Purpose

The purpose of this policy is to formally establish the processes and procedures to transition individuals between Home and Community Based Services (HCBS) Frail and Elderly (FE), Intellectual/Developmental (IDD), Physical Disability (PD), and Traumatic Brain Injury (TBI) waiver programs and the Working Healthy/Work Opportunities Reward Kansans (WH/WORK) program.

Summary

This policy establishes a process for HCBS and the WH/WORK Program Managers to follow when an individual requests to transition to WH/WORK from a HCBS waiver or waiting list, or back to a HCBS waiver or waiting list from WH/WORK. The policy establishes the process and procedures for transitions and waiting list management.

Entities/Individuals Impacted

- Aging and Disability Resource Centers (ADRCs)
- Community Developmental Disability Organizations (CDDOs)
- KanCare Clearinghouse
- Kansas Department for Aging and Disability Services (KDADS)
- Kansas Department of Health and Environment (KDHE)
- Managed Care Organizations (MCOs)
I. Policy

1. General

   A. Kansas Department for Aging and Disability Services (KDADS) and Kansas Department of Health and Environment (KDHE) Program Managers shall follow the transition procedure outlined in this policy.

   B. All WH/WORK program participants who entered the program directly from an HCBS waiver must meet the appropriate LOC eligibility requirements established in each waiver, within ninety (90) days of making a direct transition back to the appropriate HCBS waiver.

   C. In the event the HCBS waiver has a waiting list, individuals applying for the WH/WORK program will maintain their current position on the waiting list as Inactive while they are participating in the WH/WORK program.

   D. Individual on the WH/WORK program who also on a HCBS waiver waiting list, are offered waiver services based on the date in which they were placed on the waiting list, not based on their waiting list position.

   E. If an individual receives an offer for waiver services and chooses to remain in the WH/WORK program, the HCBS Program Manager will place a comment in the Waiting List Workload that the individual is approved for waiver services pending transition out of the WH/WORK program.

   F. In the event and individual chooses to leave the WH/WORK program and would have been offered a waiver position based on the date of waiting list placement, the participant shall bypass the waiting list and transition directly to the waiver.

   G. All annual Level of Care (LOC), program and financial eligibility requirements apply to WH/WORK participants transitioning back to an HCBS waiver

II. Procedures

1. In the event an individual wants to move from an HCBS waiver or waiting list to the WH/WORK Program:

   a. The individual shall contact a Working Healthy Benefits Specialist (WHBS) via email, phone call or written correspondence to request a transition from an HCBS waiver to WH/WORK.

   b. The WHBS shall assess the individual for potential WH/WORK eligibility.
i. If the individual appears to meet eligibility criteria, the WHBS shall send a WORK referral to the WH/WORK Program Manager.

   1. **WH/WORK** Program Manager assesses the individual for WORK services and a WORK start date is set.

ii. If individual is not eligible the WHBS will inform individual at the time of assessment.

c. The **WH/WORK** Program Manager notifies the appropriate HCBS waiver Program Manager via email that the individual is transitioning to **WH/WORK** with the effective date.

d. If the individual moves onto the **WH/WORK** program from a waiver that has a waiting list, they will maintain their current position on the waiting list.

   i. The HCBS Program Manager shall change the individual’s status to Inactive on the Waiting List Workload and enter the “Inactive Date” as the effective date for the **WH/WORK** program provided by the **WH/WORK** program manager.

e. Prior to entering the **WH/WORK** program, participants leaving HCBS waivers/waiting lists must have a current LOC determination by the appropriate LOC assessing entity using the approved Functional Assessment Instrument (FAI).

2. In the event an individual is offered a position on the HCBS waiver during the time they are accessing the **WH/WORK** program:

   a. The HCBS waiver Program Manager will notify the **WH/WORK** Program Manager and request they obtain a decision from the participant as to whether they will accept the offer or decline the offer.

   b. If an individual chooses to accept an offer for HCBS waiver services, the HCBS waiver Program Manager will send the HCBS waiver offer letter to the participant and process waiver eligibility through the established 3160 process.

      i. If an individual chooses to remain in the **WH/WORK** program the HCBS waiver Program Manager will keep the participant in their current inactive position on the wait list and place a comment in the Waiting List Workload that the individual has program approval for waiver services pending transition out of the **WH/WORK** program.

         1. When the individual is ready to leave **WH/WORK**, the **WH/WORK** program manager shall notify the HCBS waiver Program Manager of the participant’s transition date via email.
3. In the event an individual chooses to leave **WH/WORK**:

   a. The individual/individual’s representative shall submit a request to the **WH/WORK** Program Manager via email, phone call or written correspondence to request a transition to an HCBS waiver from the **WH/WORK** program.

   b. The **WH/WORK** Program Manager shall ensure the participant requesting a transition to an HCBS waiver/waiting list meets the **WH/WORK** requirement to transition.

      i. In order to be eligible to transition out of the WH/WORK program, an individual must have been receiving HCBS waiver services or have been on a HCBS waiver waiting list prior to entrance into the **WH/WORK** program.

   c. Once an individual meets the transition requirements, the **WH/WORK** Program Manager will notify the HCBS waiver Program Manager that the participant will be transitioning via email.

   d. The HCBS Program Manager will verify whether the participant will be returning to an HCBS waiver or a waiting list by checking the date on which the individual was placed on the waiting list against the date through which waiver offers had been extended.

      i. If the transitioning participant would have been offered a waiver position based on the date of waiting list placement, the participant shall bypass the waiting list and transition directly to the waiver.

