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Mississippi State Department of Health

570 East Woodrow Wilson Drive, Jackson, MS 39216

<http://www.msdh.state.ms.us/>

Managed Care 1915(b) and/or 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:

[MS Elderly and Disabled](#)

Provides adult day care, case management, in-home respite, personal care, extended home health, community transition, home delivered meals, institutional respite care, physical therapy, and speech therapy for individuals 65 years and older or ages 21 – 64 diagnosed with physical disabilities.

[MS Intellectual Disabilities/Developmental Disabilities \(ID/DD\)](#)

Provides day services-adults, in-home respite, prevocational services, supervised living, support coordination, supported employment, supported living, specialized medical supplies, therapy services, behavior support, community respite, crisis intervention, crisis support, home and community supports, host home, in-home nursing respite, job discovery, shared supported living, and transition assistance for individuals of any age diagnosed with autism, developmental disability, and intellectual disability.

[MS Traumatic Brain Injury/Spinal Cord Injury \(TBI/SCI\)](#)

Provides case management, personal care attendant, respite, environmental accessibility adaptations, specialized medical equipment and supplies, and transition assistance services for individuals of any age diagnosed with a brain injury or spinal cord injury.

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MS Elderly and Disabled Waiver (0272.R05.00)

State Operating Agency: Long-term Care, Division of Elderly and Disabled Waiver Program

Description	<p>The goal of the waiver is to provide high quality of care to assure the participants can attain and maintain life in a home and community based setting and avoid institutionalization. Case management agencies perform the comprehensive assessment to determine the participant needs, preferences and goals for services and arrange for those services through a person-centered approach.</p> <p>This waiver provides adult day care, case management, in-home respite, personal care, extended home health, community transition, home delivered meals, institutional respite care, physical therapy, and speech therapy.</p>
Waiver Type	1915(c)
Target Population-Eligibility	Individuals 65 years and older or ages 21 – 64 diagnosed with physical disabilities.
Level of Care	Individuals require level of care available in a nursing facility (NF).
Respite Services	<p>This waiver offers two forms of respite services: in-home respite and institutional respite.</p> <p>In-home respite is provided to individuals unable to care for themselves, on a short-term basis because of the absence or need for relief of those person's normally providing the care. Respite is non-medical care and supervision provided to the participant in the absence of the participant's primary full-time, live-in caregiver(s) on a short-term basis. Services assist the caregiver(s) during a crisis situation and/or as scheduled relief to the primary caregiver(s) to prevent, delay or avoid premature institutionalization. In-home respite is provided in the home of the participant. The participant must be homebound due to physical or mental impairments where they are normally unable to leave home unassisted, require 24 hour assistance of the caregiver, and unable to be left alone and unattended for any period of time. Respite will be approved for no more than sixty (60) hours per month to any participant.</p> <p>Institutional Respite is services provided to participants who are unable to care for themselves and because of the absence or need for relief of those persons normally providing this care. Services can be used for up to thirty calendar days per fiscal year. The days do not have to be taken concurrently. Both forms of respite are provider-managed.</p>
Respite Provider Eligibility	For Provider eligibility information go to the Mississippi Division of Medicaid website: http://www.medicaid.ms.gov/providers/
Caregiver Eligibility	Neither in-home nor institutional respite may not be provided by relative, legal guardian or legally responsible person.
Enrollment Limit	22200: Year ending 06/30/2022
How to Apply	Contact the Division of Medicaid Long-term Care at 1-800-421-2408 or 601-359-6141
Contact Information	<p>Division of Medicaid: 550 High Street, Suite 1000, Jackson, MS 39201 Or Phone: 1-800-421-2408, 1-601-359-6141</p> <p>More information is available on the program fact sheet at https://medicaid.ms.gov/wp-content/uploads/2016/02/Fact-Sheet_Elderly-and-Disabled-Waiver.pdf</p>
Link to Waiver Application	https://medicaid.ms.gov/wp-content/uploads/2017/05/ED-Approval.pdf
Expiration Date	06/30/2022
Date of Last Update	07/22/2019

