

KANSAS

Kansas Department of Health and Environment

Curtis State Office Building, 1000 SW Jackson, Topeka, KS 66612

<http://www.kdheks.gov/hcf/Medicaid/>

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:

In Kansas, the KanCare 1115(a) waiver provides managed care authority for the state's HCBS waivers through concurrent section 1115(a)/1915(c) HCBS combination waivers. KanCare will continue to operate concurrently with the state's section 1915(c) Home and Community-Based Services (HCBS) waivers.

[KanCare Waiver](#)

KanCare is the program through which the State of Kansas administers Medicaid. The goal for the KanCare extension is to help Kansans achieve healthier, more independent lives by coordinating services and supports in addition to traditional Medicaid benefits. It provides benefits, including long-term services and supports (LTSS) and HCBS, via managed care. Individuals enrolled in the listed 1915(c) waiver programs will also receive 1915(c) waiver services authorized through the waiver program from the KanCare MCO in which they are enrolled, including respite.

[KS Autism Waiver](#)

Provides respite care, family adjustment counseling, and parent support and training (peer to peer) provider for individuals from birth through age 5 diagnosed with autism spectrum disorder (ASD).

[KS Serious Emotional Disturbance \(SED\) Waiver](#)

Provides attendant care, independent living/skills building, short term respite care, parent support and training, professional resource family care, and wraparound facilitation for individuals, ages 4-18, diagnosed with SED (Serious Emotional Disturbance).

[KS Technology Assisted \(TA\) Waiver](#)

Provides medical respite care, personal care services, financial management services, health maintenance monitoring, home modification, intermittent intensive medical care, specialized medical care for medically fragile and technology dependent individuals ages 0-21.

[KS I/DD](#)

Provides day supports, overnight respite care, personal care service, residential supports, supported employment, financial management services (FMS), assistive services, enhanced care service, medical alert rental, specialized medical care, wellness monitoring for individuals age 5 and older diagnosed with autism, developmental disability or intellectual disability.

[KS HCBS for the Frail and Elderly](#)

Provides financial management services, adult day care, assistive technology, comprehensive support - provider directed, comprehensive support - self-directed, enhanced care service, home telehealth, medication reminder, nursing evaluation visit, oral health services, personal care services - provider directed, personal care services - self-directed, personal emergency response, sleep cycle support - self-directed, and wellness monitoring for aged individuals 65 and older.

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KanCare

State Operating Agency: Kansas Department of Health and Environment (KDHE) and the Kansas Department for Aging and Disability Services (KDADS)

Description	KanCare is the program through which the State of Kansas administers Medicaid. This renewal will build on the success of the current KanCare demonstration, which focused on providing integrated and whole-person care, creating health homes, preserving or creating a path to independence, and establishing alternative access models with an emphasis on home and community-based services (HCBS). The goal for the KanCare extension is to help Kansans achieve healthier, more independent lives by coordinating services and supports in addition to traditional Medicaid benefits. It provides benefits, including long-term services and supports (LTSS) and HCBS, via managed care. Individuals enrolled in the listed 1915(c) waiver programs will also receive 1915(c) waiver services authorized through the waiver program from the KanCare MCO in which they are enrolled, including respite.
Waiver Type	1115
Target Population-Eligibility	Individuals eligible under concurrent 1915(c) waivers. This includes individuals 0-5 with Autism Spectrum Disorder, individuals 16-64 with physical disabilities, individuals 0-21 who are diagnosed as medically fragile and dependent upon medical technology, individuals 16-64 with brain injury, individuals 4-18 with Serious Emotional Disturbance, individuals 65 and older, and individuals 5 and older with autism, intellectual disability, or developmental disability.
Level of Care	Level of care is not available.
Respite Services	Home and community based services, including respite, are provided in the least restrictive and most integrated home and community-based setting. HCBS LTSS are not provided in institution-like settings except when such settings are employed to furnish short term respite to participants. The settings/services support community integration, including facilitation of employment and easy access to resources and activities in the community. LTSS may be participant directed.
Respite Provider Eligibility	Information on becoming a provider of services: https://www.kancare.ks.gov/providers/become-a-provider
Caregiver Eligibility	Caregiver eligibility is not available.
Enrollment Limit	Enrollment limit is not available.
How to Apply	Apply online by visiting https://www.kancare.ks.gov/consumers/apply-for-kancare You can also apply over the phone by calling KanCare Clearinghouse at 1-800-792-4884.
Contact Information	Contact KanCare Clearinghouse at 1-800-792-4884 or Managed Care Enrollment Center at 1-866-305-5147
Link to Waiver Application	https://www.kancare.ks.gov/docs/default-source/policies-and-reports/section-1115-waiver-comments/ks-updated-stcs.pdf?sfvrsn=9fd84c1b_2
Expiration Date	12/31/2023
Date of Last Update	08/09/2019

