

***The Arc***<sup>®</sup>  
*of Louisiana*

## Louisiana Department of Health's Disability Service System

Office for Citizens with Developmental Disabilities (OCDD)  
&  
Office of Aging and Adult Services (OAAS)

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## Disability Service Delivery System

The Service delivery system is split up into three offices under the Louisiana Department of Health (LDH): The Office for Citizens with Developmental Disabilities (OCDD), the Office for Aging & Adult Services (OAAS), and the Office of Behavioral Health (OBH). Within each of these offices there are programs that are both Medicaid funded and state funded.

**Legacy Medicaid** - Provides medical benefits to low-income individuals and families. However, it also funds support and services for individuals who have disabilities and the elderly. The services are made available through a Waiver. **This can be found in the legislative budget under LDH- Schedule 9.**

**Act 421/ Children's Medicaid Option (TEFRA)** - allows certain children who have a disability to receive Medicaid coverage, even if their parents earn too much money to qualify for Medicaid. Children with disabilities living at home with their family that apply for Act 421-CMO **must** meet an institutional level of care for an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), Nursing Facility or Hospital to be considered for this program. **This can be found in the legislative budget under LDH- Schedule 9.**

**State General Fund services**- Fund services that have been made available based on Legislative appropriation from the State General Funds. These services are made available through a program or a project that the state completely funds. **This can be found in the legislative budget under LDH- Schedule 9.**

**Behavioral Health Managed Care** – Provides mental health and substance abuse disorder services managed by Healthy Louisiana. The CSoc Waiver program is managed by Magellan.

- Louisiana's Coordinated System of Care (CSoc) is the state's effort to make sure that young people in or at risk of out of home placement with significant behavioral health challenges are able to receive the supports and services they need.

Programs offered to individuals who have disabilities under these three departments are funded by state general funds and then matched with Medicaid dollars based on the current FMAP (federal funding formula.)

**Both of these funding streams provide an array of services and support that are available to children and adults who have disabilities and their families.**

Below are lists of services that are offered through **Home and Community Based Service** providers. Most of these services are offered in both OCDD and OAAS, but there are a few that are not offered in both departments. Many of the individual's

providers serve have no family and rely totally on providers to care for them and in many ways are lifesaving services to the people they serve.

### **Children Services (Birth - 3 years)**

Providers help teach families and caregivers how to work with the child so that therapies for early development continue around the clock, and the goals set are ultimately achieved. The entire Early Intervention program includes special instruction, speech therapy, occupational therapy, physical therapy, social work, nursing services and parent education.

**Early Intervention/EarlySteps** - Early Intervention supports are community-based services that are provided to individuals who have challenges that might hinder their ability to grow and learn. Our therapists and social workers drive to what we call the child's natural environment, which is where the child lives, plays and/or interacts with caregivers such as the home or child care center.

**Family Service Coordination** – Provides Family Service Coordination Services through the Early Steps Program for families with infants and toddlers ages birth – 3 years who have a medical condition and/or developmental delays. Staff works with families to assess needs and identify services for children.

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### **Day / Employment Services (18 & up)**

Providers have successfully helped individuals with disabilities find meaningful employment. More and more employers are discovering the advantages of hiring adults with Intellectual and Developmental Disability (IDD); they have a higher retention rate, less tardiness, and take great pride in everything they do. We have helped individuals who stayed in the same job for 25 years and retired with full benefits.

**Day-Habilitation Programs** - The day habilitation programs allow individuals with the most significant intellectual and developmental disabilities the opportunity to learn and maintain various life and social skills.

**Supported Employment/Individual Job Placement**- Staff work with each individual to explore their interest, strengths, skills and aptitudes. Staff member walks the individual throughout the interview and hiring process, and maintains a role in the employer-employee relationship for as long as needed. Job Coaching is provided if needed to train the individual until the employer's expectations are met. Support staff gradually fades away from the job site or workplace and continues to follow up indefinitely throughout the individual's career with the employer.

**Small Groups Placement** - Are when 3 to 4 workers who have the same schedule can be successfully placed as a group with an employer- with a supervisor. We provide transportation to and from work, and take care of compensation, taxes, benefits, workers comp and liability requirements.

**Mobile Crews** - There are times when out-sourcing is the most sensible solution. For short or long-term projects, we provide supervised contract crews (for up to 8 individuals at a time) for direct assignments. As with small group placement, we provide transportation and cover all necessary liability, workers comp and payroll functions.

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### **Individual and Family Support Services**

Providers make it possible for persons with disabilities to live safe, healthy and meaningful lives in their own homes or with a family member. Most individuals with disabilities that require around the clock assistance or those who need help with meals, getting dressed, or getting around in the community. Our Direct Support workers assist individuals in their homes, eliminating the need for facility-based care.

**Center-based Respite Care** - The Respite Care Center provides short-term shelter and emergency lodging for persons of all ages with intellectual and developmental disabilities. It offers a safe environment with complete accessibility, necessary equipment and trained staff to meet the individual needs of our clients 24 hours a day, 7 days a week. This center serves as a place to give families a break, and it serves as a safe haven for individuals who have been removed from their home due to an unexpected absence of a caregiver, or due to allegations of abuse or neglect.

**Community Life - Independent Living** – This program provides the supports and opportunities that enable persons with disabilities to live independently in their own homes and be a part of their communities. Our staff schedules regular visits to client's homes, helps them with day-to-day skills of housekeeping, planning, shopping and preparing healthy meals, paying bills, attending church and tending to personal business in the community.

**In Home Respite** - Provides respite care to eligible individuals of all ages within home or community settings. The Respite Care Services provide supervision, assistance and/or support by trained staff, allowing parents, family members or primary caregivers a break or period of rest. Respite services can take place within the home or in a community setting.

**Personal Care Services** - Provides personal care services to individuals with disabilities to prevent the need for institutionalization. At the same time, these services also provide opportunities to engage in social or leisure activities outside the home.

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### **Residential Services (Est. 4,483 served)**

**Community Homes/Group Homes-** Often referred to as ICF/IDD (Intermediate Care Facility/Intellectual and Developmental Disabilities.)

Offers a small, family like home setting where people with intellectual and developmental disabilities can live and receive all the supports that are needed to live as independently as possible. Providers are responsible for ALL care and services needed, and staff is provided 24/7. Homes are typically located in neighborhoods of single-family homes. These homes are NOT institutional in nature.

Providers coordinate medical care and advocacy, behavioral and mental health supports, recreation and social opportunities, work training and job placement services, transportation, management of personal finances and assist with the management of all other personal affairs. Providers are reimbursed on a per diem rate and are responsible for the cost of all of these services.

Note: Large state institutions are also ICF/IDDs (Pinecrest Supports and Services Center), but almost all others are community based.

