

# A Better Life at Home, A Better Life in Your Community

A Guide for the  
Medicaid Home and Community Based Services Waiver  
for Persons with Developmental Disabilities/Mental Retardation

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## **About This Handbook**

The Hawai`i State Council on Developmental Disabilities, in collaboration with the Hawai`i State Department of Health Developmental Disabilities Division, self-advocates, and community members created this guidebook to inform individuals with developmental disabilities and their families about the Medicaid Home and Community Based Services Waiver for Persons with Developmental Disabilities/Mental Retardation (also known as "The Waiver"). It contains information about key state agencies, the application process, finding a provider and other community resources. The handbook is intended for use as a guide that will educate the public about some of "The Waiver's" main features. It includes:

- An introduction to "The Waiver"
- Personal stories of waiver recipients
- Eligibility criteria
- Individualized Service Plans (ISPs)
- Waiver support services
- How to select service providers
- Sample forms needed to receive waiver services
- Rights and responsibilities

Disclaimer: Information provided in this guide is valid as of December 2004.

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# Introduction to “The Waiver”

## Purpose

What is “The Waiver” and How does it work in Hawai`i?

“Medicaid is a program designed to help states meet the costs of necessary health care for low-income and medically needy populations. Under section 1915c of the Social Security Act, states may request waivers of certain federal requirements in order to develop home and community-based services funded by Medicaid. The State, through Medicaid, may request funding for home and community-based services to prevent the institutionalization of individuals with disabilities. The State’s request is subject to approval by the Centers on Medicaid and Medicare Services (CMS).

Individuals within the Hawai`i Department of Health (DOH) Developmental Disabilities Division (DDD) system that are eligible for Medicaid can apply for these Medicaid funded services. Needs and supports are identified through a person-centered planning process with case managers who coordinate, and assist individuals in accessing these services from qualified and approved providers.”<sup>1</sup>

In Hawai`i, the State has created the Home and Community Based Services for Persons with Developmental Disabilities/Mental Retardation Medicaid Waiver Program. Because CMS “waives” certain federal requirements, the program is commonly referred to as “The Waiver”.

The State Department of Human Services (DHS) is the official Medicaid state agency. DHS works with CMS to manage the Medicaid money. DHS also determines who is eligible for Medicaid and “The Waiver”.

The DOH DDD is responsible for managing “The Waiver”. The DOH DDD Case Management and Information Services Branch (CMISB) assigns case managers to assist individuals and families who wish to access “The Waiver”.

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<sup>1</sup> This information was taken from the Department of Health, Developmental Disabilities Division, Case Management and Information Services Branch Information Packet for Individuals and Families (March 2001).

## **Personal Stories**

"The Waiver" has changed the lives of many people living in Hawai`i. It has helped people with developmental disabilities receive the services and support they need to remain in their communities.

Throughout the handbook are stories from some of the people who receive waiver services. These individuals have agreed to share their stories so that "The Waiver" experience can be seen from different points of view.

### **John**

John is a 33 year-old man who lives at home with his mother. He has been receiving waiver services for more than 10 years and currently receives Adult Day Health (ADH) and Habilitation (HAB) services. Before John began waiver services, his mother said life was dull for him. John would come home everyday from school or work and go to his room and watch television. Today, John has a full day of activity that includes working at a pizza parlor, participating in friendly basketball games, swimming, going out to movies and bowling, shopping at the mall and going to restaurants. He is busy seven days a week and eagerly gets up early every day to prepare for the day ahead. He has also made a good friend at ADH that he enjoys spending time with.

John's mother said that the services have really helped both John and her to have an active life that is free from much of the worry and stress that formerly was a daily part of her life. "The Waiver" services have also relieved much of the financial strain as well. Prior to receiving waiver services, John's mother had to pay someone to provide supervision for John while she attended to her job or other responsibilities.

Both John and his mother feel good about waiver services and feel the process to get into "The Waiver" was well worth it.

## **Key State Agencies**

There are several key State of Hawai`i agencies involved in providing waiver services. This section will help you learn about their roles and responsibilities.

## **The Hawai`i State Council on Developmental Disabilities**

The mission of the Hawai`i State Council on Developmental Disabilities (DD Council) is to support people with developmental disabilities to control their own destiny and determine the quality of life they desire.

The DD Council is a body comprised of individuals appointed by the governor. Sixty percent of the DD Council is made up of individuals with developmental disabilities and family members of persons with developmental disabilities. The remaining members represent state and private agencies and the community at-large.

The Hawai`i DD Council was established in state law by Act 198, Session Laws of Hawai`i, 1975. The DD Council (according to Hawai`i Revised Statutes, Section 333E) develops, prepares, and adopts the State plan, which "shall guide the development and delivery of all services to individuals with developmental disabilities." The State plan shall include "establishment of goals and priorities of the State in meeting the needs of individuals with developmental disabilities, including the recommendation of priorities for the distribution of public funds for comprehensive services to individuals with developmental disabilities within the State and other matters deemed necessary to achieve independence, productivity, integration, inclusion, and self-determination of individuals with developmental disabilities."<sup>2</sup>

The federal Developmental Disabilities Assistance and Bill of Rights Act of 2000 (P.L. 106-402) defines the purpose of State Councils on Developmental Disabilities as engaging in "advocacy, capacity building, and systemic change activities..." that "contribute to a coordinated, consumer- and family-centered, consumer- and family-directed, comprehensive system that includes needed community services, individualized supports, and other forms of assistance that promote self-determination for individuals with developmental disabilities and their families."

For more information on the Hawai`i DD Council, visit the website available at: <http://www.hiddc.org>.

## **Department of Health**

The mission of the Department of Health (DOH) is to protect and improve the health and environment for all people in Hawai`i.<sup>3</sup>

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<sup>2</sup> This information was taken from the Hawai`i State Council on Developmental Disabilities website at <http://www.hiddc.org>.

<sup>3</sup> This information was taken from the Department of Health website available at <http://www.hawaii.gov/health.html>.

For more information on the DOH, visit the website available at:  
<http://www.hawaii.gov/health.html>.

### **Developmental Disabilities Division**

The mission of the DOH's Developmental Disabilities Division (DDD) is to assure that there is a state system of supports and services for persons with developmental disabilities or mental retardation (DD/MR), which includes principles of self-determination and incorporates individualized funding, person-centered planning and community services."<sup>4</sup>

For more information on the DDD, visit the website available at:  
<http://www.hawaii.gov/health/disability-services/developmental/index.html>.

### **Case Management and Information Services Branch**

The mission of the DDD's Case Management and Information Services Branch (CMISB) states that, "The CMISB is dedicated to the support of persons with mental retardation and developmental disabilities to choose and achieve their individual goals."<sup>5</sup> The case managers that work for this branch will help you to access the services you need.

For more information on the CMISB, visit the website available at:  
<http://www.cmisb.org/about.htm>.

### **Department of Human Services**

The Department of Human Services (DHS) is the State Medicaid agency. You will work with DHS when applying for Medicaid. DHS administers "The Waiver" program "for persons with developmental disabilities and mental retardation who would otherwise receive such services in an Intermediate Care Facility for persons with mental retardation (ICF/MR)."<sup>6</sup>

"The goal of this program is to reduce and prevent unnecessary institutionalization by providing home and community-based services at a cost less than or equal to institutional care."

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<sup>4</sup> This information was taken from the Developmental Disabilities Division website, available at <http://www.hawaii.gov/health/disability-services/developmental/index.html>.

<sup>5</sup> This information was taken from the Case Management and Information Services Branch website available at <http://www.cmisb.org/about.htm>.

<sup>6</sup> This information was taken from the Department of Human Services Medicaid Waiver for Individuals with DD/MR Program website available at:  
<http://www.state.hi.us/dhs/DDMR%20%207-03.pdf>.

The DHS motto for "The Waiver" is "Independence", "Dignity", and "Choice".

For more information on the DHS Medicaid Waiver DD/MR Program, visit the website available at: <http://www.state.hi.us/dhs/DDMR%20%207-03.pdf>.

# Summary of Waiver Eligibility Requirements

## How Do I Know If I'm Eligible?

The Department of Human Services (DHS) and the Department of Health (DOH) each play a role in determining eligibility. You may start the application and eligibility process by:

1. Applying for Medicaid with DHS; and
2. Applying for services with DOH, Developmental Disabilities Division (DDD), Case Management and Information Services Branch (CMISB).

You do not need to wait for the determination from one department to begin the process with the other.

## DHS Eligibility Requirements

Admission to the program requires a referral from a DOH DDD CMISB Case Manager (CM). This program serves people of all ages.

The person must:

- Be eligible for Medicaid;
- Be assessed as needing Intermediate Care Facility-Mentally Retarded (ICF/MR) Level of Care; and
- Choose to receive home and community-based services as an alternative to institutional placement.

## DOH Eligibility Requirements

The following must be completed/provided:

- Application for DOH DDD services;
- Application for waiver services; and
- Evaluations to determine ICF/MR Level of Care:
  - ✓ Medical (completed by a physician, valid for 90 days); and

- ✓ Psychological, if applicable (completed by a licensed psychologist).

This is a brief summary of waiver eligibility requirements. A more detailed explanation of “The Waiver” application process is outlined in the following sections of the guidebook.

## Thomas

My son and I moved to Hawai`i from the mainland, and upon arrival I knew I needed to find resources for services, but where should I look?

I called the general information number for the State and described my son's needs and was given the number for the Department of Human Services (DHS), who in turn, referred me to the Department of Health's (DOH) Developmental Disabilities Division (DDD). We then immediately pursued getting a case manager (CM) with the DOH DDD and Tom began attending an adult program with an agency.

For two years everything went fairly well until I lost my job, as the company was moving part of their operation off island, and since there were no services for Tom on Kaua`i, I could not go with them. When I went back out looking for work, I could not find employment that fit with Tom's schedule. At that time, Tom's agency case manager told us about a state program that paid for chore services, we were registered, and I was paid minimum wage for taking care of Tom's home, cleaning, cooking, doing laundry and running errands for him. For the next four years, we maintained a very meager lifestyle.

At the same time, I also contacted the State Council on Developmental Disabilities (DD Council) for information. Through the DD Council I learned of a policy that was being considered that would allow parents of adult children to be paid as a Personal Assistant (PA) for their adult child. I closely followed the policy development, and the day after the policy was implemented, I contacted our DOH CM and told him that I wanted to become my son's PA. Our CM referred me to an agency and I went through the hiring process within one week. The problem of my finding employment in the public sector had been resolved.

