

Waiver Skeleton

Q: What is a Waiver?

A: Waivers allow for a departure from the “traditional” version of medical services. Traditionally, populations whose functioning level are not up to meeting their needs require hospitalization or long-term care of another nature (nursing home, skilled nursing, etc). Waivers allow for an alternative plan of care to be created.

Q: What does HCBS mean?

A: Home and Community Based Services.

Q: So.. what is the HCBS Waiver?

A: The HCBS Waiver is an alternative to hospitalization or long term care that allows for a plan of care to be created to keep someone in the home and interacting in the community. This allows for in home nursing care, for example to be given to people who otherwise would be in a long-term care facility. The nursing care is aimed at keeping the patient in the community, rather than in an institution.

Q: Who is eligible for the HCBS Waivers?

A: Eligibility is determined in 2 parts: First, the patient must be functionally eligible. This means they must qualify for long-term care. This means an assessment (usually performed by a “point of entry” the Aging and Disability Resource Center, a local Mental Health Center these are determined by the specific waiver one applies for) must be completed. The second eligibility is a financial eligibility. This is determined by the KanCare application. HCBS patients must meet financial eligibility just like all other KanCare members do.

Q: Do patients have to pay for HCBS Waiver Services?

A: Sometimes a client is given an “obligation” which means they must participate in a percentage of the cost. This is done in monthly payments, and is normally handled by the KanCare clearing house. THIS IS NOT A SPEND DOWN. HCBS clients do not have spend-downs. A spend down is an amount of money that one must pay BEFORE they are covered. HCBS waiver members are covered already, the obligation is recurring and monthly rather than for 6 months at a time.

Q: What are the Waivers?

A: Autism, Intellectual/Developmental Disability, Physical Disability, Traumatic Brain Injury, Technology Assisted, Frail and Elderly, Severely Emotionally Disturbed. Each waiver has its own set of services, point of entry, and criteria for functional eligibility.

Q: Do I have to be on HCBS?

A: No. This is an optional service.

Q: If I lose my HCBS, do I lose my Medicaid?

A: In certain instances, this may happen, but by and large, no. You have the choice to give up HCBS and keep Medicaid as it is.