### **Description of Home and Community Based Waiver Programs offered through OCDD:**

Medicaid home and community-based waiver programs allow people greater flexibility to choose where they want to live and to use services and supports that best suit their needs. Services that are provided must represent a least-restrictive treatment alternative. Each home and community-based waiver has specific service packages and eligibility requirements. Waiver opportunities are dependent upon funding, and are also offered based on the individual's need and priority level from their Screening for Urgency of Need (SUN) through the Request for Services Registry.

**Children's Choice Waiver:** The Children's Choice Waiver began February 21, 2001, to offer supplemental support to children with developmental disabilities who currently live at home with their families or with a foster family 0 through 20 years of age. See fact sheet attached.

**NOW Waiver Services:** The New Opportunities Waiver (NOW) began in April 2003, replacing the Mentally Retarded and Developmentally Disabled Waiver (MRDD Waiver). The mission of the NOW is to utilize the principles of self-determination to supplement the family and/or community supports while supporting dignity, quality of life, and security in the everyday lives of people while maintaining the Recipient in the community. See fact sheet attached.

**Residential Options Waiver (ROW):** The Residential Options Waiver initially approved by CMS October 1, 2009 began serving its first participants during the 2010 fiscal year. It was developed to assist people to transition from Intermediate Care Facilities for persons with intellectual and developmental disabilities (ICF/IDD) to their own home in the community. See fact sheet attached.

**Supports Waiver:** The Supports Waiver began July 1, 2006, as a way to provide options and meaningful opportunities through vocational and community inclusion for

individuals who are 18 years of age and older, and meet the eligibility criteria for waiver services. See fact sheet attached.

## **Description of Home and Community Based Waiver Programs offered through OAAS:**

The Office of Aging and Adult Services (OAAS) administers home and community based long-term care services (HCBS) through various waiver and state plan programs for individuals who are elderly or have disabilities, assisting them to remain in their homes and in the community. The intent of these HCBS programs is to provide services and supports that are not otherwise available and that assist an individual to remain in or return to the community.

**Community Choices Waiver:** The Community Choices Waiver (CCW) serves seniors and persons with adult onset disabilities as an alternative to nursing facility care. The CCW contains a wide array of services including: support coordination, nursing and skilled therapy assessments and services, in-home monitoring systems, home modifications and assistive technologies, personal care, home-delivered meals, monitored in-home caregiving, and caregiver respite. See fact sheet attached.

**Adult Day Health Care Waiver:** The Adult Day Health Care Waiver (ADHC) is a community-based service delivered in an adult day health center which provides supervised care to adults in a supportive and safe setting during part of a day. Services provided by staff at licensed ADHC facilities include personal care assistance, health education, health screening, medication management, and others. See fact sheet attached.

**Long-Term Personal Care Services:** The Long-Term Personal Care Services program provides help with activities of daily living for people who qualify for assistance under the program guidelines. This program does not individually or in combination with other OAAS programs provide 24 hour per day supports. See fact sheet attached.

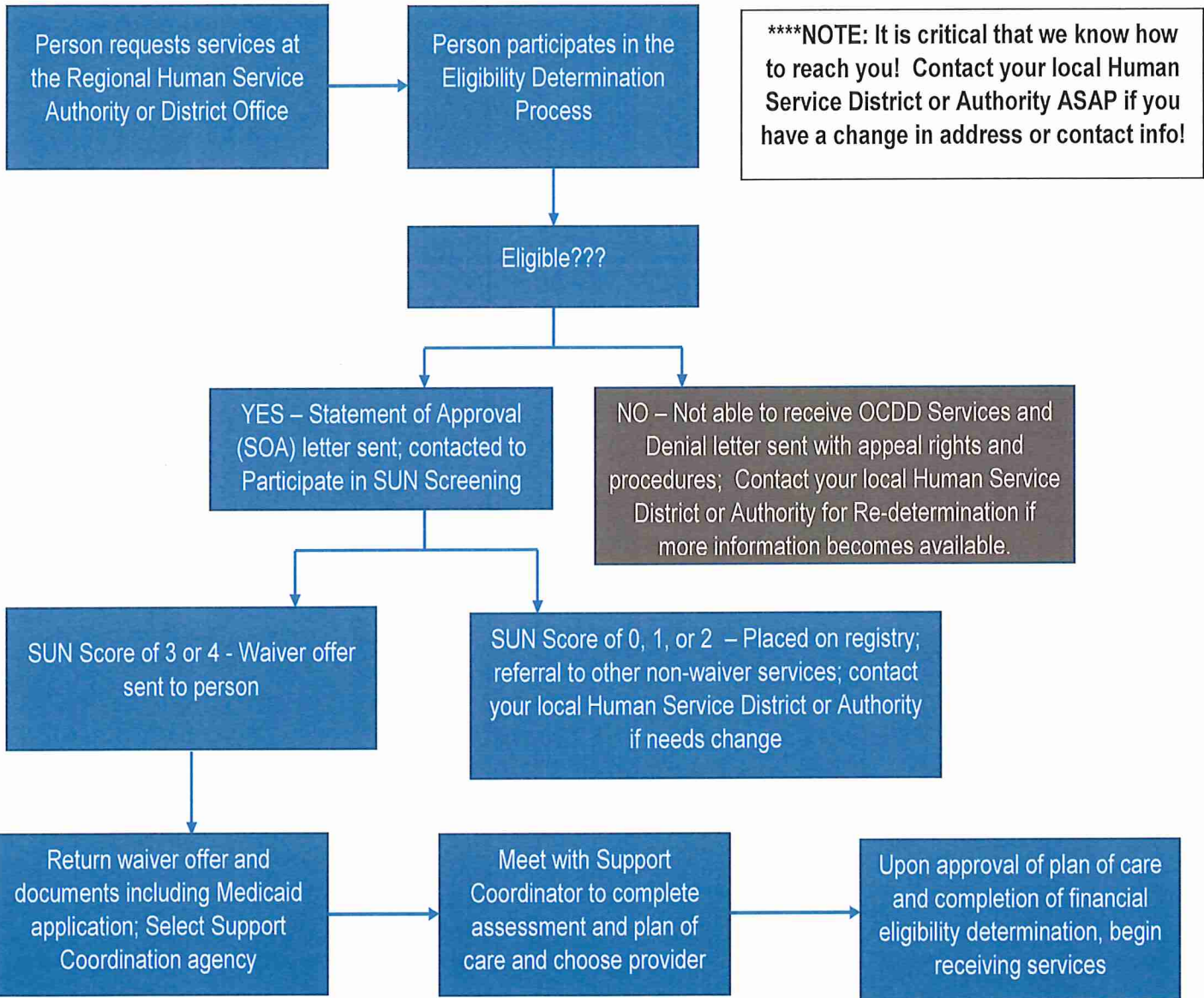
**Program for All-Inclusive Care for the Elderly (PACE):** This program coordinates and provides all needed preventive, primary, acute and long-term care services so that older people can continue living in the community. The emphasis is on enabling senior citizens to remain in their communities while enhancing their quality of life. See fact sheet attached.