Once we were in "The Waiver" and I became my son's PA, we went from a very meager lifestyle to one that allows Tom to enjoy some recreational entertainment. The services I provide were written into my son's Individual Service Plan (ISP), and instead of strangers coming into our home and providing services, I can now be paid to make sure my son is receiving the best care possible. Not only am I employed full time, I also have a 401(k) plan as well as health care, including medical, vision and dental that are provided by the agency. As my son Tom says, "Now we have a life!"

## **“The Waiver” Application Process**

Over two thousand people with developmental disabilities are now receiving waiver services and support in their homes and communities. It is important to remember that many factors are involved in determining eligibility so applying for “The Waiver” may be a long process. It can take a few weeks to complete all phases of the application process or longer depending on individual circumstances.

Each phase of “The Waiver” application process involves one or more steps. The phases may not need to be completed in the listed order but all of them must be completed before waiver services begin. Don’t worry if you have already completed one or more of the steps or phases, you do not have to repeat them. The next few sections will outline these steps.

- Who to Contact
- The Intake Process
- Identify Your Needs
- The Individualized Service Plan (ISP)
- Apply for Medicaid
- Apply for “The Waiver”
- Select Waiver Support Services
- Select Your Service Provider(s)

These steps are shown in the flowchart on the last page of this section.

### **Who To Contact**

If you are not receiving services from the Department of Health (DOH) Developmental Disabilities Division (DDD) and are interested in applying for “The Waiver”, you need to begin by contacting the DOH, DDD, Case Management and Information Services Branch (CMISB) closest to you to apply for DDD services with an intake worker. If you are currently receiving services from the DDD and are interested in applying for “The Waiver”, begin by contacting your DOH, DDD, CMISB assigned case manager (CM). It is important to communicate regularly with the intake worker or your assigned CM throughout the application process.

### **If You Are Applying for DDD Services, CMISB Assigns an Intake Worker**

**To:**

- Determine DD/MR eligibility

**If You Are Eligible for DDD Services, CMISB Assigns a Case Manager****To:**

- Provide outreach to the community including community education and information;
- Get to know the person with Developmental Disabilities and/or Mental Retardation (DD/MR) including finding out what is important to the person;
- Identify what supports the person has, wants, and needs;
- Identify what supports are necessary to assure the individual's health and safety and well-being;
- Assist individuals in developing a plan to support them in their desired life; and
- Assist individuals in obtaining supports and services needed including supports provided or funded by the DOH DDD.<sup>7</sup>

**Contact Information for CMISB Offices on Each Island****Hawai`i**

Community Services for the Developmentally Disabled – Hawai`i Section  
88 Kanoelehua Ave., Suite B102  
Hilo, HI 96720-4670  
Telephone: (808) 974-4280 Fax: (808) 974-4285  
E-mail: [eikita@mail.health.state.hi.us](mailto:eikita@mail.health.state.hi.us)

**Kaua`i**

Community Services for the Developmentally Disabled – Kaua`i  
3040 Umi St.  
Lihue, HI 96766  
Telephone: (808) 241-3406 Fax: (808) 241-3480  
E-mail: [rmho@mail.health.state.hi.us](mailto:rmho@mail.health.state.hi.us)

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<sup>7</sup> This information was taken from the Department of Health website available at <http://www.cmisb.org/about.htm>.

**Lana`i/Maui**

Case Management and Information Services – Maui  
54 High St.  
Wailuku, HI 96793  
Telephone: (808) 984-8252 Fax: (808) 984-8253  
E-mail: [jhayashi@mail.health.state.hi.us](mailto:jhayashi@mail.health.state.hi.us)

**Moloka`i**

Department of Health – Moloka`i  
PO Box 2007  
Kaunakakai, HI 96748  
Telephone: (808) 553-3200 Fax: (808) 553-9859  
E-mail: [pbvenenc@mail.health.state.hi.us](mailto:pbvenenc@mail.health.state.hi.us)

**O`ahu**

Kahala, Kaimuki through Hawaii Kai  
Case Management Unit 1  
801 Dillingham Blvd., 2<sup>nd</sup> Floor  
Honolulu, HI 96817  
Telephone: (808) 587-7564 Fax: (808) 587-7278

Ewa Beach (Ft. Weaver Road) to Waianae  
Case Management Unit 2  
Kakuhihewa Building  
601 Kamokila Blvd., Room 300  
Kapolei, HI 96707  
Telephone: (808) 692-7485 Fax: (808) 692-7502

**O`ahu (Continued)**

Ewa Beach, Waipahu, Kunia/Village Park, Waikele, Sea View/Crest View

Case Management Unit 3  
Kakuhihewa Building  
601 Kamokila Blvd., Room 300  
Kapolei, HI 96707  
Telephone: (808) 692-7493 Fax: (808) 692-7502

Kahuku to Waimanalo

Case Management Unit 4  
801 Dillingham Blvd., 2<sup>nd</sup> Floor  
Honolulu, HI 96817  
Telephone: (808) 587-7270 Fax: (808) 587-7278

Waipahu

Case Management Unit 5  
801 Dillingham Blvd., 2<sup>nd</sup> Floor  
Honolulu, HI 96817  
Telephone: (808) 587-7685 Fax: (808) 587-7278

Mililani thru Waialua, Haleiwa thru Turtle Bay

Case Management Unit 6  
801 Dillingham Blvd., 2<sup>nd</sup> Floor  
Honolulu, HI 96817  
Telephone: (808) 587-1391 Fax: (808) 587-7278

Central Oahu (Bordered by Pearl City and Halawa Heights)

Case Management Unit 7  
801 Dillingham Blvd., 2<sup>nd</sup> Floor  
Honolulu, HI 96817  
Telephone: (808) 587-7675 Fax: (808) 587-7278

Tripler Hospital thru Ward Avenue

Case Management Unit 8  
801 Dillingham Blvd., 2<sup>nd</sup> Floor  
Honolulu, HI 96817  
Telephone: (808) 587-7281 Fax: (808) 587-7278

## **Determining If Waiver Is Right For You**

After you have identified your needs, the important question becomes, "which of these needs can be met using a waiver service(s)?" If necessary, your circle of support can help you answer this question. If it is determined that your needs can be met using a waiver service(s), you will need to complete a waiver application and apply for Medicaid if you have not already done so.

## **"The Waiver" Application**

You must complete a separate application to apply for "The Waiver" through the DOH DDD. Your case manager will provide you with the "Application and Request for Home and Community Based Services – DD/MR." You will need the listed information to complete this application.

- Name
- Sex (Male/Female)
- Birth Date
- Social Security Number
- Address
- Telephone Number
- Residential Status
  - ✓ Your residential status is an explanation of where you live. You will need to know if you live in a licensed/certified setting, independently, with family, with a relative, in an institution/facility, in a hospital/acute care, or another situation.

- Guardianship Status
  - ✓ This explains who currently makes legal decisions for you. Do you take care of yourself? Does someone else take care of you? If someone else takes care of you, you will need that person's name, address and telephone number.
- Health Insurance
  - ✓ You will need to provide all information for your health insurance provider(s) including policy and medical record numbers.

### **Forms and Evaluations**

The DOH case manager will provide the forms your physician will have to complete and sign. The physician's evaluation will help determine if you meet the DHS Intermediate Care Facility/Mental Retardation Level of Care (ICF/MR LOC). Refer to the Resources, Sample Forms section for a sample Physician's Recommendation for ICF-MR LOC form.

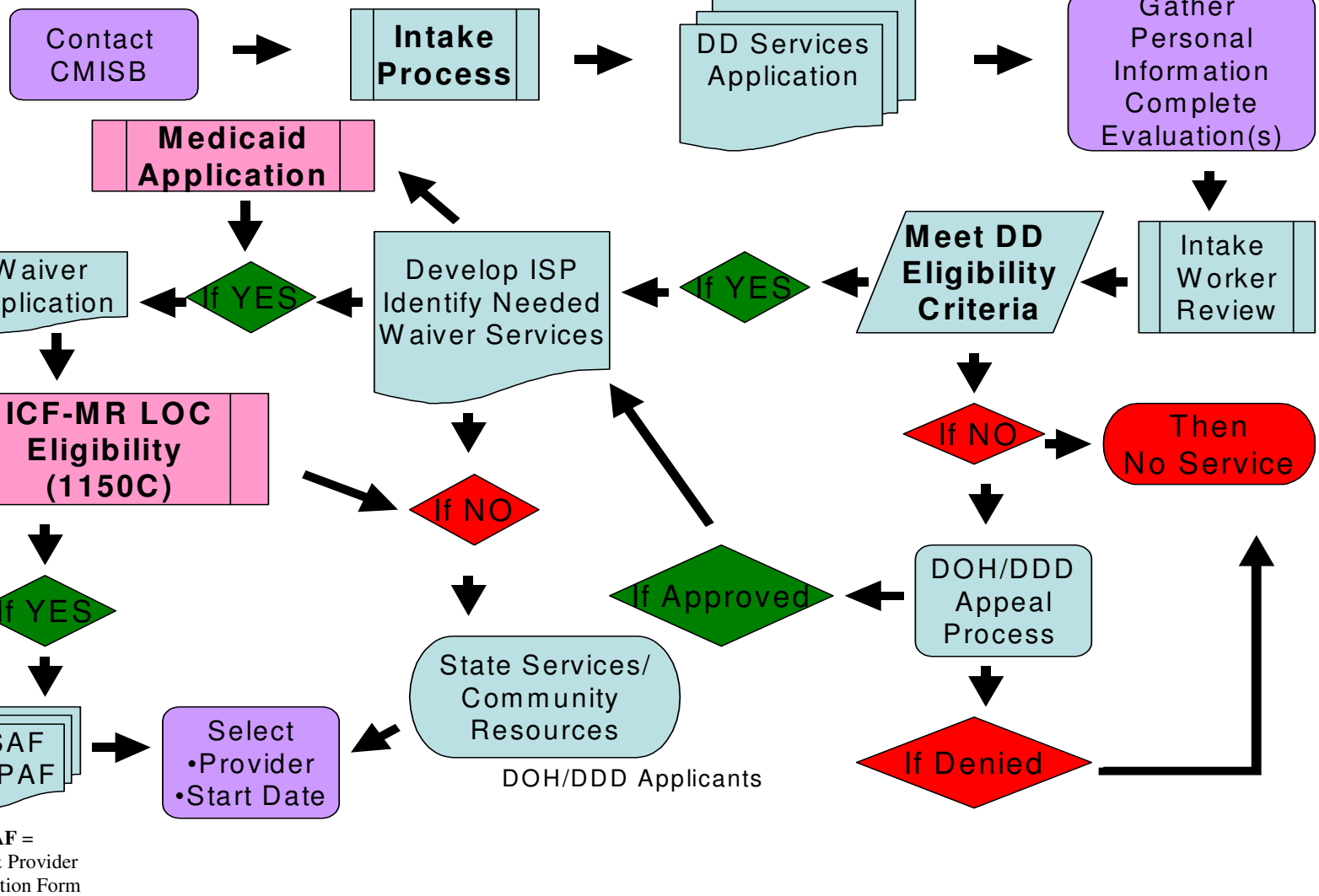
Your DOH case manager will complete an eligibility (DHS 1150c) form and forward it to the DHS representative for review along with your application materials. The DHS representative will review your application materials and if you qualify, sign the DHS 1150c form to indicate DHS' approval of your ICF/MR LOC.

