial management services, support broker services, adult day health, behavior consultation/crisis management, chore services, community support services (participant directed), environmental accessibility adaptations, home delivered meals, non-medical transportation, personal emergency response system (PERS), skilled nursing, specialized medical equipment and supplies.

Participants may choose traditional or consumer-directed waiver services. Those selecting traditional services must use a plan developer to develop a service plan and may elect residential habilitation services through: Certified Family Home (home of the provider) or Supported Living Services (home of the participant). The consumer-directed services option requires the participant to have a support broker to assist the participant to make informed choices, participate in a person-centered planning process, and become skilled at managing his/her own supports. The participant must use a Medicaid enrolled fiscal employer agent to provide Financial Management Services (FMS). A participant cannot receive traditional services and consumer-directed services at the same time.

**Waiver Type**
1915(c)

**Target Population-Eligibility**
Individuals 18 years and older diagnosed with autism, developmental disability or intellectual disability.

**Level of Care**
Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

**Respite Services**
Respite provides short-term breaks from caregiving responsibilities to non-paid caregivers. The caregiver or participant is responsible for selecting, training, and directing the provider. While receiving respite care services, the waiver participant cannot receive other services which are duplicative in nature.

Respite provided under this waiver will not include room and board payments. Respite may be provided in the participant’s residence, the private home of the respite provider, the community, a Developmental Disabilities Agency or an Adult Day Health Facility.

**Respite Provider Eligibility**
Information on becoming a provider: [http://www.healthandwelfare.idaho.gov/Providers/MedicaidProviders/ProviderEnrollment/tabid/265/Default.aspx](http://www.healthandwelfare.idaho.gov/Providers/MedicaidProviders/ProviderEnrollment/tabid/265/Default.aspx)

**Caregiver Eligibility**
Respite may be provided by a relative or legal guardian but not by legally responsible persons.

**Enrollment Limit**
5094: Year 1; 5604: Year 2; 6164: Year 3; 6780: Year 4; 7458: Year ending in 09/30/2022

**How to Apply**
Contact your regional office for assistance.

**Contact Information**
Regional Offices list: [https://healthandwelfare.idaho.gov/Portals/0/AboutUs/mapDHWoffices.pdf](https://healthandwelfare.idaho.gov/Portals/0/AboutUs/mapDHWoffices.pdf)


Department of Health and Welfare, Aid for Aged, Blind, and Disabled: 1-877-456-1233, option 3

**Link to Waiver Application**
[http://healthandwelfare.idaho.gov/Portals/0/Medical/DD%20Waiver.pdf](http://healthandwelfare.idaho.gov/Portals/0/Medical/DD%20Waiver.pdf)

**Expiration Date**
09/30/2022

**Date of Last Update**
07/31/2019
ID Aged and Disabled (1076.R06.00)

State Operating Agency: Idaho Department of Health and Welfare, Division of Medicaid, Bureau of Long-Term Care

**Description**

This waiver allows eligible participants to choose to live in a home or community setting rather than in an institution. This waiver offers services in home and community settings such as homes and apartments of participants, homes and apartments where participants live with family members, Certified Family Homes, and Residential Assisted Living Facilities.

This waiver provides adult health, day habilitation, homemaker, residential habilitation, respite, supported employment, attendant care adult residential care, chore, companion services, consultation, environmental accessibility adaptations, home delivered meals, nonmedical transportation, PERS (personal emergency response systems), skilled nursing, transition services, and specialized medical equipment and supplies.

**Waiver Type**

1915(c)

**Target Population - Eligibility**

For individuals ages 65 and older and for individuals ages 18-64 who have physical disabilities. To qualify for the disabled (physical) or disabled (other) target group, an individual must meet the definition of blindness or disability used by the Social Security Administration for Retirement, Survivors, and Disability Insurance and Supplemental Security Income (SSI) benefits.

**Level of Care**

Individuals require level of care available in a nursing facility (NF).

**Respite Services**

Respite care services provide short-term breaks from care giving responsibilities to non-paid care givers. The care giver or participant is responsible for selecting, training, and directing the provider. While receiving respite care services, the waiver participant cannot receive other services which are duplicative in nature.

Respite care services provided under this waiver will not include room and board payments. Respite care services may be provided in the participants’ residence, a Certified Family Home, a Developmental Disabilities Agency, a Residential Assisted Living Facility, and an Adult Day Health Facility.

**Respite Provider Eligibility**

Information on becoming a provider: [http://www.healthandwelfare.idaho.gov/Providers/MedicaidProviders/ProviderEnrollment/tabid/265/Default.aspx](http://www.healthandwelfare.idaho.gov/Providers/MedicaidProviders/ProviderEnrollment/tabid/265/Default.aspx)

**Caregiver Eligibility**

Respite may be provided by a relative or legal guardian but not by legally responsible persons.

**Enrollment Limit**

11,485: Year 1; 11,944: Year 2; 12,422: Year 3; 12,919: Year 4; 13,436: Year ending 09/30/2022

**How to Apply**

Contact your regional office for assistance or call the Aid for Aged, Blind and Disabled office.

**Contact Information**

Regional Offices list: [https://healthandwelfare.idaho.gov/Portals/0/AboutUs/mapDHWoffices.pdf](https://healthandwelfare.idaho.gov/Portals/0/AboutUs/mapDHWoffices.pdf)

Department of Health and Welfare, Aid for Aged, Blind, and Disabled: 1-877-456-1233, option 3

**Link to Waiver Application**

[https://healthandwelfare.idaho.gov/Portals/0/Medical/MedicaidCHIP/AandDWaiver.pdf](https://healthandwelfare.idaho.gov/Portals/0/Medical/MedicaidCHIP/AandDWaiver.pdf)

**Expiration Date**

09/30/2022

**Date of Last Update**

07/31/2019