**Traumatic Head & Spinal Cord Injury Trust Fund Program:** The Traumatic Head and Spinal Cord Injury Trust Fund (THSCI) was created by the Louisiana Legislature in 1993 with Act 654, which imposes additional fees on motor vehicle violations in Louisiana for the offenses of driving under the influence, reckless operation, and speeding. These fees provide the funds for this program. The Trust Fund Program provides services in a flexible, individualized manner to Louisiana citizens with traumatic head or traumatic spinal cord injuries. The program enables individuals to return to a reasonable level of functioning and independent living in their communities. See fact sheet attached.

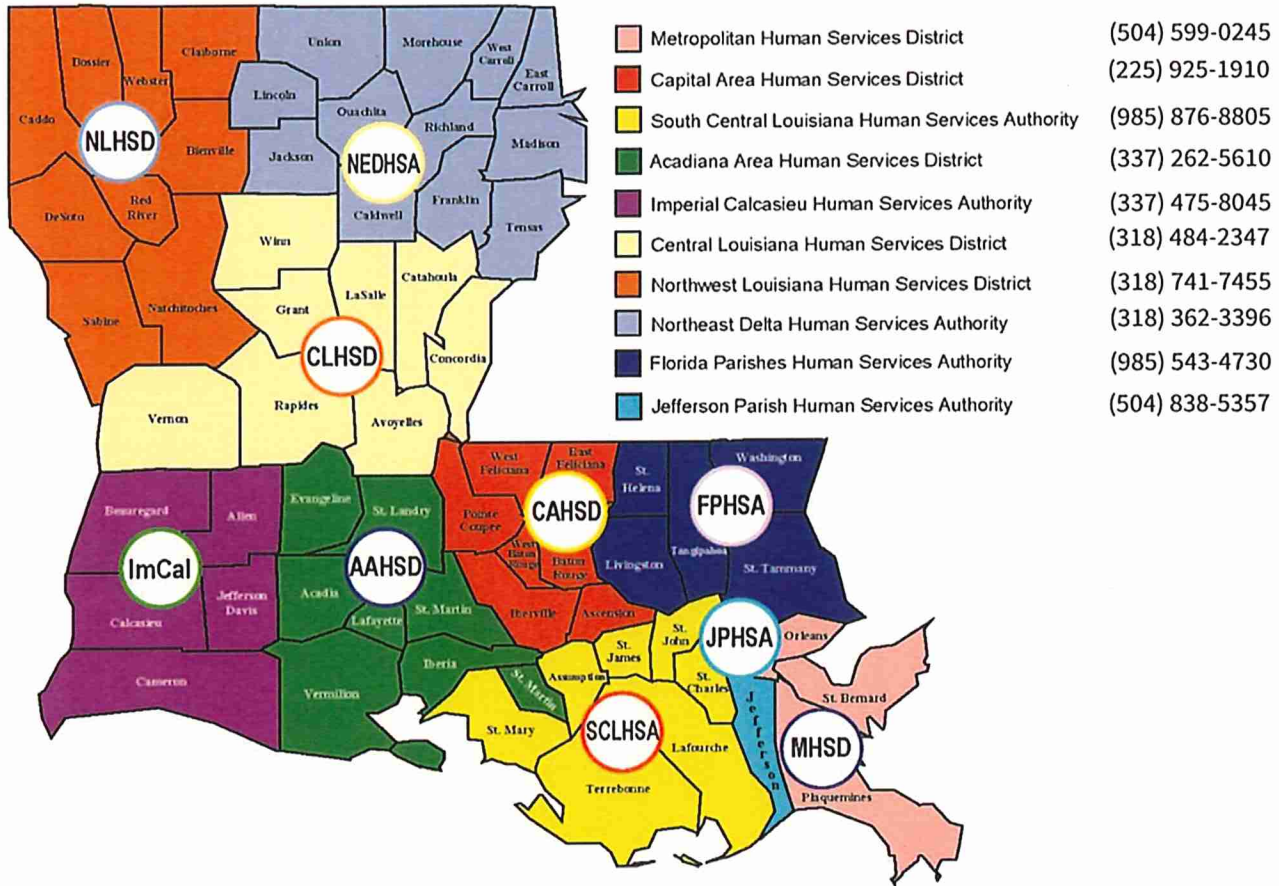
**State Personal Assistance Services Program:** The State Personal Assistance Services program provides supports and services to adults with significant disabilities. These services assist with activities of daily living, and will enhance their employability and/or to avoid unnecessary institutionalization. See fact sheet attached.

**Process for receiving disability services**

FLOWCHART OF PROCESS FROM REQUESTING DD SERVICES TO OBTAINING WAIVER SERVICES



# Regional Human Service Authority or District Offices



The Office for Citizens with Developmental Disabilities (OCDD) serves as the Single Point of Entry into the developmental disabilities services system through the regional human service authority or district offices.



**The following are brief descriptions of those services and programs.**

### **FLEXIBLE FAMILY FUND OCDD**

provides monthly stipends to families of eligible children with severe or profound developmental disabilities from birth to age 18 to help families meet extraordinary costs.

### **EARLYSTEPS**

Louisiana's early intervention system for children with disabilities and developmental delay ages birth to three, provides speech/language, occupational and physical therapies, special instruction, assistive technology, service coordination, audiology and vision services, social work services, psychology services, family training, nutritional services, transportation; and medical, health and nursing services.

### **INDIVIDUAL AND FAMILY SUPPORT**

Individual and Family Support provides assistance not available from any other resource. These services include respite care, personal assistance services, specialized clothing, dental and medical services, equipment and supplies, communication services, crisis intervention, specialized utility costs, specialized nutrition, and family education. Services are provided through contractual agreements by private provider agencies or through individualized agreements with individuals and families who obtain their own service providers.

## Resources

### OCDD:

Home page: <http://dhh.louisiana.gov/index.cfm/subhome/11>

OCDD Services and Programs: <http://dhh.louisiana.gov/index.cfm/page/136>

OCDD Waiver Services: <http://dhh.louisiana.gov/index.cfm/page/142>

Districts and Authorities (LGEs)

<http://dhh.louisiana.gov/index.cfm/directory/category/145>

Early Steps <http://dhh.louisiana.gov/index.cfm/page/139>

Resources (Publications, Manuals, Reports, Forms)

<http://dhh.louisiana.gov/index.cfm/page/138>

Freedom of Choice Provider Listing <http://dhh.louisiana.gov/index.cfm/page/141>

### OAAS:

Home Page: <http://www.ldh.la.gov/index.cfm/subhome/12>

OAAS Services and Programs: <http://www.ldh.la.gov/index.cfm/page/121>

OAAS Waiver Services: <http://www.ldh.la.gov/index.cfm/page/121>

Resources (Manuals , Publications, Reports, Etc.)