### **Service Authorization Form**

Your case manager will ask you to sign a Service Authorization Form (SAF). The SAF indicates your choice to receive home and community- based services instead of institutional services. This form is proof that you are choosing to participate in "The Waiver" of your own free will. Refer to the Resources, Sample Forms section for a sample SAF.

**START HERE**

# WAIVER PROCESS FLOWCHART









ICF-MR LOC = Intermediate Care Facility –

SAF = Service Authorization Form

SPAF = Service & Provider Authorization Form

### What do these symbols mean in the Chart?

-  = For you/your guardian/family to complete.
-  = The Developmental Disabilities Division will help you with this.
-  = Go to the next step.
-  = For review by the Department of Human Services.
-  = Your request or application is approved.
-  = Your request or application is not approved.

## **The Intake Process**

After you contact the Case Management and Information Services Branch (CMISB) office and express your interest in "The Waiver", you will fill out an application for Department of Health (DOH) Developmental Disabilities Division (DDD) services and begin the intake process. An intake worker determines if you are eligible for DOH DDD services. Once you are found eligible for services, you move on to the second step. The second step involves determining which services are appropriate for your needs. There are many services available through the DDD. "The Waiver" is one of these services.

### **Meeting With an Intake Worker**

In applying for DOH DDD services you will meet with an intake worker who will assist you through the intake process.

You can request to meet at a place and time that is comfortable for you. This can be in your home, at a park, restaurant, the case management office, a school or other public place. When you meet with the intake worker, you will talk about concerns and issues that are important to you. It is a good idea to meet on a day when you have plenty of time to talk and answer any questions you might have. The intake worker will review your application materials to determine eligibility for DDD services.

You can use this page to make a list, take notes or prepare for the meeting.

- Intake Worker's Name
- Meeting Date
- Meeting Time
- Meeting Place
- Things you should bring to the meeting

Notes

### **The Law in Hawai`i Lists the Eligibility Criteria**

The Hawai`i Revised Statutes (HRS) §333F-1 provides the following definitions:

"Developmental disabilities" means a severe, chronic disability of a person which:

Is attributable to a mental or physical impairment or combination of mental and physical impairments;

Is manifested before the person attains age twenty-two;

Is likely to continue indefinitely;

Results in substantial functional limitations in three or more of the following areas of major life activity; self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living and economic sufficiency; and

Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services, which are of lifelong or extended duration and are individually planned and coordinated.

"Mental retardation" means significantly sub-average general intellectual functioning resulting in or associated with concurrent moderate, severe or profound impairments in adaptive behavior and manifested during the developmental period.

## **What If You Don't Meet the Criteria?**

If the intake worker determines that you do not meet the eligibility criteria, you will not meet with a case manager nor will you receive services through the DDD.

After you go through the intake process, you will be sent a letter telling you if you are eligible for services or not eligible for services. If you are told you don't meet the criteria and you disagree with that decision, you can appeal that decision. Information on this appeal process will be provided with your determination letter. It is also provided below.<sup>8</sup>

If you are determined ineligible for DDD services because you do not meet the eligibility requirements specified in Hawaii Revised Statutes (HRS) §333F, you will receive a notification letter.

The notification letter informs you of the right to appeal the decision. You can seek an informal appeal with the Department of Health (DOH), and if dissatisfied with the result, request a formal hearing.

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<sup>8</sup> The information provided was obtained from the Department of Health Case Management and Information Services Branch.

The notification letter informs you of the right to a formal hearing whether or not an informal appeal is sought.

Requests for a formal hearing must be in writing and received within ninety (90) days of the notification letter. The request should identify what is contested, describe the basic facts and issues, identify the relief sought and identify the legal authority for the hearing.

Requests for an informal hearing must also be received within ninety (90) days of the notification letter.

In any appeal or hearing, you may represent yourself or have a lawyer, guardian, relative, friend or other person represent you.

Requests for informal appeals should be made to:

David Fray, Chief  
Developmental Disabilities Division  
Department of Health  
P.O. Box 3378  
Honolulu, HI 96810  
(808) 586-5840

Written requests for formal appeals should be sent to:

Dr. Chiyome Fukino, Director  
Department of Health  
P.O. Box 3378  
Honolulu, HI 96810

If you have special needs due to a disability and meeting those needs help you to participate in a hearing, you may contact the DDD at (808) 586-5843 (voice/TTY).

If there are questions regarding the letter, you may contact the DDD Case Management Section Supervisor at (808) 733-9176.

For more information about your rights to a fair hearing, contact the DDD Case Management and Information Services Branch (CMISB) at (808) 733-9172.

## **Fred**

Fred is a 49 year-old man who has been receiving waiver services since 1993. A family member explains that initially, "The Waiver" did not impact his life or the family's life. She stated that because "The Waiver" was a new program in the community, Department of Health (DOH), the providers, the families, and individuals with developmental disabilities were trying to figure out how to utilize the program. She stated that initially, the old program did not construct a plan that fit Fred's needs, instead, the services in the plan were based on the services he qualified for and could obtain. The plan was not a person-centered, person-driven plan, but rather more like an availability of service attainment plan.

As "The Waiver" became more stable and better defined, the services Fred received became more catered to his needs, wants, strengths and likes. The family stated that through the years, he has been able to increase his receipt of services to extend to six days a week, meaning the services could now be received on the weekend. Fred was able to engage in more social, life-fulfilling activities.

The most significant impact "The Waiver" has had on Fred and his family was during and after his hospitalization. Medicaid paid for all of his medical and hospital expenses and for the rehabilitative services needed after he was released from the hospital. The waiver services the family received were personal assistance services. These services allowed Fred to re-learn some of the personal living skills he had lost during his illness and hospitalization. He is now learning to live more independently again.

Receiving waiver services has allowed the family the time to continue to live their lives: work, children, significant others, etc. Fred is able to attend an Adult Day Health (ADH) program and he fully enjoys it! He gets "excited" about interacting with his peers and engaging in social activities. The "services have improved his quality of life." He now has a "meaningful life." He is "expressive" and "enjoys" life.

"The Waiver" has provided this family with more options and opportunities. They have more access to services and someone to coordinate them. The combination of a person-centered Individualized Service Plan (ISP), a competent case manager, and available necessary services are foundations for a successful waiver experience and improved quality of life.

## **The Planning Process**

### **The Individualized Service Plan**

You play the primary role in creating your Individualized Service Plan (ISP). Your ISP is a plan you create with your circle of support to include what is

important to you. Once you have written down what is important to you, your case manager and service providers will know what needs and services are important in your life.

A meaningful ISP is one that is based on several core beliefs:

- Self-Determination
- Person-Centered Planning
- Circle of Support
- People First Language

This section goes through each of these important ideas and then gives you the opportunity to start thinking about things you would like to include in your ISP.

It is also important to remember that the case manager authorizes the services that are written in your ISP and your service providers can provide only those services that are authorized in your ISP. Therefore, you need to remember to include all the activities and services you need in your ISP.

## **Self-Determination**

The Self-Determination movement was founded on five basic principles.

- *Freedom* to live a meaningful life in the community.
- *Authority* over dollars needed for support.
- *Support* to organize resources in ways that are life enhancing and meaningful.
- *Responsibility* for the wise use of public dollars.
- *Confirmation* of the important leadership that self advocates must hold in a newly designed system.<sup>9</sup>

For more information on self-determination, visit [www.selfdetermination.org](http://www.selfdetermination.org) and/or the Community Provider of Enrichment Services, Inc. at [www.cpes.com](http://www.cpes.com) for information on consumer rights.

## **Person-Centered Planning**

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<sup>9</sup> This definition was adapted from the National Program on Self-Determination Office's definition.

Your ISP focuses on you and your needs. This concept is called “person-centered planning.”

Person-centered planning reminds everyone that every decision made about your care must focus on you. Person-centered planning empowers you throughout the decision-making process. Person-centered planning can help you become more independent and assertive in your daily life by teaching you how to identify your wants and needs.

Person-centered planning is particularly important during the creation of your ISP. Your role is especially important when determining what services are right for you. When expressing your needs, you should be as creative as possible and express yourself in any form comfortable to you. This might include sign language, writing a poem or drawing a picture.

### **Circle of Support**

Your circle of support is made up of people that you choose to help you create your plan. It can include anyone who is special to you, someone that cares about you, and others who help you make decisions in your life. Family members, friends, and other individuals of your choice can join the circle.

Your case manager is also part of your circle. Your case manager (CM) will help make sure that the decisions made by you are reflected in your ISP. Your case manager will also help arrange meetings when your circle needs to get together and help you make decisions.

## People First Language

You have the right to be treated with dignity and respect at all times. And you also have the right to have practices and policies explained to you in a manner that you can understand. All efforts to communicate with you should therefore be expressed in "people first language."

The Developmental Disabilities Council (DD Council) supports the regular use of "people first language." Language can be a reflection of how people see each other. Responsible communicators are now choosing language that reflects the dignity of people with disabilities - words that put the person first, rather than the disability. Read on for a short course on using language that empowers.