KS Autism Waiver (0476.R02.00)**State Operating Agency: Kansas Department for Aging and Disability Services (KDADS)**

Description	The purpose of the Kansas Autism Waiver is to provide eligible Kansans the option to receive parental support in their home and community in a cost-efficient manner to divert children from institutionalization. Each waiver participant will have a plan of care (POC) which will describe waiver services the child is to receive, their frequency, and the type of provider who is to furnish each service. The services provided by this waiver include: respite care, family adjustment counseling, and parent support and training (peer to peer) provider.
Waiver Type	KanCare 1115(a) waiver provides managed care authority for the state's HCBS waivers through concurrent Section 1115(a)/1915(c) HCBS combination waivers.
Target Population-Eligibility	Individuals, birth through age 5, with a diagnosis of Autism Spectrum Disorder, (ASD) including Autism, Asperger Syndrome, and Other Pervasive Developmental Disorder-Not Otherwise Specified. A child's services shall be limited to three years, services may be extended for one year with approval of the review team.
Level of Care	Individuals require level of care available in an inpatient psychiatric facility for ages 21 and under.
Respite Services	Respite Care provides temporary direct care and supervision to provide relief to families/caregivers of a child with an autism spectrum disorder. The service is designed to help meet the needs of the primary caregiver as well as the identified child. Normal activities of daily living are considered content of the service when providing respite care, and include support in the home, after school, or at night. Respite Care services are available to participants who have a family member who serves as the primary care giver who is not paid to provide any HCBS/Autism service for the child. Respite care is provided in planned or emergency segments and may include payment during the individual's sleep time. Respite Care cannot be provided to an individual who is an inpatient of a hospital or State Mental Hospital when the inpatient facility is billing Medicaid, Medicare and/ or private insurance. Transportation to and from school/medical appointments/or other community based activities, and/or any combination of the above is included in the rate for this service. Respite care does not duplicate any other Medicaid State Plan Service or service otherwise available to recipient at no cost. Respite is limited to 168 hours per calendar year.
Respite Provider Eligibility	Information on becoming a provider of services: https://kdads.ks.gov/provider-home/home-and-community-based-services-provider-information
Caregiver Eligibility	Respite may not be provided by the legally responsible person, a relative, or a legal guardian.
Enrollment Limit	65: Year ending 03/31/2021
How to Apply	Begin the application process online by following the directions under "Enrollment" at https://kdads.ks.gov/commissions/home-community-based-services-(hcbs)/programs/autism
Contact Information	KDADS, Attention: Home and Community Based Services, 503 S. Kansas Ave., Topeka, KS 66603-3404 Call the KDADS main office toll free at 800-432-3535 or email kdads.wwwmail@ks.gov
Link to Waiver Application	https://kdads.ks.gov/docs/default-source/CSP/HCBS/HCBS-Policies/draft-final-policies/final-cms-approved-autism-waiver.pdf?sfvrsn=a0039ee_0
Expiration Date	03/31/2021
Date of Last Update	07/10/2019

KS Serious Emotional Disturbance (SED) Waiver (0320.R04.01)**State Operating Agency: Kansas Department for Aging and Disability Services, Community Mental Health Centers (CMHC)**