<http://www.ldh.la.gov/index.cfm/page/129>

Freedom of Choice Provider Listing:

[https://www.lamedicaid.com/provider\\_demographics/provider\\_map.aspx](https://www.lamedicaid.com/provider_demographics/provider_map.aspx)

# CHILDREN'S CHOICE WAIVER FACT SHEET

## What is the Children's Choice Waiver?

The Children's Choice Waiver (CC) program provides services in the home and in the community to individuals 0 through 20 years of age, who currently live at home with their families or who will leave an institution to return home. This waiver provides an individualized support package with a maximum cost of \$20,650 per year, and is designed for maximum flexibility.

Youth who reach the age of 18 and want to work may choose to transition to a Supports Waiver as long as they remain eligible for waiver services. Please see link below for more information regarding the Supports Waiver.

Youth who continue in the Children's Choice Waiver beyond age 18 will age out of Children's Choice Waiver when they reach their 21st birthday. They will transition to the most appropriate waiver that meets their needs as long as they remain eligible for waiver services.

This program is not intended to provide 24 hours a day support

***\*Youth age 0 to 3 individuals must meet the My Place eligibility requirements.***

***\*Youth age 3 to 20 individuals must have an Office for Citizens with Developmental Disabilities Statement of Approval***

## Who can qualify?

Individuals who:

- Meet Louisiana Medicaid eligibility **AND**
- Meet the Louisiana definition for developmental disability which manifested prior to age 22 (Revised Statute 28:451.2, Paragraph (11)) **AND**
- Have an OCDD Statement of Approval **AND**
- Meet My Place eligibility if age 0-3 **AND**
- Meet Intermediate Care Facility-Intellectual Disability (ICF-ID) Level of Care Criteria **AND** are 0 through 20 years of age

## If I qualify, what services may I receive?

- Support Coordination
- Family Support
- Crisis Support
- Center-Based Respite
- Family Training
- Environmental Accessibility Adaptions
- Specialized Medical Equipment
- Permanent Supportive Housing Stabilization and Transition
- Therapy Services
  - Aquatic Therapy
  - Art Therapy
  - Music Therapy
  - Hippo-Therapy/Therapeutic Horseback Riding
  - Sensory Integration

***\*Individuals who receive the CC Waiver may also receive EPSDT personal care services.***

## How can I request an OCDD waiver?

Individuals who have a need for services should contact their Local Governing Entity (LGE) in order to go through the eligibility determination process. Once a person is eligible for OCDD services, they may ask to be placed on the Developmental Disability Request for Services Registry (RFSR).

Home and community-based waiver opportunities are provided based on the individual's prioritized need for support, which is identified in their RFSR Screening for Urgency of Need. Individuals with the emergent and urgent need for support will have priority.

For more information on this process, please contact your Local Governing Entity (LGE).

## Additional resources and contact information for the Children's Choice Waiver

Children's Choice Waiver Website: <https://ldh.la.gov/page/218>

OCDD Resources Website: <https://ldh.la.gov/index.cfm/page/138>

Local Governing Entity (LGE) map: <http://ldh.la.gov/index.cfm/page/134>

OCDD State Office: 1-866-783-5553 or email at [OCDD-hcbs@la.gov](mailto:OCDD-hcbs@la.gov)

Individuals who under 21 years of age may access Early Periodic Screening and Diagnostic Treatment (EPSDT) services: <https://ldh.la.gov/index.cfm/page/334>

My Place Louisiana: <https://ldh.la.gov/index.cfm/page/147>

Permanent Supportive Housing Services: <https://ldh.la.gov/index.cfm/page/1732>

OCDD Employment First Initiative: <https://ldh.la.gov/index.cfm/page/1847>

# NEW OPPORTUNITIES WAIVER FACT SHEET

## What is the New Opportunities Waiver?

The New Opportunities Waiver (NOW) program provides services in the home and in the community to individuals 3 years of age or older who are eligible to receive OCDD waiver services.

The NOW is intended to provide specific activity-focused services rather than continuous custodial care.

## Who can qualify?

Individuals who:

- Meet Louisiana Medicaid eligibility **AND**
- Meet the Louisiana definition for developmental disability which manifested prior to age 22 (Revised Statute 28:451.2, Paragraph (11)) **AND**
- Have an OCDD Statement of Approval **AND**
- Meet Intermediate Care Facility-Intellectual Disability (ICF-ID) Level of Care Criteria **AND**
- Are 3 years of age or older **AND**
- Whose needs cannot be met in another OCDD waiver

## If I qualify, what services may I receive?

- Individual and Family Support (IFS) for Day, Night, Shared
- Center-Based Respite
- Community Life Engagement Development
- Environmental Accessibility Adaptations
- Specialized Medical Equipment
- Supported Independent Living
- Substitute Family Care
- Day Habilitation/Community Life Engagement and Transportation
- Remote Supports
- Supported Employment (individual or group) and Transportation
- Prevocational/Community Career Planning and Transportation
- Personal Emergency Response System (PERS)
- Skilled Nursing
- One time transitional services
- Housing Stabilization Transition
- Housing Stabilization
- Monitored In Home Care Giving (MIHC)
- Adult Companion Care
- Professional Services
- Expanded Dental Services for Adult Waiver Beneficiaries

***\*Individuals will receive Support Coordination services via state plan.***

***\*Individuals who receive the NOW may NOT receive LT-PCS services.***

## How can I request an OCDD waiver?

Individuals who have a need for services should contact their Local Governing Entity (LGE) in order to go through the eligibility determination process. Once a person is eligible for OCDD services, they may ask to be placed on the Developmental Disability Request for Services Registry (RFSR).

Home and community-based waiver opportunities are provided based on the individual's prioritized need for support, which is identified in their RFSR Screening for Urgency of Need. Individuals with the emergent and urgent need for support will have priority.

For more information on this process, please contact your Local Governing Entity (LGE).