- Think "people first." Say "a woman who has mental retardation" rather than "a mentally retarded woman."
- Avoid words like "unfortunate," "afflicted" and "victim." Also, try to avoid casting a person with a disability as a superhuman model of courage. People with disabilities are people first.
- Refrain from mentioning "symptom," "patients," or "treatment". A developmental disability is not a disease.
- Avoid terms with obvious negative or judgmental connotations, such as "crippled," "deaf and dumb," "lame" and "defective." If you aren't sure how to refer to a person's condition, ask. If the disability is not relevant to your story or conversation, why mention it at all?

Never refer to a person as "confined to a wheelchair." Wheelchairs enable people to escape confinement. A person with mobility impairment "uses" a wheelchair.<sup>10</sup>

For more information on the Hawai`i DD Council visit the website available at: <http://www.hiddc.org>.

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<sup>10</sup> This definition was taken from the Hawai`i State Council on Developmental Disabilities website.

## **Identify Your Needs**

### What Is Important to You?

This section includes some worksheets that may help you start to think about what is important to you. This information can then be used to help you, your circle of support, and case manager create an Individualized Service Plan (ISP). The ISP will document your needs and desires. The ISP will help your case manager and others find the services you need to move you toward your goals and desired outcomes. Take some time to complete the worksheets before you meet with your case manager.

Once you and your circle of support have identified your needs, you will use that information to develop an ISP. The ISP will include everything you need to achieve your desired goals and the specific services that may help you achieve them.

## People Who Are Important To Me

List the names of family, friends, and other people who play an important part in your life.

Name	Relationship

## Listen to Me Communicate

This is how I let others know what I want and need.

When I do this \_\_\_\_\_

This is what it means \_\_\_\_\_

You or others should \_\_\_\_\_

When I do this \_\_\_\_\_

This is what it means \_\_\_\_\_

You or others should \_\_\_\_\_

## Things I Enjoy

Write down the places you like to go, things you like to do, any and all other preferences you consider important in your life.

### **My Dreams and Goals**

Use this space to write down your personal goals and desired outcomes. Remember that nothing is impossible so dream big and aim high!



**Share Your Work**

Now that you have completed some homework, be sure to share what you've done with your circle of support and your case manager. By doing this, you can make sure that your ISP reflects your values and preferred lifestyle. By creating an ISP that reflects the person you are, everyone can work together to help you achieve your dreams and goals.

## **Notes**

You can use this space to take notes or write down important reminders for yourself.

## **The Individual Plan**

Once you have determined what support services you need through the Individualized Service Plan (ISP) process, have been determined eligible for "The Waiver", and have chosen your service provider(s), you will meet with the service provider(s) to create your Individual Plan (IP).

You play the primary role in creating your IP. The IP will help your service provider(s) to know what service(s) and activities are needed to help you to reach your goal(s). The IP will outline the goals and activities that the service provider will assist you with to help you to reach your goal(s) as identified in your ISP.

The IP is based on the goal(s) and activities identified/reflected in your ISP that you create with your case manager and circle of support.

"The Waiver" requires the service providers to follow standards for the IP. More detailed information on the IP requirements is listed on the next page.<sup>11</sup>

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<sup>11</sup> The detailed IP requirements information is taken directly from the Department of Human Services H&CBS Medicaid DD/MR Waiver Provider Contract, Scopes and Standards section.

## I. Individual Plan (IP)

The PROVIDER shall assure IPs for all PARTICIPANTS are developed and written based on the POC, incorporating verbal and written information received from the PARTICIPANT, the DOH case manager, other agencies, the PARTICIPANT'S family, or the PARTICIPANT'S legal or designated representative for the following services:

1. Personal Assistance
2. Habilitation
3. Adult Day Health
4. Habilitation-Supported Employment
5. Respite
6. Skilled Nursing
7. Specialized Services

### 1. The IP:

- a. Shall be developed and shall be approved by a qualified supervisor as defined in the SCOPE OF SERVICES and STANDARDS;
- b. Shall include the PARTICIPANT, the DOH case manager, and members of the PARTICIPANT'S circle of supports in its development, and shall be approved by the PARTICIPANT and/or legal guardian;
- c. Shall be developed, written and implemented within seven (7) calendar days of the service start date;
- d. Shall describe functional, and measurable person-centered goals, outcomes, and interventions with time frames for achievement or completion, as applicable;
- e. Shall detail the specific methods or approaches to be implemented, including behavioral supports, to achieve the desired objective or outcome, as applicable;
- f. Shall meet the requirements as specified in the SCOPE OF SERVICES and STANDARDS of each DD/MR Medicaid Waiver Program service;
- g. Shall be written in terms easily understood by the PARTICIPANT, the primary care giver, and direct support worker.
- h. The POC shall service as an interim IP for one (1) week following the service start date.

### 2. The PROVIDER shall assure that:

- a. Direct support workers required to implement the IP are adequately and appropriately trained;
- b. The training to be conducted prior to the implementation of the IP;
- c. The training be documented;
- d. The PARTICIPANT or the PARTICIPANT'S legal or designated representative, and the DOH case manager receive copies of the IP within seven (7) calendar days of its initiation and subsequent revisions; and
- e. The distribution of copies of the IP shall be documented.

## **Jonathan**

When Jonathan started on the Waiver, he was living in a foster care home on Kaua`i. After receiving waiver services, he moved into an apartment of his own.

His Personal Assistant (PA) worker helped him to cook, clean, and do his laundry. Eventually, he was able to perform these activities for himself and the PA worker just spot-checked to make sure that everything was alright. PA workers also assisted with shopping, picking up medications, and taking Jonathan to pay his bills.

Jonathan also took computer classes for two semesters at the community college. His PA worker took notes for him and helped him with his homework assignments. Jonathan attended Partners in Policymaking as well, using his PA worker to again help him with his notes and homework.

It was at Partners in Policymaking that Jonathan met his girlfriend. He is moving to Kona to be with his girlfriend. His PA workers are helping him to pack-up and to clean his house.

## Select Waiver Support Services

“The Waiver” offers a variety of different support services for your selection. This section gives a brief explanation to help you better understand the services available under “The Waiver”. You can choose to receive one or more of the following services.

- Adult Day Health
- Habilitation
- Habilitation-Supported Employment
- Personal Assistance
- Respite
- Skilled Nursing
- Specialized Environmental Accessibility Adaptations
- Specialized Services
- Transportation

“The Waiver” offers you the choice of hiring your own direct support worker(s). This option is called Consumer Directed Personal Assistance (CD PA). It is also explained in this section.

The waiver services are officially defined by state standards. Those definitions are provided to you in the Resource section of this guidebook.

### **Adult Day Health (ADH)**

ADH services are provided in a community setting on a regularly scheduled basis to help individuals become more independent and live in the community. Services may include skill development and pre-vocational training. Transportation to and from the ADH center and to the community during an ADH services day, as well as meals are included as part of ADH.

### **Consumer Directed Personal Assistance (CD PA)**

CD PA is for individuals who are interested in directing their Personal Assistance (PA) services. It is a process that allows the individual or a designated representative to be the employer of the PA worker. This means that the

individual or designated representative will take on the role of a provider agency and be required to do tasks, such as interview, hire, and supervise workers.<sup>12</sup>

The Department of Health (DOH) offers an orientation for individuals and families who wish to consider CD PA. Individuals who choose CD PA will receive training from the DOH.

### **Habilitation (HAB)**

HAB services help individuals learn skills necessary to live in the community and increase economic self-sufficiency. These skills may include personal grooming, preparing meals, eating, bed making, doing household chores, and participating in community activities.

### **Habilitation-Supported Employment (HAB-SE)**

HAB-SE services support the individual in a competitive work setting at or above minimum wage. Activities such as supervision and training may be provided in a variety of settings. When not available through the Division of Vocational Rehabilitation (DVR) or other community resources, job development and placement services that assist individuals in obtaining a job may also be included in HAB-SE.

### **Personal Assistance (PA)**

PA supports the individual with daily activities. These daily activities may include in-home activities such as bathing, dressing, eating, preparing meals and cleaning, as well as accessing community resources, increasing circle of supports, and supporting health and safety.

### **Respite**

Respite services provide the primary caregiver or participant short-term relief from the care-giving situation. This period of relief is provided in hopes of preserving the relationship between the caregiver and the individual as well as to maintain the caregiver's health and well-being. Respite may be provided in various locations.

### **Skilled Nursing (SN)**

Skilled Nursing services are provided or supervised by a registered nurse (RN) licensed to practice in the State. These services may include suctioning, aerosol treatments, tube feedings, tracheotomy care and catheterization. Additionally, SN

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<sup>12</sup> Information adapted from the Department of Health's definition.

services may include assessment, diagnosis planning, intervention, and evaluation in the promotion and continuance of the individual's health.

### **Specialized Environmental Accessibility Adaptations (SEAA)**

SEAA refer to the physical adaptations made to the home in order to create a healthy and safe place for the individual, or to allow for more independence in the home. Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems and/or equipment and supplies. All adaptations or improvements to the home must have a direct medical or corrective benefit for the individual.

Also, SEAA provides funds to purchase, rent, or lease equipment, ancillary supplies, devices, controls, or appliances that assist the individual with his or her daily activities, communication and/or participation within the community. Additionally, this service includes training, technical support, warranties and repairs necessary to maintain the proper functioning of the equipment and supplies.

### **Specialized Services**

Specialized Services include therapeutic interventions, non-traditional approaches, training and consultation, crisis outreach, and 24-hour crisis services that are necessary to assure health and safety of the individual and are not available through the Medicaid State Plan.

### **Transportation (Non-medical)**

Transportation services are provided to help individuals gain access to waiver services and other community activities and services when not already provided by the program or service being accessed. Non-medical transportation does not include transportation for medical services otherwise covered under the Medicaid State plan.

For more information about any of the services listed above, please contact your case manager (CM).

## **Chad**

Before participating in "The Waiver", Chad chose to stay home a lot and often refused to go out. Now Chad has a life of his own. He can do his own things and his mother now has time for her own activities. He socializes more and he has lost weight. He is far more independent now that he is on "The Waiver". He also gets to participate in a number of different programs that he and his mother picked out together. Chad and his mother also get to choose his own Personal Assistance (PA) workers – this helps to make sure that Chad gets the services that are right for him.

## Select a Service Provider

Now that you've determined what support services you need, it's time to choose your service provider(s). This section includes information that may help you choose a service provider that is right for you.