          1. The KDADS Program Manager shall send an offer letter to the individual and follow the established 3160 protocols.

          2. For the I/DD Waiver:

             a. The HCBS I/DD Program Manager shall send a 3160 to the CDDO, MCO and KanCare Clearinghouse.

             b. The HCBS I/DD Program Manager shall send a Notice of Action to the CDDO and MCO.

             c. The MCO shall complete an assessment of need with a recommendation of services for the individual’s plan of care.

             d. The CDDO shall provide options counseling for I/DD TCM and for HCBS I/DD services approved by MCO assessment of need.
ii. If the transitioning participant would not have been offered a waiver position based on the date of waiting list placement, the HCBS waiver Program Manager shall move the individual from Inactive status to Active status on the Waiting List Workload to await an opening on the HCBS waiver.

iii. For HCBS-PD waiting list only.

1. If the transitioning participant would not have been offered a waiver position based on the date of waiting list placement and has aged out of WH/WORK eligibility and PD waiver eligibility at age sixty-five (65), the PD Program Manager will send a referral 3160 to the ADRC and the FE Program Manager to determine FE waiver eligibility.

   a. If eligible for FE, the individual shall immediately access the FE waiver provided there is no waiting list.

   e. The WH/WORK Program Manager shall send a WORK Closure Letter to the participant stating the date that the KanCare Clearinghouse will be ending program closure.

4. In the event a WH/WORK is closing and the participant is transitioning directly to an HCBS waiver:

   a. The WH/WORK Program Manager shall notify the HCBS waiver Program Manager, KanCare Clearinghouse, Managed Care Organization (MCO) and the appropriate LOC assessing entity via email of the effective date of the participant’s transition.

   b. If no functional assessment has been completed for the transitioning participant within the last 365 days, the HCBS waiver Program Manager shall notify the appropriate assessing entity via email that an assessment is required.

   c. The functional assessment shall be completed within ninety (90) days of the effective date of transition.

      i. For individuals who do not meet LOC eligibility requirements, the HCBS Program Manager shall terminate services effective on the ninety-first (91st) day of the transition to the HCBS waiver.

      ii. The HCBS Program Manager shall send a Notice of Action (NOA) to the individual.

      iii. Once a participant’s HCBS waiver eligibility is approved by the KanCare Clearinghouse, they will then be removed from the HCBS waiting list and placed on the perspective waiver.
d. All annual LOC, program and financial eligibility requirements apply to WH/WORK participants transitioning back to an HCBS waiver.

### III. Definitions

**Functional Assessment Instrument** – Tool used for the evaluation of the medical, adaptive, and behavioral needs and functional capacities of an individual to determine the level of care required to meet his or her needs in the least restrictive setting for the FE, I/DD, PD and TBI waivers.

**Level of Care (LOC)** - Criteria that are used to evaluate and reevaluate whether an individual needs services through a HCBS waiver and the intensity of the needed services.

**Level of Care Assessing Entity**- For the FE, PD and TBI waivers the LOC assessing entity is the Aging and Disability Resource Center (ADRC). For the I/DD waiver the LOC assessing entity is the Community Developmental Disability Organization (CDDO).

**Notice of Action** – A written notice issued to an individual identifying approval or adverse actions such as termination, suspension, or reduction of Medicaid eligibility or covered services. In cases involving adverse action, information is provided to the individual on their right to a hearing, the method by which to obtain a hearing and that they may represent themselves or use legal counsel, a relative, a friend, or other spokesman (42 CFR 431,206).

**Transition Request** – An email from the WH/WORK Program Manager to the HCBS waiver Program Manager requesting the transition of an eligible individual from one program to another.
Policy Name: HCBS- Working Healthy/WORK Transition Policy
Commission: Community Services and Programs Commission
Applicability: HCBS-FE, I/DD, PD, TBI and Working Healthy/WORK programs
Contact: HCBS Program Managers and WH/WORK Program Manager
Policy Location: https://www.kdads.ks.gov/commissions/home-community-based-services-(hcbs)/hcbs-policies
Status/Date: Final/November 13, 2017

Authority

1915(c) HCBS Waiver –

KS.0224.R05.01 (IDD) – effective March 1, 2016
KS.0304.R04.01 (PD) – effective March 1, 2016
KS.4164.R05.01 (TBI) – effective March 1, 2016

Federal Authority
42 CFR Part 441.301 – Contents of request for a waiver
H.R. 1180 – Ticket to Work and Work Incentives Improvement Act of 1999

State Authority
K.A.R. 30-5-300 – Definitions.

Related Information

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