## Additional resources and contact information for the New Opportunities Waiver

New Opportunities Waiver Website: <https://ldh.la.gov/index.cfm/page/283>

OCDD Resources Website: <https://ldh.la.gov/index.cfm/page/138>

Local Governing Entity (LGE) map: <http://ldh.la.gov/index.cfm/page/134>

OCDD State Office: 1-866-783-5553 or email at [OCDD-hcbs@la.gov](mailto:OCDD-hcbs@la.gov)

Individuals who are 0-21 years of age may access Early Periodic Screening and Diagnostic Treatment (EPSDT) services: <https://ldh.la.gov/index.cfm/page/334>

My Place Louisiana: <https://ldh.la.gov/index.cfm/page/147>

OCDD Employment First Initiative: <https://ldh.la.gov/index.cfm/page/1847>

# RESIDENTIAL OPTIONS WAIVER FACT SHEET

## What is the Residential Options Waiver?

The Residential Options Waiver (ROW) program provides services in the home and in the community to individuals of all ages who are eligible to receive OCDD waiver services. It is a capped waiver where the person's individual annual budget is based upon the person's assessed support needs.

Supports needs are determined by an Inventory for Client and Agency Planning (ICAP) assessment. Beneficiaries may choose to self-direct all or part of his/her Community Living Supports. This program is not intended to provide 24 hours a day one-to-one support.

## Who can qualify?

Individuals birth to end of life who:

- Meet Louisiana Medicaid eligibility **AND**
- Have an OCDD Statement of Approval **AND**
- Meet the Louisiana definition for developmental disability which manifested prior to age 22 (Revised Statute 28:451.2, Paragraph (12)) **AND**
- Meet Intermediate Care Facility-Intellectual Disability (ICF-ID) Level of Care Criteria **AND**
- Meet one of four ROW priority group criteria

## If I qualify, what services may I receive?

- Support Coordination
- Community Living Supports
- Host Home Services
- Companion Care Services
- Shared Living
- Adult Day Health Care
- Respite Care-Out of Home
- Personal Emergency Response System (PERS)
- One Time Transitional Services
- Environmental Accessibility Adaptations
- Monitored in Home Caregiving (MIHC)
- Assistive Technology/Specialized Medical Equipment and Supplies
- Community Life Engagement Development
- Remote Supports
- Transportation-Community Access
- Professional Services
- Nursing Services
- Supported Employment (individual or group) and Transportation
- Prevocational/Community Career Planning and Transportation
- Day Habilitation/Community Life Engagement and Transportation
- Housing Stabilization Service
- Housing Stabilization Transition
- Expanded Dental Services for Adult Waiver Beneficiaries

***\*Individuals under 21 years of age must access Early Periodic Screening and Diagnostic Treatment (EPSDT) services.***

***\*Individuals who receive the ROW may NOT receive Long Term-Personal Care Services (LT-PCS) when in this program.***

## How can I request an OCDD waiver?

Individuals who have a need for services should contact their Local Governing Entity (LGE) in order to go through the eligibility determination process. Once a person is eligible for OCDD services, they may ask to be placed on the Developmental Disability Request for Services Registry (RFSR).

Home and community-based waiver opportunities are provided based on the individual's prioritized need for support, which is identified in their RFSR Screening for Urgency of Need. Individuals with the emergent and urgent need for support will have priority.

For more information on this process, please contact your local Human Services District/Authority.

## Additional resources and contact information for the Residential Options Waiver

Residential Options Waiver Website: <https://ldh.la.gov/index.cfm/page/1875>

OCDD Resources Website: <https://ldh.la.gov/index.cfm/page/138>

Local Governing Entity (LGE) map: <http://ldh.la.gov/index.cfm/page/134>

OCDD State Office: 1-866-783-5553 or email at [OCDD-hcbs@la.gov](mailto:OCDD-hcbs@la.gov)

Early Periodic Screening and Diagnostic Treatment (EPSDT) services:  
<https://ldh.la.gov/index.cfm/page/334>

Long Term-Personal Care Services (LT-PCS):  
[https://ldh.la.gov/assets/docs/OAAS/publications/FactSheets/LT-PCS\\_Fact\\_Sheet.pdf](https://ldh.la.gov/assets/docs/OAAS/publications/FactSheets/LT-PCS_Fact_Sheet.pdf) Permanent

Supportive Housing (PSH) Services: <https://ldh.la.gov/index.cfm/page/1732>

My Place Louisiana: <https://ldh.la.gov/index.cfm/page/147>



# SUPPORTS WAIVER FACT SHEET

## What is the Supports Waiver?

The Supports Waiver (SW) program provides services in the home and in the community to individuals **18 years of age or older**, who are eligible to receive OCDD waiver services.

This program is not intended to provide 24 hours a day support.

*\*Individuals who are 18-21 years of age may access Early Periodic Screening and Diagnostic Treatment (EPSDT) services*

*\*Individuals 21 years of age or older who receive the SW may also receive Long Term-Personal Care Services. (LT-PCS)*

## Who can qualify?

**Individuals who:**

- Meet Louisiana Medicaid eligibility **AND**
- Meet the Louisiana definition for developmental disability which manifested prior to age 22 (Revised Statute 28:451.2, Paragraph (11)) **AND**
- Have an OCDD Statement of Approval **AND**
- Meet Intermediate Care Facility-Intellectual Disability (ICF-ID) Level of Care Criteria **AND**

*Individuals should contact their Local Governing Entity (LGE) in order to go through the eligibility determination process.*

## If I qualify, what services may I receive?

- Support Coordination
- Supported Employment (individual or group) and transportation
- Day Habilitation/Community Life Engagement and Transportation
- Prevocational/Community Career Planning and transportation
- Habilitation
- Respite (center-based or in home)
- Permanent Supportive Housing Stabilization and Transition
- Personal Emergency Response System (PERS)
- Expanded Dental Services for Adult Waiver Beneficiaries
- Community Life Engagement Development

*\*For more information on each service, please refer to the Supports Waiver website.*

## How can I request an OCDD waiver?

Individuals who have a need for services should contact their Local Governing Entity (LGE) in order to go through the eligibility determination process. Once a person is eligible for OCDD waiver services, they may ask to be placed on the Developmental Disability Request for Services Registry (RFSR).

Home and community-based waiver opportunities are provided based on the individual's prioritized need for support, which is identified in their Request for Services Registry Screening for Urgency of Need. Individuals with the most emergent and urgent need for support will have priority.

For more information on this process, please contact your LGE.

## Additional resources and contact information for the Supports Waiver

Supports Waiver Website: <https://ldh.la.gov/index.cfm/page/1828>

OCDD Resources Website: <https://ldh.la.gov/index.cfm/page/138>

Local Governing Entity (LGE) map: <http://ldh.la.gov/index.cfm/page/134>

OCDD State Office: 1-866-783-5553 or email at [OCDD-hcbs@la.gov](mailto:OCDD-hcbs@la.gov)

Early Periodic Screening and Diagnostic Treatment (EPSDT) services:  
<https://ldh.la.gov/index.cfm/page/334>

Long Term-Personal Care Services (LT-PCS):  
[https://ldh.la.gov/assets/docs/OAAS/publications/FactSheets/LT-PCS\\_Fact\\_Sheet.pdf](https://ldh.la.gov/assets/docs/OAAS/publications/FactSheets/LT-PCS_Fact_Sheet.pdf)

Permanent Supportive Housing Services: <https://ldh.la.gov/index.cfm/page/1732>

OCDD Employment First Initiative: <https://ldh.la.gov/index.cfm/page/1847>

# Community Choices Waiver

## What is the Community Choices Waiver Program?

The Community Choices Waiver program provides services in the home and in the community to elders or adults with disabilities who qualify.