"The Waiver" mandates specific qualifications for each type of provider. Provider agencies may also impose additional qualifications for their employees.

You can contact providers from the list who offer the services you need. It's a good idea to shop around and ask questions about an agency's history, philosophy, policies, and service practices. Below are some sample questions:

### Sample Questions

- Do you provide activities such as art, music, computers, dancing, exercise, gardening, swimming, or camping? (Write down other activities they offer that are not listed.)
- What activities or services do you offer that will meet my needs? (Give examples of what you want.)
- Do I get to choose the type of activity that I would like to do?
- What are some of your fun activities?
- Will my activities be individualized to be what is important to me?
- What kind of qualifications does your staff have?
- Do you provide background checks on each of your workers?
- Do you provide training for your staff? What kind?
- Will I get to choose who I want as a direct support worker?
- Who supervises the staff?
- How do I communicate whether I am satisfied or not satisfied with the direct support worker? Who do I call? When would they get back to me?

- How do you know if someone comes in when they are scheduled to do so? Who checks that services are provided? Do you expect me to sign that they have come and done the work satisfactorily?
- What happens if my worker can't come to support me? Will you call me ahead of time? Will you send another person to take his/her place? What do you do so that the substitute person is familiar with me?
- What are your hours of operation? Do you have services on the weekends? What time does the program begin and end each day?
- If I have an emergency, will you be able to help me?
- May I see your program? (Talk to the program staff and participants about the program activities.)
- Can I drop in to see your program any time?
- Where are you located? Do you have a program near me? (Give them your address.)
- Whom do I call to set up an appointment for a visit?
- How will you communicate with my case manager and me?

You can use this space to write down questions that are important to you and relate to your needs.

Question One: \_\_\_\_\_

Question Two: \_\_\_\_\_

Question Three: \_\_\_\_\_

Question Four: \_\_\_\_\_

### **Service Provider Authorization Form (SPAF)**

After you select your provider(s), you will be required to complete a Service Provider Authorization Form (SPAF). The SPAF identifies the provider(s) you have selected have agreed to and are authorized to provide your waiver services. Your case manager will provide this form to you. The form must be signed by you, a legal guardian, or designated representative. Refer to the Resources, Sample Forms section for a sample SPAF.

The following lists identify the provider agencies by island. You should identify providers in your area then check the alphabetical listing in the back of the handbook to see if that provider is authorized to offer the services you need.

## Service Providers By Island

### Hawai`i

Alternative Care Services, Inc.
Brantley Center, Inc.
Care Resource Hawai`i, Inc.
Child and Family Services
Easter Seals Hawai`i
Full Life
Goodwill Industries of Hawai`i, Inc.
Hawai`i Health Systems Corporation Hilo Medical Center Home Health
Health Resources, Inc.
In-Touch Medical
Kohala Home Health Care of North Hawai`i Community Hospital, Inc.
Kokua Nurses
Kona Krafts
Metrocare Hawai`i
Nursefinders of Hawai`i
Puna Kamali`i Flowers, Inc.
Rainbow House
Special Education Center of Hawai`i
Step by Step
The ARC of Hilo
West Hawai`i Home Health Services, Inc.

### Kaua`i

Alternative Care Services, Inc.
Child and Family Services
Easter Seals Hawai`i
Hawai`i Home Infusion Associates
Health Resources, Inc.
Ho`oheno, Inc.
In-Touch Medical
Nursefinders of Hawai`i
Rainbow House
Riders Healthcare, Inc.
Special Education Center of Hawai`i

The Arc in Hawai`i
The ARC of Kaua`I

**Maui**

Alternative Care Services, Inc.
Behavioral Counseling and Research Center
Care Resource Hawai`i, Inc.
Child and Family Services
Easter Seals Hawai`i
Health Resources Inc.
Ho`oheno, Inc.
In-Touch Medical
Ka Lima o Maui
Kokua Villa, Inc.
Maui County Department of Housing and Human Concerns
Maui Home Care
Nursefinders of Hawai`i
Rainbow House
Special Education Center of Hawai`i
The Arc of Maui

### **Moloka`i**

Alternative Care Services, Inc.
Behavioral Counseling and Research Center
Care Resource Hawai`i, Inc.
Child and Family Services
Easter Seals Hawai`i
Health Resources, Inc.
Ho`oheno, Inc.
In-Touch Medical
Ka Lima o Maui
Kokua Villa, Inc.
Maui County Department of Housing and Human Concerns
Maui Home Care
Moloka`i Occupational Center
Nursefinders of Hawai`I
Rainbow House
Special Education Center of Hawai`i
The Arc of Maui

### **Lana`i**

Alternative Care Services, Inc.
Behavioral Counseling and Research Center
Care Resource Hawai`i, Inc.
Child and Family Services
Easter Seals Hawai`i
Health Resources Inc.
Ho`oheno, Inc.
In-Touch Medical
Ka Lima o Maui
Kokua Villa, Inc.
Maui County Department of Housing and Human Concerns
Maui Home Care
Nursefinders of Hawai`i
Rainbow House
Special Education Center of Hawai`i
The Arc of Maui

## O`ahu

Aloha Habilitation Services, Inc.
Alternative Care Services, Inc.
Attention Plus Care
Behavioral Counseling and Research Center
Care Resource Hawai`i, Inc.
Castle Community Care
Catholic Charities Family Services
Child and Family Services
Easter Seals Hawai`i
Family Services of O`ahu
Goodwill Industries of Hawai`i, Inc.
Hale Nui Community Services, Inc.
Hawai`i Centers for Independent Living
Hawai`i Health Services, Inc.
Hawaiian Islands Medical Corp.
Health Resources, Inc.
Heaven's Helpers, Inc.
Ho`oheno, Inc.
Home & Community Service of Hawai`i, Inc.
In-Touch Medical
Kokua Nurses
Kokua Villa, Inc.
Lanakila Rehabilitation Center, Inc.
Manawa Lea Health Services, Inc.
Nursefinders of Hawai`i
Opportunities for the Retarded, Inc.
Preferred Home and Community Based Services, Inc.
Rainbow House
Research Center of Hawai`i – Special Needs Network, Inc.
Riders Healthcare, Inc.
Special Education Center of Hawai`i
The Arc in Hawai`i
Therapist and Homecare on Call
Total Home Care
Wilson In Home, Inc.
Winners at Work, Inc.

## Applying for Medicaid

“Medicaid is a program that pays for medical assistance for certain individuals and families with low incomes and resources. This program became law in 1965 and is jointly funded by the Federal and State governments (including the District of Columbia and the Territories) to assist States in providing medical long-term care assistance to people who meet certain eligibility criteria. Medicaid is the largest source of funding for medical and health-related services for people with limited income.”<sup>13</sup>

### Eligibility Requirements

- Individuals age 19 and over must be a U.S. citizen or a qualified alien.
- Individuals under age 19 may have their citizenship waived.
- You must be a resident of Hawai`i.
- You must provide a Social Security number.
- You must not be a resident of a public institution.
- You must be age 65 or older if you are not certified blind by the State nor certified disabled per Social Security criteria.
- If you are certified blind by the State there is no age requirement.
- If you are certified disabled per Social Security criteria there is no age requirement.
- You must be ineligible for Hawai`i QUEST.

Medicaid also has income and resource requirements that you must meet. You apply for Medicaid through the State of Hawai`i Department of Human Services (DHS) Med-QUEST Division.

Once you qualify for Medicaid, you must renew your Medicaid eligibility every year. If you do not renew your Medicaid, or your Medicaid lapses, you will lose your services. DHS will mail a reminder to renew your Medicaid to the address you give them. It is very important to inform DHS when you move so they can mail the form to the right place.

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<sup>13</sup> This definition was taken from the Centers for Medicare and Medicaid Services available at: <http://www.cms.hhs.gov/medicaid/>.

## Application

You can access the Medical Assistance application online, or you can contact the DHS Eligibility Office near you. Refer to the Resources, Sample Forms section for a sample Application for Medical Assistance.

To download the application, go to:

<http://www.med-quest.us/forms/eligibility/index.html>

(Medical Application Form DHS 1100)

To contact a Med-QUEST Division Eligibility Office near you:

Big Island (Hawai`i) – East Hawai`i	Telephone: (808) 933-0339
Big Island (Hawai`i) – West Hawai`i	Telephone: (808) 327-4970
Kaua`i	Telephone: (808) 241-3575
Lana`i	Telephone: (808) 565-7102
Maui	Telephone: (808) 243-5780
Moloka`i	Telephone: (808) 553-1758
O`ahu	Telephone: (808) 587-3521

## Before You Get Started

The Medicaid application is very long, so it is a good idea to gather the information listed below. You will need to have it ready when you start filling out your application. You will need to know:

- Your legal name;
- Your phone number;
- Your home address;
- Your mailing address;
- Your birth date;
- Your social security number;
- Your citizenship; and
- Your ethnicity (optional).

You will need to provide the names of all the people who live in your household. Include family members who are responsible for each other, such as spouses, those who you give money to or give money to you, children under 19 years old, and the children’s parents.”

List Everyone Who Lives with You

_____	_____
_____	_____

Then you will need to provide the following information about each person on your list.

- Their legal names;
- Their birth dates and ages;
- Their relationship to you; and
- Their marital status.

## What If I’m Not Eligible For Medicaid?

You must be eligible for Medicaid to enroll in "The Waiver". Therefore, if you are found to be ineligible for Medicaid, you may appeal that decision. The appeal process is included on the application form and will be included with your determination letter. It is also explained below.

The Department of Human Services (DHS) must notify you if you are denied Medicaid. If you disagree with this decision or are ever dissatisfied with any decision the DHS makes, you have the right to request a fair hearing to appeal that decision. To request a fair hearing, you must send a letter to the DHS within 90 days from the date on the letter the DHS sent you telling you that you have been denied coverage.

Send your letter to this address:

Department of Human Services  
Administrative Appeals Office  
P.O. Box 339  
Honolulu, HI 96809

You may ask the Legal Aid Society of Hawai`i, the Hawaii Disability Rights Center (HDRC) or another advocacy agency to help you prepare for and participate in this hearing. Information on contacting advocacy agencies is provided in the Resource section of this guidebook.

