

Kentucky 1915(c) CHILD Waiver **Participant Journey**

A Step-by-Step Guide for New Participants





844-784-5614



1915cWaiverHelpDesk@ky.gov



CHILD Waiver Website



1

Learn About the CHILD Waiver

- Learn about services offered through the 1915(c) CHILD
 Waiver through a peer, provider, or other outreach.
- Get connected through the <u>1915(c) CHILD Waiver website</u>, 1915cWaiverHelpDesk@ky.gov, or (844) 784-5614.

2

Apply for CHILD Waiver Benefits

- Obtain financial eligibility for Medicaid. Apply online using kynect, call the <u>Department for Community Based Services</u> (<u>DCBS</u>) at (855) 306-8959, or apply in-person at a <u>DCBS</u> office.
- Apply for the CHILD Waiver by completing an online application through <u>kynect</u>, visiting an <u>Aging and Disability</u> <u>Resource Center</u>, or visiting a <u>Community Mental Health</u> Center.

3

Complete the Screening Process

- Once you apply for the CHILD Waiver, a screening is completed to determine if target criteria are met.
 - Children and youth may be eligible for CHILD Waiver services if they:
 - Are under the age of 21.
 - Have exhausted other Medicaid and non-Medicaid services and supports that could help them succeed in the community setting.
 - Meet hospital inpatient psychiatric facility or intermediate care facility for individuals with intellectual disability (ICF/IID) level of care (LOC).
 - Department for Medicaid Services (DMS) staff verify that the child or youth is in one of the following situations due to the intensity of their behavioral health or disability:
 - · Is currently unhoused or at risk of being unhoused.
 - Has a history (within the last year) of at least two different foster care placements.
 - Has had experience with law enforcement within the last year (at least five contacts).
 - Is discharging from an inpatient psychiatric hospital for individuals under 21, an ICF/IID, or other similar institution.
 - · Requires supports offered through the CHILD Waiver.
- You are provided with more information about your preliminary eligibility within seven days of your application.

4

Eligibility Assessment

- Once you receive preliminary eligibility approval, DMS contacts you to schedule a day and time to complete the Child and Adolescent Needs and Strengths (CANS) assessment (LOC assessment tool).
- Your assessor will meet with you in person and in the residence, if possible.
- Assessment discussion(s) include topics such as:
 - Living situation, family, school, social life, etc.
 - Physical, emotional, medical, and behavioral strengths and/or limitations.
 - Caregiver needs/strengths and accessibility.
- Be prepared to provide additional medical, educational, and legal documentation as needed.

5

Program Eligibility Determination and Enrollment in CHILD Waiver

- DMS determines LOC eligibility based on submitted documentation, including the needs assessment, and notifies you of the decision.
- Enrollment in the CHILD Waiver (like all of Kentucky's other 1915(c) waivers) requires managed care organization (MCO) disenrollment and transition of services to traditional Medicaid (fee-for-service), if applicable.
- DMS will walk you through the process to ensure a seamless transition of services and supports.
- You make the decision to accept CHILD Waiver enrollment and transition from MCO or decline CHILD Waiver enrollment to remain MCO-enrolled, if applicable.

6

Case Management Onboarding

- Program staff will provide you with a list of case managers to choose from.
- Your case manager meets with you to discuss CANS assessment results, preferences and goals, service needs and expectations, and individuals you would like to participate in your personcentered service planning team.
- Your case manager helps you choose the providers and services that are right for you and your family, based on your assessed needs.
- Your case manager sends referrals to your selected service providers.
- Your case manager coordinates a meeting to create your Person-Centered Service Plan.

7

Person-Centered Service Planning

• Your case manager meets with you, your family, your service providers, and additional support team members to develop your detailed Person-Centered Service Plan.

8

Services Launch!

· Services begin! Providers from the chosen provider agency contact you to begin services.

9

Continued Support

- Receive ongoing support from your case manager and meet regularly with other service providers.
- Contact your case manager and make changes to your plan if your needs change.