**This program does not, by itself or in combination with other OAAS programs, provide supports 24 hours a day.**

## If I qualify, what services may I receive from this program?

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>• Support Coordination (also known as case management)</li> <li>• Transition Intensive Support Coordination (provided to people moving out of nursing homes)</li> <li>• Transition Services (provided to people moving out of nursing homes)</li> <li>• Personal Assistance Services (supervision or assistance with basic self-care activities or tasks such as dressing, bathing, preparing meals and so forth. Though usually provided one-on-one, personal assistance may be provided by one worker for up to three (3) waiver participants who live together and who use the same direct service provider.)</li> </ul> | <ul style="list-style-type: none"> <li>• Adult Day Health Care Service (health/medical and social services provided in a community-based center)</li> <li>• Environmental Accessibility Adaptations (home modifications to aid in self-care)</li> <li>• Assistive Devices and Medical Supplies</li> <li>• Skilled Maintenance Therapy Services (Physical, Occupational and Speech Therapies)</li> <li>• Nursing Services</li> <li>• Home Delivered Meal Services</li> <li>• Caregiver Temporary Support Services (respite care for family caregivers)</li> <li>• Housing Stabilization Services</li> <li>• Housing Transition/Crisis Intervention Services</li> <li>• Monitored In-Home Caregiving</li> </ul> |
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## Who can qualify for services?

- People who:
- Meet Medicaid eligibility **AND**
  - Are 21 years old or older **AND**
  - Meet Nursing Facility Level of Care

## What are the current resource limits?

Resources are the things people own. When we count resources for this program, we do not count the person's home, the car they drive to medical appointments, or other basic resources.

- Single people can have no more than \$2,000 in resources. Couples can have no more than \$3,000 in resources (when both spouses receive long-term care).
- Married couples can have up to \$148,620 in resources, as long as one spouse at home **DOES NOT** receive long-term care services.

## **What are the current monthly income limits?**

The income limits are \$2,742 for an individual and \$5,484 for a couple (when both spouses need long-term care). However, there is a "Waiver Spend-down" option which allows your eligibility to be considered even if your income is over the limit. Waiver Spend-down has a standard \$20 income deduction. \$65 and ½ of the remainder is also deducted from all earned income. After the income deductions are applied, the average monthly waiver rate (currently \$5,000 for OAAS waivers) and other allowable incurred medical expenses are used to "spend-down" an individual's excess income, qualifying the individual for Waiver. Allowable incurred medical expenses include Medicare and private health insurance premiums, deductibles, coinsurance, or copayment charges, and medical/remedial care expenses incurred by an individual that are not subject to payment by a third party. An individual qualifying under Waiver Spend-down may have to pay towards the cost of his/her care. The individual's liability is based on their income after the income deductions are applied. All individuals are allowed to retain a basic needs allowance from his/her income which is equal to \$2,742 and the amount of incurred medical expenses not paid by a third party. Any remainder will be the individual's liability for the cost of care in Waiver Spend-down.

## **How can people request Community Choices Waiver Services?**

The Department keeps a Community Choices Waiver Request for Services Registry (RFSR) (waiting list) of people who have asked for these services, along with the date of the request.

Persons are offered the Community Choices Waiver according to the following priority groups:

- (1) People with abuse or neglect referred by protective services who, without Community Choices Waiver services, would need institutional placement to prevent further abuse and neglect.
- (2) People diagnosed with Amyotrophic Lateral Sclerosis (ALS), also known as Lou Gehrig's disease.
- (3) People who are residing in a State of Louisiana Permanent Supportive Housing unit or who are linked for the State of Louisiana Permanent Supportive Housing selection process.
- (4) People admitted to, or residing in, a nursing facility who have Medicaid as the sole payer source for the nursing facility stay.
- (5) People who are not presently receiving home and community-based services under another approved Medicaid program, including, but not limited to: Program of All-Inclusive Care for the Elderly (PACE); Long Term-Personal Care Services (LT-PCS) and/or any other 1915(c) waiver.

Everyone else will get an offer for services on a first-come, first-served basis by date of request.

Community Choices Waiver expedited opportunities may also be given to qualified Long Term-Personal Care Services (LT-PCS) participants.

**To add your name to the Community Choices Waiver Request for Services Registry  
or if you have questions, call**

**Louisiana Options in Long Term Care at 1-877-456-1146  
(TTY: 1-855-296-0226)**

**You can call Monday through Friday between the hours of 8:00 a.m. and 5:00 p.m.  
The call is free.**



# Adult Day Health Care (ADHC) Waiver

## What is the Adult Day Health Care (ADHC) Waiver Program?

The Adult Day Health Care (ADHC) Waiver is a non-residential program that can be an alternative to nursing home care for people who do not need care 24 hours a day, 7 days a week. **This program does not, by itself or in combination with other OAAS programs, provide supports 24 hours a day.**

ADHC centers, through health and social services, provide supervised care to adults in a supportive and safe setting during part of a day. An individual assessment of each participant determines the services provided. Participant's needs are met through medical/nursing services, medication supervision/administration, social services, personal care and dietary services (serving both regular and special diet hot lunches as well as morning and afternoon snacks).

ADHC centers typically operate during daytime hours, Monday through Friday, although some centers may offer evenings or weekends. For most people, depending on where they live, ADHC centers provide transportation to and from the center.

Programs may be free-standing centers or may be affiliated with a nursing home, hospital, assisted living facility or senior center; however, all are accountable under the same licensing standards. The intent of adult day health care is primarily two-fold:

- To provide older adults an opportunity to receive medical, health and social services in a supportive structured environment; and
- To assist families/caregivers to continue to care for their loved ones in the home and in the community through hours in the ADHC centers, providing the family the opportunity to fulfill daily responsibilities.

## What other services may I receive from this program?

- Support Coordination (also known as case management)
- Transition Intensive Support Coordination (provided to people moving out of nursing homes)
- Transitional Services (provided to people moving out of nursing homes)

## Who can qualify for services?

- People who:
- Meet Medicaid eligibility **AND**
  - Are 22 years old or older **AND**
  - Meet Nursing Facility Level of Care

### **What are the current resource limits?**

Resources are the things people own. When we count resources for this program, we do not count the person's home, the car they drive to medical appointments, or other basic resources.