## **Rights and Responsibilities**

Participating in “The Waiver” may give you a great sense of freedom. The freedom also comes with responsibility. It is important to understand your rights and responsibilities as a waiver participant.

This section explains your rights and responsibilities. If you have any questions about the information in this section, you should seek help from your case manager (CM), your circle of support, or one of the agencies listed in the Resource section of this guidebook.

The agencies involved in “The Waiver” each have a process to address any concerns or complaints you might have. If there is a problem with your services or your providers you should ask to speak with a supervisor and try to work it out with them. If this does not resolve the problem to your satisfaction, you can file an appeal or grievance. This section tells you what steps to take to resolve disagreements in different situations with the Department of Health (DOH), Department of Human Services (DHS), and provider agencies.

This section reviews what you should do if you are denied

- Medicaid eligibility
- Waiver eligibility
- Waiver services

Or

- Waiver services are reduced
- Waiver services are discontinued
- You are unhappy with services or providers
- You disagree with any decision made by the State

### **State Process** (For DOH/DHS Applicants and Participants)

You have the right to disagree with any decision made by the State about you or your services. When the service or decision you are dissatisfied with originates from the DOH or DHS, you always have the right to:

- Ask for an informal discussion with staff from the DHS concerning any action involving your services if you are dissatisfied. (DD/MR Waiver participants may also ask for an informal discussion with the DOH);

- Be notified in advance, before your services are reduced or discontinued;
- If you are dissatisfied with any action by the DHS or DOH, you may ask for a fair hearing before a Hearings Officer. Participants in the DD/MR Waiver have the option to request a fair hearing from the DOH, whose recommendation will be forwarded to the DHS for a final decision. Your request must be in writing on the respective department's form or any other paper and must state that you want a hearing and why you do not agree with the respective department's action that adversely affects you. The DHS or the DOH must receive your written request for a fair hearing within 90 days of the date a notice of any adverse action is mailed to you. Your fair hearing request should be addressed and sent to:

Department of Human Services  
Administrative Appeals Office  
P.O. Box 339  
Honolulu, HI 96809

(or for Participants in the DD/MR Waiver)

Department of Health  
Director of Health  
1250 Punchbowl St.  
Honolulu, HI 96813

If you have been admitted into a Medicaid waiver program, your services may continue if your request for a fair hearing is received no later than the day before a reported action is to take effect and will continue until the fair hearing decision is reached. If your services continue pending a fair hearing decision and the Fair Hearing Officer's decision is not in your favor, or if you withdraw or abandon your request, you will need to repay the amounts you were not entitled to receive.

You also have the right to:

- Speak for yourself or have a lawyer, friend, or other person speak for you at the informal meeting or at the fair hearing, to say why you are dissatisfied with the action that adversely affects you. If you wish, the DHS or (for DD/MR Waiver participants) the DOH can give you information about a local Legal Aid Office that can help advise or represent you at no cost.
- Have your record(s) kept confidential.
- Equal access to programs of the DHS, without regard to race, color, national origin (including language), age, sex, religion, or disability. If you feel you have been discriminated against, write immediately to:

Department of Human Services  
Civil Rights Compliance Office  
P.O. Box 339  
Honolulu, HI 96809

### **DD Ombudsman Office** (For DOH DDD participants)

The DD Ombudsman Office is part of the Developmental Disabilities Division (DDD) quality assurance system. It was established to address and resolve complaints and concerns relating to "The Waiver" and other DDD services. The Ombudsman follows through on all calls to resolution or closure. All calls are confidential and shared only on a "need to know" basis.

If you are ever dissatisfied with waiver services, your case manager, or DDD services, you may file a complaint with the DD Ombudsman at:

2201 Waimano Home Road  
Pearl City, Hawai`i 96782  
Telephone: (808) 453-6669\* Fax: (808) 453-6244  
E-mail: [ddombuds@mail.health.state.hi.us](mailto:ddombuds@mail.health.state.hi.us)

\*Neighbor Islands (toll free)

Hawai`i (808) 974-4000 Maui (808) 984-2400  
Kaua`i (808) 274-3141 Moloka`i 1-800-468-4644  
Lana`i 1-800-468-4644 (Enter Extension: 3-6669)

### **Provider Agency Process** (For Waiver Participants)

All waiver service provider agencies must have policies and procedures to address participant rights with participants and their designated representatives. The policies and procedures must include but are not limited to:

- Freedom of choice of services, supports, and providers.
- Receiving individually defined and appropriate services and supports.
- Receiving information that defines the grievance and appeals process.
- Being treated with understanding, dignity, and respect.
- Being free from exploitation, neglect, and abuse.
- Being fully informed, prior to or at the time of service start date, of services to be provided by the agency.
- Being informed of agency policies and procedures governing participant conduct.
- Being given advance notice, preferably two weeks, of provider change in services, transfer, or discharges, except in an emergency.
- Privacy and confidentiality in treatment and in personal care.

If you feel that any of these rights have been violated, ask to speak to an agency supervisor and try to work it out with them. If this does not solve the problem to your satisfaction, then you can contact the DOH or DHS.

## Your Responsibilities

It is important to understand what the State expects of you as a waiver participant. Some of your major responsibilities are outlined here.

- Keep your case manager (CM) informed when you move or change your telephone number.
- Provide true and complete information about your coverage and services.
- Cooperate with agencies involved in your care.
- Provide any financial information required to ensure the continuation of your coverage.
- Notify your case manager (CM) if you are ever hospitalized for any reason.
- Fully participate in re-evaluations or re-applications when necessary.
- Renew your Medicaid eligibility on an annual basis.

## Understanding the Laws That Protect You

There are a number of state and federal laws that protect the rights of people with developmental disabilities. In addition to the Americans with Disabilities Act and other federal laws, there are state laws that protect you.

The Hawai`i State Legislature created a law to make sure people with developmental disabilities are always treated fairly. The Hawai`i Revised Statutes (HRS), Section 333F-8 states:

**“§333F-8 Rights of persons with developmental disabilities or mental retardation.** (a) Persons with developmental disabilities or mental retardation shall have the following rights:

- (1) To receive the least restrictive, individually appropriate services, including a program of activities outside the residence in accordance with the person's Individualized Service Plan (ISP);
- (2) To reside in the least restrictive, individually appropriate residential alternative located as close as possible to the person's home community within the State;
- (3) To the extent it is individually appropriate as decided after due

- consideration afforded the preferences of the person with developmental disabilities or mental retardation, to:
- (A) Interact with persons without disabilities in a non-treatment, non-service-oriented setting
  - (B) Live with, or in close proximity to, persons without disabilities; and
  - (C) Live in a setting which closely approximates those conditions available to persons without disabilities of the same age;
- (4) To reasonable access to review medical, service, and treatment files and to be informed of diagnoses;
  - (5) To develop a plan with the input of family and friends that identifies the supports needed to accomplish the plan rather than purchase a program;
  - (6) To control, with the help of family and friends as necessary, an identified amount of dollars to accomplish the plan;
  - (7) To direct the provision of resources, both paid and unpaid, that will assist an individual with a disability to live a life in the community rich in community association and contribution;
  - (8) To a valued role in the community through employment, participation in community activities, volunteering, including being accountable for spending public dollars in ways that are life enhancing; and
  - (9) To privacy and confidentiality, to the extent possible, in connection with services provided to the person.
- (b) Rights listed in this chapter shall not be construed to replace or limit any other rights, benefits, or privileges, including other statutory and regulatory due process rights and protections, to which a person with developmental disabilities or mental retardation may be entitled.
  - (c) The enumeration or granting of these rights does not guarantee the provision of services. [L 1987, c 341, pt of §2; am L 1995, c 189, §7; am L 1998, c 133, §4]"

## **Resources**

This section contains a number of different resources available to you.

- A list of acronyms;
- A list of different state agencies that can help you or provide important information;
- A list of agencies and organizations you may contact to assist you with the enforcement of your rights and responsibilities;
- A list of Waiver service provider agencies;
- Waiver service definitions; and
- Sample forms.

## Acronyms

<b>ACCSB</b>	Adult & Community Care Services Branch
<b>ACF</b>	Administration for Children & Families
<b>ADD</b>	Administration on Developmental Disabilities
<b>ADH</b>	Adult Day Health
<b>ATRC</b>	Assistive Technology Resource Center
<b>CAMHD</b>	Child and Adolescent Mental Health Division
<b>CAP</b>	Client Assistance Program
<b>CD PA</b>	Consumer Directed Personal Assistance
<b>CDS</b>	Center on Disability Studies
<b>CLR</b>	Community Living Resources
<b>CMISB</b>	Case Management & Information Services Branch
<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>CSHNB</b>	Children with Special Health Needs Branch
<b>DCAB</b>	Disability Communication Access Board
<b>DD</b>	Developmental Disabilities
<b>DD/MR</b>	Developmentally Disabled/Mentally Retarded
<b>DDC</b>	State Council on Developmental Disabilities

<b>DDD</b>	Developmental Disabilities Division
<b>DHS</b>	Department of Human Services
<b>DOE</b>	Department of Education
<b>DOH</b>	Department of Health
<b>DVR</b>	Vocational Rehabilitation and Services to the Blind Division
<b>EIS</b>	Early Intervention Section
<b>EOA</b>	Executive Office on Aging
<b>FAPE</b>	Free and Appropriate Public Education
<b>FY</b>	Fiscal Year
<b>GA</b>	General Assistance
<b>HAB</b>	Habilitation
<b>HAB-SE</b>	Habilitation-Supported Employment
<b>HB</b>	House Bill
<b>HCBS</b>	Home & Community-Based Services
<b>HCIL</b>	Hawaii Centers on Independent Living
<b>HCR</b>	House Concurrent Resolution
<b>HDRC</b>	Hawaii Disability Rights Center
<b>HR</b>	House Resolution

<b>HRS</b>	Hawaii Revised Statutes
<b>HSRI</b>	Human Services Research Institute
<b>ICF/MR</b>	Intermediate Care Facility for the Mentally Retarded
<b>IDEA</b>	Individuals with Disabilities Education Act
<b>IEP</b>	Individualized Education Plan
<b>IFSP</b>	Individualized Family Support Plan
<b>IP</b>	Individualized Plan
<b>ISP</b>	Individualized Support Plan
<b>LDAH</b>	Learning Disability Association of Hawaii
<b>MCHB</b>	Maternal and Child Health Branch
<b>MQD</b>	Med-QUEST Division
<b>MR</b>	Mental Retardation
<b>OSEP</b>	Office of Special Education Programs
<b>OSERS</b>	Office of Special Education & Rehabilitation Services
<b>PA</b>	Personal Assistance
<b>PAIMI</b>	Protection and Advocacy for Individuals with Mental Illness
<b>PL</b>	Public Law
<b>PNS</b>	Projects of National Significance