Description	The goal of the SED waiver is to divert psychiatric hospitalization through the provision of intensive home and community based support services to maintain children and youth in their homes and communities. Each participant has a plan of care (POC) which will describe waiver services the child is to receive, their frequency, and the type of provider who is to furnish each service. SED waiver services include: attendant care, independent living/skills building, short term respite care, parent support and training, professional resource family care, and wraparound facilitation.
Waiver Type	KanCare 1115(a) waiver provides managed care authority for the state's HCBS waivers through concurrent section 1115(a)/1915(c) HCBS combination waivers.
Target Population-Eligibility	Individuals between the ages of 4 and 18 diagnosed with SED. An age exception for clinical eligibility may be requested for participants under the age of 4 and over the age of 18 through age 21.
Level of Care	Individuals require level of care available in an inpatient psychiatric facility for individuals age 21 and under.
Respite Services	Short-Term Respite Care provides temporary direct care and supervision for the participant to provide relief to the parents or caregivers of a participant with a serious emotional disturbance. The service is designed to help meet the needs of the primary caregiver, as well as the identified participant. Normal activities of daily living are considered content of the service when providing respite care. These include support in the home, after school, or at night; transportation to and from school, medical appointments, or other community-based activities, or any combination of the above. Short-Term Respite Care can be provided in the participant's home or place of residence or provided in other community settings, including Licensed Family Foster Homes, Licensed Emergency Shelters, and Out-Of-Home Crisis Stabilization Houses/Units/Beds. Short-Term Respite Services provided by or in an IMD are not covered. This service cannot be provided in a Youth Residential Center. It may not be provided simultaneously with Professional Resource Family Care services and does not duplicate any other Medicaid state plan service or service otherwise available to participants at no cost. Children and youth in foster care will not be able to access short term respite care as this service is available under the foster care contract. The cost of transportation is included in the rate paid to providers of this service. Respite is provider managed.
Respite Provider Eligibility	Information on becoming a provider of services: https://www.kdads.ks.gov/provider-home/providers
Caregiver Eligibility	Respite may not be provided by the legally responsible person, a relative, or a legal guardian.
Enrollment Limit	4600: Year ending 03/31/2022
How to Apply	Contact your local community mental health center to apply: https://www.kdads.ks.gov/commissions/behavioral-health/consumers-and-families/services-and-programs/community-mental-health-centers
Contact Information	Contact your local CMHC. Call the KDADS main office toll free at 800-432-3535 or email Kdads.wwwmail@ks.gov Call the Behavioral Health Central Office at 785-296-6807
Link to Waiver Application	https://kdads.ks.gov/docs/default-source/csp/hcbs/hcbs-policies/final-policies/sed-policies/final-sed-waiver.pdf?sfvrsn=c5ed38ee_14
Expiration Date	03/31/2022
Date of Last Update	07/11/2019

KS Technology Assisted (TA) Waiver (4165.R06.00)**State Operating Agency: Kansas Department for Aging and Disability Services (KDADS)**

Description	<p>This waiver provides the opportunity to access long-term care services intended to assist individuals in managing their healthcare limitations and to progress towards independence, productivity, and community integration and inclusion. The waiver is intended to provide supports and services to meet the medical needs of the individuals and will be provided in a manner that affords the same dignity and respect would be provided to any person who does not have a disability. Participants may choose participant-directed and/or agency directed (non-self-directed) services and will have a Person-Centered Service Plan identifies frequency, scope and duration of long-term community medical support services.</p> <p>Services available through this waiver include: medical respite care, personal care services, financial management services, health maintenance monitoring, home modification, intermittent intensive medical care, specialized medical care.</p>
Waiver Type	KanCare 1115(a) waiver provides managed care authority for the state's HCBS waivers through concurrent section 1115(a)/1915(c) HCBS combination waivers
Target Population-Eligibility	Individuals, age 0 through 21 years, who are diagnosed as medically fragile and dependent upon medical technology.
Level of Care	Individuals require level of care available in a hospital.
Respite Services	<p>Medical Respite Care is a temporary service provided on an intermittent basis for the purpose of relieving the family of the care of a person who is diagnosed as technology dependent and medically fragile for short, specified periods of time. Respite care must be provided in the recipient's place of residence or community and has its purpose to: meet nonemergency or emergency family needs, restoration or maintenance of the physical and mental well-being of the child and/or family providing supervision, companionship and personal care to the child for the specified period of time. Providers of medical respite service is limited to a skilled nursing staff (RN or LPN) licensed to practice in Kansas under the direct supervision of a home health agency licensed by the Kansas Department of Health and Environment. A maximum of 7 days or 168 hours per calendar year will be provided. The limit is based on the provision of temporary, respite care, and can be delivered in addition to benefits available through the EPSDT state plan.</p> <p>Respite services are provider managed.</p>
Respite Provider Eligibility	Information on becoming a provider of services: https://kdads.ks.gov/provider-home/home-and-community-based-services-provider-information
Caregiver Eligibility	Respite may not be provided by the legally responsible person, a relative, or a legal guardian.
Enrollment Limit	543: Year ending 07/31/2023
How to Apply	To apply for the TA waiver contact Children's Resource Connection by phone: 316-721-1945 or email: crctaks@cox.net .
Contact Information	Contact the Children's Resource Connection or call the KDADS main office toll free at 800-432-3535 or email kdads.wwwmail@ks.gov .
Link to Waiver Application	https://kdads.ks.gov/docs/default-source/csp/hcbs/waiver-renewals/technology-assisted/cms-approved-ta-waiver-2019.pdf?sfvrsn=f8a504ee_2
Expiration Date	07/31/2023
Date of Last Update	09/14/2019