- Single people can have no more than \$2,000 in resources. Couples can have no more than \$3,000 in resources (when both spouses receive long-term care).
- Married couples can have up to \$148,620 in resources, as long as one spouse at home **DOES NOT** receive long-term care services.

### **What are the current monthly income limits?**

The income limits are \$2,742 for an individual and \$5,484 for a couple (when both spouses need long-term care). However, there is a "Waiver Spend-down" option that allows your eligibility to be considered even if your income is over the limit. Waiver Spend-down has a standard \$20 income deduction. \$65 and ½ of the remainder is also deducted from all earned income. After the income deductions are applied, the average monthly waiver rate (currently \$5,000 for the ADHC Waiver) and other allowable incurred medical expenses are used to "spend-down" an individual's excess income, qualifying the individual for Waiver. Allowable incurred medical expenses include Medicare and private health insurance premiums, deductibles, coinsurance, or copayment charges, and medical/remedial care expenses incurred by an individual that are not subject to payment by a third party. An individual qualifying under Waiver Spend-down may have to pay towards the cost of his/her care. The individual's liability is based on their income after the income deductions are applied. All individuals are allowed to retain a basic needs allowance from his/her income which is equal to \$2,742 and the amount of incurred medical expenses not paid by a third party. Any remainder will be the individual's liability for the cost of care in Waiver Spend-down.

### **How can people request Adult Day Health Care (ADHC) Waiver Services?**

The Department keeps an Adult Day Health Care (ADHC) Waiver Request for Services Registry (RFSR) (waiting list) of people who have asked for these services, along with the date of the request. Persons are offered the Adult Day Health Care (ADHC) Waiver according to the following priority groups:

- (1) People with abuse or neglect referred by protective services who, without ADHC Waiver services, would need institutional placement to prevent further abuse and neglect.
- (2) People who have been discharged after a hospitalization within the past 30 calendar days that involved a stay of at least one night.
- (3) People admitted to, or residing in, a nursing facility who have Medicaid as the sole payer source for the nursing facility stay.

Everyone else will get an offer for services on a first-come, first-served basis by date of request.

**To add your name to the ADHC Waiver Request for Services Registry or  
if you have questions, call**

**Louisiana Options in Long Term Care at 1-877-456-1146  
(TTY: 1-855-296-0226)**

**You can call Monday through Friday  
between the hours of 8:00 a.m. and 5:00 p.m.**

**The call is free.**



## LT-PCS – Long Term - Personal Care Services Program

### What are Long Term-Personal Care Services (LT-PCS)?

Long Term – Personal Care Services program provides help with activities of daily living for persons who qualify for assistance under the program guidelines.  
**This program does not, by itself or in combination with other OAAS programs, provide supports 24 hours a day.**

### If I qualify, what services may I receive from this program?

<p>Help with:</p> <ul style="list-style-type: none"> <li>• Eating</li> <li>• Bathing</li> <li>• Dressing</li> <li>• Grooming</li> <li>• Moving from one surface to another (transferring)</li> <li>• Walking or using a wheelchair</li> <li>• Toileting</li> <li>• Changing positions in bed (bed mobility)</li> </ul>	<p>Other services:</p> <ul style="list-style-type: none"> <li>• Light housekeeping</li> <li>• Preparing and storing meals</li> <li>• Shopping</li> <li>• Laundry</li> <li>• Reminders about taking medicines</li> <li>• Help with medical appointments</li> <li>• Help finding transportation for medical appointments</li> </ul>
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### What kind of help and services are not covered by this program?

<ul style="list-style-type: none"> <li>• Specialized or skilled nursing</li> <li>• Giving medicine</li> <li>• Rehabilitative services</li> <li>• Specialized aid services</li> <li>• Help that is already being given by family or others in the community or through another assistance program</li> </ul>	<ul style="list-style-type: none"> <li>• Cleaning areas of the home that the applicant does not stay in</li> <li>• Food preparation or laundry for anyone other than the applicant</li> <li>• Companionship</li> <li>• Sitter services</li> <li>• Supervision not related to activities of daily living</li> </ul>
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## Who can qualify for Long Term – Personal Care Services (LT-PCS)?

People who receive Medicaid benefits AND

- Are 21 years old or older **AND**
- Meet Nursing Facility Level of Care, **AND**
- Require at least limited assistance with one Activity of Daily Living, **AND**
- Be able to direct their care independently or through a responsible representative, **AND**

### Meet ONE of the following:

- Be in a nursing facility and be able to be discharged if community-based services were available; **OR**
- Be likely to require nursing facility admission within the next 120 days; **OR**
- Have a primary care-giver who has a disability or who is at least 70 years old.

**If you receive Medicaid and want to find out more about Long Term–Personal Care Services, call Louisiana Options in Long Term Care at 1-877-456-1146 (TTY: 1-855-296-0226).**

**You can call Monday thru Friday  
between the hours of 8:00 a.m. and 5:00 p.m.**

**The call is free.**





# PACE – Program of All-Inclusive Care for the Elderly

## What is the purpose of PACE?

Program of All-Inclusive Care for the Elderly (PACE) coordinates and provides all needed preventive, primary health, acute and long-term care services so that older adults can continue living in the community while enhancing their quality of life. This program provides services across all care settings on a 24-hour basis each day of the year.

## How does the PACE program work?

- As a PACE enrollee, you will be transported to and from the PACE center from your residence to receive needed services.
- PACE providers are responsible for providing all necessary care and services including those that are currently available through Medicare and Medicaid insurances.
- Once you voluntarily enroll in PACE, Medicare and/or Medicaid will no longer pay any other provider for services.

## What are some of the services provided by PACE?

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|--|---|
| <ul style="list-style-type: none"> <li>• Primary care</li> <li>• Personal care/supportive services</li> <li>• Nutritional counseling</li> <li>• Transportation</li> <li>• Specialty medical services</li> <li>• Prescriptions and biologicals</li> <li>• Adult day health care</li> <li>• Home health care</li> <li>• Nursing facility care</li> <li>• Inpatient hospital care</li> <li>• Emergency and outpatient services</li> <li>• Respite care and caregiver education</li> </ul> | <ul style="list-style-type: none"> <li>• Assistive devices, medical supplies, prosthetics, orthotics, corrective vision, hearing aids, dentures (Repair and maintenance of these items are also covered.)</li> <li>• Social work services</li> <li>• Restorative services (physical, occupational and speech language-pathology therapies)</li> <li>• Recreational therapy</li> <li>• Laboratory, x-rays and other diagnostic services</li> <li>• Other care and services determined necessary to improve or maintain your overall health status</li> </ul> |
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## How is PACE paid?

Both Medicare and Medicaid reimburse PACE a payment based on what would have been paid under the fee-for-service system.