MS Intellectual Disabilities/Developmental Disabilities (ID/DD) Waiver (0282.R05.00)

State Operating Agency: Department of Mental Health (DMH), Bureau of Intellectual and Developmental Disabilities (BIDD)

<p>Description</p>	<p>This waiver aims: to provide access to meaningful and necessary home and community-based services and supports; to provide services in a culturally competent, person-centered manner; and to provide services and supports that facilitate an individual living as independently as possible in his/her community. Services are available statewide without regard to age.</p> <p>This waiver provides day services-adults, in-home respite, prevocational services, supervised living, support coordination, supported employment, supported living, specialized medical supplies, therapy services, behavior support, community respite, crisis intervention, crisis support, home and community supports, host home, in-home nursing respite, job discovery, shared supported living, and transition assistance.</p>
<p>Waiver Type</p>	<p>1915(c)</p>
<p>Target Population-Eligibility</p>	<p>Individuals of any age diagnosed with autism, developmental disability, or intellectual disability.</p>
<p>Level of Care</p>	<p>Individuals require level of care available in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).</p>
<p>Respite Services</p>	<p>This waiver provides three forms of respite: in-home respite, in-home nursing respite, and community respite.</p> <p>In-Home Respite provides temporary, periodic relief to those persons normally providing care for the eligible individual. In-Home Respite staff provides all the necessary care the usual caregiver would provide during the same time period. In-Home Respite is only available to individuals living in a family home and is not permitted for individuals living independently, either with or without a roommate. In-Home Respite is not available for people who receive Supported Living, Supervised Living, Shared Supported Living, Host Home services, or who live in any other type of staffed residence, or for people who are in the hospital, an ICF/IID, nursing home, or other type of rehabilitation facility that is billing Medicaid, Medicare, and/or private insurance, including inpatient psychiatric facilities. In-Home Respite cannot be provided in the provider’s residence. Activities are to be based upon the outcomes identified in the PSS and implemented through the Activity Support Plan, including: assistance with personal care needs such as bathing, dressing, toileting, grooming; assistance with eating and meal; assistance with transferring and/or mobility; and leisure activities.</p> <p>In-Home Nursing Respite has all of the above qualities of In-Home Respite. In-Home Nursing Respite is provided by a registered or licensed practical nurse and is provided for persons who require skilled nursing services as prescribed by a physician in the absence of the primary caregiver. The need for administration of medications alone is not a justification for receiving In-Home Nursing Respite.</p> <p>Community Respite is provided in a community setting (DMH certified site which is not a private residence) and is designed to provide caregivers an avenue of receiving respite while the individual is in a setting other than his/her home. Community Respite service settings must be physically accessible to the person and must be integrated in, and support full access of persons receiving Medicaid HCBS to, the greater community and be selected by the person. Each individual must have an Activity Support Plan that is developed with the person and is based on his/her Plan of Services and Supports.</p> <p>Community Support cannot be provided overnight. Community Respite is not used in place of regularly scheduled day activities such as Supported Employment, Day Services-Adult, Prevocational Services or services provided through the school system. Individuals who receive Host Home services, Supervised Living, Shared Supported Living or Supported Living or who live in any type of staffed residence cannot receive Community Respite.</p>

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Community Respite settings do not include the following: A nursing facility; An institution for people with mental illness; An intermediate care facility for individuals with intellectual disabilities (ICF/IID); A hospital; Any other locations that have qualities of an institutional setting, as determined by the State; or any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, or in a building on the grounds of, or immediately adjacent to, a publicly or privately operated facility that provides inpatient institutional treatment, or any other setting that has the effect of isolating persons receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS.