KS Intellectual/Developmental Disability (I/DD) Waiver (0224.R06.00)**State Operating Agency: KS Department for Aging and Disabilities Services, Division of Community Services and Programs (CSP)**

Description	<p>This waiver provides access to services and supports which allow for opportunities for choices that increase their independence, productivity, integration and inclusion in the community. This range of supports and services will be appropriated to each participant and will be provided in a manner that affords the same dignity and respect to participants with intellectual and/or developmental disabilities that would be afforded to any person who does not have a disability. The services available through the waiver can be delivered through multiple service delivery methods. Participants will continue to have a choice between self-directed or agency directed services.</p> <p>The services provided by this waiver include: day supports, overnight respite care, personal care service, residential supports, supported employment, financial management services (FMS), assistive services, enhanced care service, medical alert rental, specialized medical care, and wellness monitoring.</p>
Waiver Type	KanCare 1115(a) wavier provides managed care authority for the state’s HCBS waivers through concurrent section 1115(a)/1915(c) HCBS combination waivers.
Target Population-Eligibility	Individuals age 5 and older diagnosed with autism, developmental disability or intellectual disability. Diagnosis of ID must have been before age 18, diagnosis of DD must have been before 22.
Level of Care	Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)
Respite Services	<p>Overnight Respite Care is designed to provide relief for the individual's family member who serves as an unpaid primary care giver. Respite is necessary so unpaid, primary caregivers are able to receive periods of relief for vacations, holidays and scheduled periods of time off. Overnight Respite Care is provided in planned segments and includes payment during the participant's sleep time. It may be provided in the individual’s family home or place of residence, licensed foster home, facility approved by KDHE or KDADS which is not a private residence, or licensed respite care facility/home.</p> <p>To avoid overlap of services, Overnight Respite is limited to those services not covered through the Medicaid State Plan or other HCBS services and which cannot be procured from other formal or informal resources. Participants who receive Overnight Respite Care services may not also receive Residential Supports or Personal Care Services as an alternative to Overnight Respite. Overnight Respite Care services cannot be provided to an individual who is an inpatient of a hospital, a nursing facility, or an ICF-IID when the inpatient facility is billing Medicaid, Medicare and/or private insurance.</p> <p>A maximum of 60 nights of Overnight Respite per calendar year is allowed. Overnight respite may be provider managed or participant directed. A self-direct option may be chosen for Overnight Respite by the participant if the participant is not a child in DCF custody living in a licensed foster care setting. If the participant is not capable of providing self-direction, the participant's guardian, or legally appointed representative shall choose.</p>
Respite Provider Eligibility	Information on becoming a provider of services: https://kdads.ks.gov/provider-home/home-and-community-based-services-provider-information
Caregiver Eligibility	Overnight Respite may be provided by a relative but not a legal guardian or legally responsible person.
Enrollment Limit	9004: Year ending 6/30/2024
How to Apply	The application process begins by contacting your local Community Developmental Disability Organization (CDDO) found here: https://www.kdads.ks.gov/docs/default-source/CSP/HCBS/I-DD/cddo-map9acd5ea0172e66d690a7ff00009edf98.pdf?sfvrsn=0
Contact Information	Contact your Community Developmental Disability Organization or call the KDADS main office toll free at 800-432-3535 or email kdads.wwwmail@ks.gov .