<b>POC</b>	Plan of Care
<b>POS</b>	Purchase of Service
<b>RSA</b>	Rehabilitation Services Administration
<b>SB</b>	Senate Bill
<b>SCHIP</b>	State Children's Health Insurance Program
<b>SCR</b>	Senate Concurrent Resolution
<b>SEAA</b>	Specialized Environmental Accessibility Adaptations
<b>SPIN</b>	Special Parent Information Network
<b>SR</b>	Senate Resolution
<b>SSD</b>	Social Services Division
<b>SSDI</b>	Social Security Disability Insurance
<b>SSI</b>	Supplemental Security Income
<b>TANF</b>	Temporary Assistance for Needy Families

## State Officials

### United States Senators

#### **Honorable Daniel K. Akaka (D)**

141 Hart Senate Office Building  
Washington, DC 20510-1103  
Phone: (202) 224-6361 Fax: (202) 224-2126  
E-mail: senator@akaka.senate.gov  
Web: <http://akaka.senate.gov>

Honolulu Office  
Prince Kuhio Federal Building  
300 Ala Moana Blvd., Rm. 3-106  
Box 50144  
Honolulu, HI 96850  
Phone: (808) 522-8970 Fax: (808) 545-4683

Hilo Office  
101 Aupuni St., Room 213  
Hilo, HI 96720  
Phone: (808) 935-1114 Fax: (808) 935-9064

#### **Honorable Daniel K. Inouye (D)**

722 Hart Senate Office Building  
Washington, DC 20510-2201  
Phone: (202) 224-3934 Fax: (202) 224-6747  
E-mail Web Form: <http://inouye.senate.gov/webform.html>  
Web: <http://inouye.senate.gov>

Honolulu Office  
Prince Kuhio Federal Building  
300 Ala Moana Blvd., Room 7-212  
Honolulu, HI 96850-4975  
Phone: (808) 541-2542 Fax: (808) 541-2549

Maui  
Ryther Barbin, Field Representative  
24 N. Church St., #407  
Wailuku, HI 96793  
Phone: (808) 242-9702 Fax: (808) 242-7233

Hilo Office  
William Kikuchi, Field Representative  
101 Aupuni St., Room 205

Hilo, HI 96720  
Phone: (808) 935-0844 Fax: (808) 961-5163

Moloka'i  
William Akutagawa, Field Representative  
P.O. Box 573  
Kaunakakai, HI 96748  
Phone: (808) 642-0203 Fax: (808) 560-3385

Kona  
Wayne Tanaka, Field Representative  
P.O. Box 4I  
Kealahou, HI 96750  
Phone: (808) 935-0844 Fax: (808) 961-5163

Kaua'i  
Ronald Sakoda, Field Representative  
1840A Leleiona St.  
P.O. Box 311  
Lihue, HI 96766  
Phone: (808) 245-4611 Fax: (808) 246-9515

West Oahu  
Edmund C. Aczon, Field Representative  
94-403 Punono St.  
Mililani, HI 96789  
Phone: (808) 623-8334

## **United States Representatives**

**Honorable Neil Abercrombie (D)**  
1502 Longworth House Office Building  
Washington, D.C. 20515-1101  
Phone: (202) 225-2726 Fax: (202) 225-4580  
E-mail: [neil.abercrombie@mail.house.gov](mailto:neil.abercrombie@mail.house.gov)

*(note: mail delivery to Washington office remains unpredictable, due to backlog caused by security screening)*

Honolulu Office  
Prince Kuhio Federal Building  
300 Ala Moana Blvd., Room 4-104  
Honolulu, HI 96850  
Phone: (808) 541-2570 Fax: (808) 533-0133

**Honorable Ed Case (D)**

128 Cannon House Office Building  
Washington D.C. 20515  
Phone: (202) 225-4906\* Fax (202) 225-4987  
E-mail: [ed.case@mail.house.gov](mailto:ed.case@mail.house.gov)  
Website: <http://wwwc.house.gov/case>

\*Toll Free Number for Neighbor Island Callers

Hawai'i County: 935-3756  
Island of Maui: 242-1818  
Island of Lana'i: 565-7199  
Island of Moloka'i: 552-0160  
Kaua'i County: 245-1951

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Honolulu, HI 96850  
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**Governor**

Honorable Linda Lingle  
State Capitol Executive Chambers  
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Honolulu, HI 96813  
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Web: [www.hawaii.gov/gov](http://www.hawaii.gov/gov)

## **State Agencies**

### **Department of Health**

Developmental Disabilities Division (Division Administration)  
1250 Punchbowl St., Room 463  
Honolulu, HI 96813  
Phone: (808) 586-5840

Developmental Disabilities Services Branch (DD Services Branch)  
2201 Waimano Home Road  
Pearl City, HI 96782  
Phone: (808) 453-6255

Case Management and Information Services Branch (CMIS Branch)  
Diamond Head Health Center  
3627 Kilauea Ave., Room 109  
Honolulu, HI 96816  
Phone: (808) 733-9172

DD Ombudsman Office  
2201 Waimano Home Rd.  
Pearl City, HI 96782  
Phone: (808) 453-6669                      Fax: (808) 453-6244  
E-mail: [ddombuds@mail.health.state.hi.us](mailto:ddombuds@mail.health.state.hi.us)  
Phone: (808) 587-0770 (O`ahu)  
Phone: (808) 974-4000 (Hawai`i/Big Island)  
Phone: (808) 984-2400 (Maui)  
Phone: (808) 274-3141 (Kaua`i)  
Phone: (800) 468-4644 (Moloka`i and Lana`i)

### **Department of Human Services**

1390 Miller St., Room 209  
Honolulu, HI 96813  
Phone: (808) 586-4997

### **Hawai`i State Council on Developmental Disabilities**

919 Ala Moana Blvd., Room 113  
Honolulu, HI 96814  
Phone: (808) 586-8100

## **Advocacy Agencies**

These agencies may assist you with legal disputes that arise over your eligibility or services.

### **Hawai`i Disabilities Rights Center**

900 Fort Street Mall, Suite 1040

Honolulu, HI 96813

Phone: (808) 949-2922; (800) 882-1057

### **Law Center for Special Education Advocacy**

223 S. King St., 2nd Floor

Honolulu, HI 96813

Phone: (808) 523-5437

### **Lawyer Referral Service**

Hawai`i State Bar Association

1132 Bishop St.

Honolulu, HI 96813

Phone: (808) 537-9140

### **Legal Aid Society of Hawai`i**

#### Hilo

305 Wailuku Dr.

Hilo, HI 96720

Phone: (808) 934-0678

#### Honolulu

924 Bethel St.

Honolulu, HI 96813

Phone: (808) 536-4302

#### Kaua`i

4334 Rice St., Suite 204A

Lihue, HI 96766

Phone: (808) 245-4728

#### Kona

75-5656 Kuakini Highway, Suite 202

Kailua-Kona, HI 96740

Phone: (808) 329-8331

Lana`i

Mailing address: PO Box 315, Lana`i City, HI 96763

Physical address: 730 Lana`i Ave. Suite 129, Lana`i City, HI 96763

Phone: (808) 565-6089

Maui

2287 Main St.

Wailuku, HI 96793

Phone: (808) 242-0714

Moloka`i

Mailing address: PO Box 427, Kaunakakai, HI 96748

Physical Address: 19-23 Ala Malama St. Kaunakakai, HI 96748

Phone: (808) 553-3251

More information and resources on legal service agencies, social service providers and government agencies can be found through Law Help Hawaii, a project by the Legal Aid Society of Hawai`i.

You can visit their website at <http://www.lawhelp.org/HI/>.