- Once you are enrolled in PACE, Medicare and/or Medicaid will no longer pay any other provider for services. All of your care and services will be provided and coordinated by the PACE provider.
- The PACE provider is at full risk. This means your PACE provider is responsible for all care costs, even if it exceeds the monthly capitated payment they receive each month.

## Am I eligible for PACE?

- You **MUST be 55 years of age or older**
- You **MUST live** in a PACE provider service area:
  - **Baton Rouge area parishes:** East Baton Rouge (EBR) or West Baton Rouge (WBR)
  - **New Orleans area zip codes:** 70001, 70002, 70003, 70005, 70006, 70032, 70043, 70053, 70112, 70113, 70114, 70115, 70116, 70117, 70118, 70119, 70121, 70122, 70123, 70124, 70125, 70126, 70127, 70128, 70129, 70130, 70131, 70037, 70056, 70058, 70062, 70065, 70067, 70072, and 70094.
  - **Lafayette area zip codes:** 70501, 70503, 70506, 70507, 70508, 70517, 70518, 70520, 70529, 70578, 70583, 70584 or 70592
- You must be certified by the State to need nursing home level of care
- Meet the requirements for Medicaid eligibility
- Individual income of no more than \$2,742 per month, total resources must be \$2,000 or less
- Couples income of no more than \$5,484 per month, total resources must be \$3,000 or less (when both spouses receive services)
- Married couples can have up to \$148,620 in resources, as long as one spouse at home DOES NOT receive long-term care services.

## Can I change my mind if I no longer want to be in PACE?

Yes, you can disenroll from PACE and return to your regular benefits in Medicare and Medicaid at any time.

### For more information on PACE, please call:

- **PACE Greater New Orleans** (sponsored by Catholic Charities) at **504-945-1531**
- **PACE Baton Rouge** (sponsored by the Franciscan Missionaries of Our Lady Health System) at **225-490-0604**
- **PACE Lafayette** (sponsored by the Franciscan Missionaries of Our Lady Health System) at **337-470-4500**



# Traumatic Head and Spinal Cord Injury (THSCI) Trust Fund Program

## What is the purpose of the THSCI Program?

The THSCI program was created to provide services in a flexible, individualized manner to Louisiana citizens who survive traumatic head or spinal cord injuries. The THSCI program assists people to return to a reasonable level of functioning and independent living in their communities.

The trust fund is designed to be a program of last resort. A person must seek assistance from all available resources before the trust fund can provide financial assistance or services.

## If I qualify, what services can be paid for by this program?

- Evaluations and therapies
- Post-acute medical care rehabilitation
- Home and vehicle accessibility modifications
- Medication and medical supplies
- Personal Care Attendant Services
- Equipment necessary for activities of daily living
- Transportation for non-emergency medical appointments
- Other goods and services deemed appropriate and necessary

## What limitations apply to this program?

- The THSCI Trust Fund Program must preapprove all service providers; in-state facilities/programs are given priority for approval as service providers.
- Services are provided on a first-come, first-served basis.
- All goods and services must be pre-approved before they are delivered and/or rendered.
- Expenditures shall not exceed \$15,000 for any 12-month period or \$50,000 in a lifetime.

## Who can qualify for THSCI services?

Individuals who meet the definition for *Traumatic Head Injury* or *Spinal Cord Injury* defined as:

- *Traumatic Head Injury*: An insult to the head, affecting the brain, not of a degenerative or congenital nature, but caused by an external physical force that may produce diminished or altered state of consciousness which results in an impairment of cognitive abilities or physical functioning.
- *Spinal Cord Injury*: An insult to the spinal cord not of a degenerative or congenital nature, but caused by an external physical force resulting in paraplegia or quadriplegia.

### AND

Individuals who:

- Are residents of Louisiana, officially domiciled in the state at the time of injury and during the provision of services;
- Have a reasonable expectation to achieve improvement in functional outcome with assistance (per the treating physician);
- Have exhausted all other Medicare and Medicaid sources (as attested to by the applicant);
- Provide proof of denial from other sources (if requested);
- Are willing to accept services from an approved facility/program;
- Complete and submit appropriate application for services;
- Are willing to participate in the development of an Individualized Service Plan that outlines the services that will be provided by the Trust Fund

**For more information about the THSCI program or  
to apply for services, please call 1-888-891-9441.  
The call is free.**

# FACT SHEET

## State Personal Assistance Services (SPAS)



### Overview

#### What is this program?

The State Personal Assistance Services program provides personal assistance services to adults with significant disabilities. This program provides these services so that the individuals can continue to live in the community and avoid institutional care.

#### What is the definition of Significant Disability?

An individual with a significant disability is an individual with a loss of sensory or motor functions interfering with activities of daily living to the extent that the person requires assistance with non-medical personal needs, such as bathing, transferring in and out of bed, dressing, meal preparation, feeding, and other similar activities.

#### How is it funded?

The SPAS program is grant funded through the Office of Adult and Aging Services (OAAS) through Louisiana Department of Health (LDH).

### Services Offered

**Services are provided to individuals to enhance or maintain the individual's community living and employability.**

Common services utilized in this program are:

- Personal Care Assistance
- Home Modifications
- Vehicle Modifications
- Rental Assistance
- Medical Supplies and Equipment
- Physical Therapy

These services help individuals remain employed and living in their community where they are contributing tax paying citizens of Louisiana.

### For More Information

Please contact The Arc of Louisiana at:

Phone: 225-383-1033

Email: [spas@thearca.org](mailto:spas@thearca.org)

### Eligibility Requirements

**In order for an individual to be determined eligible for services, an individual must meet the following criteria:**

- Is an individual with significant disabilities;
- Is age 18 or older;
- Needs goods and/or personal assistance services from this program to prevent or remove the individual from inappropriate placement in an institutional setting or enhance or maintain individual's employability;
- Provides verification of the disability from the treating physician;
- Is capable or has legal/personal representative capable of self-direction. Although the participant is capable of self-directing they may chose a qualified provider agency for services; and
  - *Self-Directed – the participant or legal/personal representative will direct, supervise, hire and discharge his/her personal attendant and be able to self-direct all goods/services needed.*
- Provides verification of income to show unique economic and social needs.

### How to Apply

#### 1. You can visit our website at: [thearca.org](http://thearca.org)

Go to programs → State Personal Assistance Services → The links for the 1) application, 2) income determination and 3) Statement of Medical Status are there. **Complete these forms and return to us via:**

**-Mail:** 600 Colonial Dr. Baton Rouge, LA 70806,

**-Fax:** 225-383-1092 or,

**-Email:** [spas@thearca.org](mailto:spas@thearca.org)

#### 2. Call us at the office (225-383-1033) and request us to mail you an application.