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Link to Waiver Application	https://www.kdads.ks.gov/docs/default-source/csp/hcbs/waiver-renewals/idd-and-bi/draft-idd-waiver-submitted-to-cms.pdf?sfvrsn=9a804ee_4 (submitted renewal application)
Expiration Date	06/30/2024, pending approval of renewal application
Date of Last Update	07/11/2019

KS HCBS for the Frail and Elderly Waiver (FE) (0303.R04.01)

State Operating Agency: Kansas Department for Aging and Disability Services (KDADS)

Description	The HCBS/FE waiver provides community based services as an alternative to nursing facility care, to promote independence in the community and to ensure residency in the most integrated environment. Individuals must meet the minimum threshold score on a functional assessment. The FE waiver services are part of a comprehensive package of services provided by KanCare health plans (Managed Care Organizations) under a capitated rate. The health plans assign a case manager/care coordinator who will conduct a comprehensive needs assessment and develop a person-centered plan of care that includes both state plan services and, as appropriate, waiver services. Consumers continue to have a choice between consumer/self-directed services whereby they choose their attendants, or they may choose agency directed (non-self-directed) services using licensed home health agency staff as care attendants. Services available through the FE waiver are: financial management services, adult day care, assistive technology, comprehensive support - provider directed, comprehensive support - self-directed, enhanced care service, home telehealth, medication reminder, nursing evaluation visit, oral health services, personal care services - provider directed, personal care services - self-directed, personal emergency response, sleep cycle support - self-directed, and wellness monitoring.
Waiver Type	KanCare 1115(a) waiver provides managed care authority for the state's HCBS waivers through concurrent section 1115(a)/1915(c) HCBS combination waivers
Target Population-Eligibility	Individuals ages 65 or older.
Level of Care	Individuals require level of care available in a nursing facility (NF).
Respite Services	This waiver does not provide respite but does offer Adult Day Care. This service is designed to maintain optimal physical and social functioning for HCBS/FE participants. This service provides a balance of activities to meet the interrelated needs and interests (e.g., social, intellectual, cultural, economic, emotional, and physical) of HCBS/FE participants. This service includes: basic nursing care as delegated or provided by a licensed nurse and as identified in the service plan, daily supervision/physical assistance with certain activities of daily living (ADLs) limited to eating mobility and includes the following (as identified in the Customer Service Worksheet): Transfer, Bathing, and Dressing. Service may not be provided in the participant's own residence. Participants living in an Assisted Living Facility, Residential Health Care Facility, or a Home Plus are not eligible for this service. Service is limited to a maximum of two units of service per day, one or more days per week. This service shall not duplicate waiver services. Adult Day Care is provider managed.
Respite Provider Eligibility	Information on becoming a provider of services: https://kdads.ks.gov/provider-home/home-and-community-based-services-provider-information
Caregiver Eligibility	Adult Day Care may not be provided by the legally responsible person, a relative, or a legal guardian.
Enrollment Limit	7618: Year ending 12/31/2019
How to Apply	To apply, contact local Aging and Disability Resource Center (ADRC) by calling (855) 200-2372. The ADRC will conduct a functional eligibility assessment to determine functional eligibility for the waiver.
Contact Information	Call Frail/Elderly Program Manager at (785) 296-4980 for information on the HCBS Frail/Elderly program. Call the KDADS main office toll free at 800-432-3535 or email kdads.wwwmail@ks.gov
Link to Waiver Application	https://kdads.ks.gov/docs/default-source/CSP/HCBS/CMS/final-waivers-for-posting/application-for-1915(c)-hcb-waiver_-ks-0303-r04-01---mar-01-2016-frail.pdf?sfvrsn=e24e3aee_0
Expiration Date	12/31/2019, with plans to renew
Date of Last Update	07/24/2019