Respite Provider Eligibility	For Provider eligibility information go to the Mississippi Division of Medicaid website: http://www.medicaid.ms.gov/providers/
Caregiver Eligibility	In-home respite may be provided by a relative but not a legally responsible person, or legal guardian. Community respite and in-home nursing respite may not be provided by a relative, legally responsible person, or legal guardian.
Enrollment Limit	4150: Year ending 06/30/2023
How to Apply	To apply for the ID/DD Waiver, you must first apply at a Department of Mental Health Regional Center. You can find a listing of these centers at https://medicaid.ms.gov/wp-content/uploads/2016/02/Fact-Sheet_Intellectual-Disabilities-and-Developmental-Disabilities-Waiver.pdf
Contact Information	Division of Medicaid: 550 High Street, Suite 1000, Jackson, MS 39201 Or Phone: 1-800-421-2408, 1-601-359-6141 More information is available on the program fact sheet at https://medicaid.ms.gov/wp-content/uploads/2016/02/Fact-Sheet_Intellectual-Disabilities-and-Developmental-Disabilities-Waiver.pdf
Link to Waiver Application	https://medicaid.ms.gov/wp-content/uploads/2018/09/1915c-IDDD-Waiver-approved-effective-070118.pdf
Expiration Date	06/30/2023
Date of Last Update	07/22/2019

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MS Traumatic Brain Injury Spinal Cord Injury (TBI/SCI) Waiver (0366.R03.00)

State Operating Agency: Mississippi Department Rehabilitation Services (MDRS), Division of Medicaid

Description	<p>This waiver strives to identify the needs of the dependent participant and provide services in the most cost efficient manner possible with the highest quality of care and without the need for institutionalization. This is accomplished through the utilization of a comprehensive Long-term Support Services (LTSS) assessment process that provides a No Wrong Door entry concept for individuals seeking long-term care services and is designed to fill two primary functions: 1) determine eligibility for Medicaid long-term care across both institutional and HCBS settings; and 2) facilitate informed choices by persons applying for services.</p> <p>The services provided are: case management, personal care attendant, respite, environmental accessibility adaptations, specialized medical equipment and supplies, and transition assistance services.</p>
Waiver Type	1915(c) waiver operates concurrently with 1915(b) waiver for case management services
Target Population-Eligibility	Individuals of any age diagnosed with a traumatic brain injury or spinal cord injury. In addition, individuals must be certified as medically stable by their physician.
Level of Care	Individuals require level of care available in a nursing facility (NF).
Respite Services	<p>Respite services are provided to individuals unable to care for themselves; furnished on a short-term basis because of the absence or need for relief of those persons normally providing the care. Respite can fall under three categories based on the activities, settings, and provider type: in-home companion respite, in-home nursing respite, or institutional respite.</p> <p>In-home Companion Respite - 288 hours per year allowed.</p> <p>In-home Nursing Respite - 288 hours per year allowed.</p> <p>Institutional Respite - 720 hours per year allowed.</p> <p>Respite services may be participant directed or provider managed.</p>
Respite Provider Eligibility	For Provider eligibility information go to the Mississippi Division of Medicaid website: http://www.medicaid.ms.gov/providers/
Caregiver Eligibility	Respite may not be provided by a relative, legal guardian or legally responsible person.
Enrollment Limit	3600: Year ending 06/30/2020
How to Apply	Contact the Division of Medicaid Long-term Care at 1-800-421-2408 or 601-359-6141
Contact Information	<p>Division of Medicaid: 550 High Street, Suite 1000, Jackson, MS 39201</p> <p>Or Phone: 1-800-421-2408, 1-601-359-6141</p> <p>More information is available on the program fact sheet at https://medicaid.ms.gov/wp-content/uploads/2016/02/Fact-Sheet_Traumatic-Brain-Injury_Spinal-Cord-Injury-Waiver.pdf</p> <p>You may also contact the Department of Rehabilitation Services at 1-800-443-1000.</p>
Link to Waiver Application	https://medicaid.ms.gov/wp-content/uploads/2018/04/1915c-TBI-SCI-approved-7.1.15.pdf
Expiration Date	06/30/2020
Date of Last Update	07/22/2019