## Waiver Provider Agencies

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Aloha Habilitation Services, Inc.	232 Walker Ave. Wahiawa, HI 96786 (808) 622-1756; fax (808) 622-1756	<ul style="list-style-type: none"> <li>• Habilitation</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> </ul>
Alternative Care Services, Inc.	1700 Makiki St., Suite 208 Honolulu, HI 96819 (808) 847-3006	<ul style="list-style-type: none"> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> <li>• Specialized Services</li> </ul>
Attention Plus Care	1580 Makaloa St. Suite 1060 Honolulu, HI 96814 (808) 739-2811; fax (808) 739-0169 website: <a href="http://www.attentionplus.com">http://www.attentionplus.com</a> email: <a href="mailto:info@attentionplus.com">info@attentionplus.com</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> </ul>
Behavioral Counseling and Research Center	575 Cooke St., Suite A-1622 Honolulu, HI 96813 (808) 254-0909; fax (808) 254-6655 website: <a href="http://www.bcrc.com">http://www.bcrc.com</a> email: <a href="mailto:info@bcrc.com">info@bcrc.com</a>	<ul style="list-style-type: none"> <li>• Habilitation</li> <li>• Specialized Services</li> </ul>
Brantley Center, Inc.	PO Box 1407 Honoka`a, HI 96727 (808) 775-7245; fax (808) 775-0211	<ul style="list-style-type: none"> <li>• Adult Day Health I</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Care Resource Hawai`i, Inc.	680 Iwilei Road Suite 660 Honolulu, HI 96817 (808) 599-4999; fax (808) 599-8880 website: <a href="http://www.careresourcehawaii.org">http://www.careresourcehawaii.org</a>	<ul style="list-style-type: none"> <li>• Personal Assistance II, Chore</li> <li>• Skilled Nursing</li> </ul>
Castle Community Care	46-001 Kamehameha Hwy, Suite 212 Kaneohe, HI 96744 (808) 234-7142; fax (808) 234-5800 website: <a href="http://www.castlehomecare.org">http://www.castlehomecare.org</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II</li> <li>• Skilled Nursing</li> </ul>
Catholic Charities Family Services	200 N. Vineyard Blvd, Suite 200 Honolulu, HI 96817 (808) 536-1794; fax (808) 595-0811 website: <a href="http://www.catholiccharitieshawaii.org">http://www.catholiccharitieshawaii.org</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II</li> <li>• Skilled Nursing</li> <li>• Respite</li> </ul>
Child and Family Services	Carla Bogdahn 91-1841 Fort Weaver Road Ewa Beach, HI 96706 (808) 681-1443; fax (808) 681-5280 website: <a href="http://www.cfs-hawaii.org">http://www.cfs-hawaii.org</a> email: <a href="mailto:cfs@cfs-hawaii.org">cfs@cfs-hawaii.org</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II</li> <li>• Habilitation</li> <li>• Specialized Services</li> </ul>
Easter Seals Hawai`i	710 Green Street Honolulu, HI 96813 (808) 536-1015; fax (808) 536-3765 website: <a href="http://www.eastersealshawaii.org">http://www.eastersealshawaii.org</a> email: <a href="mailto:info@eastersealshawaii.org">info@eastersealshawaii.org</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Skilled Nursing</li> <li>• Respite</li> <li>• Transportation</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Family Services of O`ahu	94-307 Farrington Hwy, Suite B-2B Waipahu, HI 96797 (808)678-3222; fax (808) 678-3228	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Respite</li> <li>• Skilled Nursing</li> </ul>
Full Life	79-7460 Mamalahoa Hwy, Suite 212 Kealahou, HI 96750 (808) 322-9333; fax (808) 322-9334 email: <a href="mailto:info@fullifehawaii.org">info@fullifehawaii.org</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Skilled Nursing</li> <li>• Residential Habilitation I, II, III</li> <li>• Habilitation- Supported Employment</li> </ul>
Goodwill Industries of Hawai`i, Inc.	2610 Kilihau St. Honolulu, HI 96819 (808) 836-0313; fax (808) 833-4943 website: <a href="http://www.higoodwill.org">http://www.higoodwill.org</a> email: <a href="mailto:info@higoodwill.org">info@higoodwill.org</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Transportation</li> </ul>
Hale Nui Community Services, Inc.	67-292 Goodale Ave., #A-6 Waialua, HI 96791 (808) 637-2646; fax (808) 637-4577	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> </ul>
Hawai`i Centers for Independent Living	414 Kuwili St., Suite 102 Honolulu, HI 96817 (808) 522-5400; fax (808) 522-5427 website: <a href="http://www.hcil.org">http://www.hcil.org</a> email: <a href="mailto:plockwood@diverseabilities.org">plockwood@diverseabilities.org</a>	<ul style="list-style-type: none"> <li>• Transportation</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Hawai`i Health Services, Inc.	98-030 Hakaha St., Suite 22 Aiea, HI 96701 (808) 484-5605; fax (808) 484-5606	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> </ul>
Hawai`i Health Systems Corporation Hilo Medical Center Home Health	1190 Waianuenue Ave Hilo, HI 96720 (808) 974-4700 website: <a href="http://www.hhsc.org/easthi/hmc">http://www.hhsc.org/easthi/hmc</a>	<ul style="list-style-type: none"> <li>• Skilled Nursing</li> </ul>
Hawai`i Home Infusion Associates	4473 Pahee St, I Lihue, HI 96766 1 (888) 779-8477	<ul style="list-style-type: none"> <li>• Specialized Medical Equipment and Supplies</li> </ul>
Hawaiian Islands Medical Corp.	841 Pohukaina St., Unit B8 Honolulu, HI 96813 1 (866) 264-4633 Website: <a href="http://www.himed.cc/about.htm">http://www.himed.cc/about.htm</a>	<ul style="list-style-type: none"> <li>• Specialized Medical Equipment and Supplies</li> </ul>
Health Resources, Inc.	725 Kapi`olani Blvd., Suite C-210 Honolulu, HI 96813 (808) 593-8700; fax (808) 593-8701 email: <a href="mailto:hrhawaii@hawaii.rr.com">hrhawaii@hawaii.rr.com</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> </ul>
Heaven's Helpers, Inc.	PO Box 27891 Honolulu, HI 96827 (808) 952-6898; fax (808) 952-6878 website: <a href="http://www.heavenshelpershawaii.com">http://www.heavenshelpershawaii.com</a> email: <a href="mailto:info@heavenshelpershawaii.com">info@heavenshelpershawaii.com</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Ho'oheno, Inc.	PO Box 713 Ele`ele, HI 96705 (808) 338-2443; fax (808) 338-2449 email: <a href="mailto:james@hawaiiink.net">james@hawaiiink.net</a>	<ul style="list-style-type: none"> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> <li>• Specialized Services</li> </ul>
Home and Community Service of Hawai`i, Inc.	2827-A Waimano Home Road, 1 <sup>st</sup> Floor Pearl City, HI 96782 (808) 454-0511; fax (808) 454-0512	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> <li>• Specialized Services</li> </ul>
In-Touch Medical	1819 S. Kihei Rd, D-104 Kihei, HI 96753 (808) 875-6690; fax (808) 875-6691	<ul style="list-style-type: none"> <li>• Specialized Environmental Accessibility Adaptations – PERS</li> </ul>
Ka Lima o Maui	95 Mahalani St Wailuku, HI 96793 (808) 244-5502; fax (808) 244-2077 website: <a href="http://www.maui.net/~kalima/kalima2.html">http://www.maui.net/~kalima/kalima2.html</a> email: <a href="mailto:kalima@maui.net">kalima@maui.net</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1</li> <li>• Personal Assistance I, Chore</li> </ul>
Kohala Home Health Care of North Hawai`i Community Hospital, Inc.	67-1125 Mamalahoa Hwy Kamuela, HI 96743 (808) 881-4711; fax (808) 881-4720 email: <a href="mailto:paytonaa@nhawaiiipo.ah.org">paytonaa@nhawaiiipo.ah.org</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Kokua Nurses	1210 Auahi St., Suite 223 Honolulu, HI 96814 594-2326; fax (808) 592-1248 website: <a href="http://www.kokuanurses.com">http://www.kokuanurses.com</a> email: <a href="mailto:info@kokuanurses.com">info@kokuanurses.com</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> </ul>
Kokua Villa, Inc.	86-080 Farrington Hwy, Suite 102 Wai`anae, HI 96792 (808) 696-7000; fax (808) 696-7003	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> </ul>
Kona Krafts	P. O. Box 127 Kealahou, HI 96750 (808) 323-2626; fax (808) 323-9444 website: <a href="http://www.konakrafts.org">http://www.konakrafts.org</a> email: <a href="mailto:gretchen@konakrafts.org">gretchen@konakrafts.org</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Specialized Services</li> </ul>
Lanakila Rehabilitation Center, Inc.	1809 Bachelot St. Honolulu, HI 96817 (808) 531-0555; fax (808) 533-7264 email: <a href="mailto:lrc@pixi.com">lrc@pixi.com</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I</li> </ul>
Manawa Lea Health Services, Inc.	PO Box 1089 Aiea, HI 96701 (808) 456-5608; fax (808) 456-5609	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> <li>• Transportation</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Maui County Department of Housing and Human Concerns	401 Alakapa Pl. Paia, HI 96779 (808) 270-7805; fax (808) 270-8034 website: <a href="http://www.co.maui.hi.us/departments/Housing">http://www.co.maui.hi.us/departments/Housing</a> email: <a href="mailto:director.hhc@co.maui.hi.us">director.hhc@co.maui.hi.us</a>	<ul style="list-style-type: none"> <li>• Transportation</li> </ul>
Maui Home Care	60 E. Wakea #111 Kahului, HI 96732 1 (888) 779-8477	<ul style="list-style-type: none"> <li>• Specialized Medical Equipment and Supplies</li> </ul>
Metrocare Hawai`i	PO Box 6334 Hilo, HI 96720 (808) 934-8334; fax (808) 933-9352	<ul style="list-style-type: none"> <li>• Skilled Nursing</li> </ul>
Moloka`i Occupational Center	PO Box 1019 Kaunakakai, HI 96748 (808) 553-3266; fax (808) 533-8531	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> </ul>
Nursefinders of Hawai`i	1100 Ward Ave. Suite 700 Honolulu, HI 96814 (808) 522-6051; fax (808) 522-6057	<ul style="list-style-type: none"> <li>• Personal Assistance I, II</li> <li>• Respite</li> <li>• Skilled Nursing</li> <li>• Specialized Services</li> </ul>
Opportunities for the Retarded, Inc.	64-1510 Kamehameha Hwy Wahiawa, HI 96786 (808) 622-3929; fax (808) 621-8227 website: <a href="http://www.helemano.org">http://www.helemano.org</a> email: <a href="mailto:helemano@hula.net">helemano@hula.net</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2</li> <li>• Habilitation</li> <li>• Personal Assistance I, Chore</li> <li>• Transportation</li> </ul>
Preferred Home and Community Based Services, Inc.	97-719 Kamehameha Hwy, Suite B101 Pearl City, HI 96782 (808) 456-0078; fax (808) 456-7119	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Puna Kamali`i Flowers, Inc.	16-211 Kalara St. Kea`au, HI 96749 (808) 982-8322; fax (808) 982-8544	<ul style="list-style-type: none"> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, Chore</li> <li>• Transportation</li> </ul>
Rainbow House	1441 Kapi`olani Blvd., Suite 807 Honolulu, HI 96814 (808) 955-7244; fax (808) 955-7249	<ul style="list-style-type: none"> <li>• Specialized Services</li> </ul>
Research Center of Hawai`i – Special Needs Network, Inc.	98-042 Kamehameha Hwy. Aiea, HI 96701 (808) 488-7391; fax (808) 488-6952 website: <a href="http://www.rchsnn.org">http://www.rchsnn.org</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> <li>• Specialized Services</li> <li>• Transportation</li> </ul>
Riders Healthcare, Inc.	1314 S. King St, Suite 410 Honolulu, HI 96814 (808) 597-8866; fax (808) 593-2713	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> </ul>
SECOH	708 Palekaua St. Honolulu, HI 96816 (808) 734-0233; fax (808) 734-0391 website: <a href="http://www.secoh.org">http://www.secoh.org</a> email: <a href="mailto:info@secoh.org">info@secoh.org</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II</li> <li>• Respite</li> <li>• Skilled Nursing</li> </ul>
Step by Step	PO Box 11404 Hilo, HI 96720 (808) 935-5800; fax (808) 935-8600	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
The Arc in Hawai`i	3989 Diamond Head Road Honolulu, HI 96816 (808) 737-7995; fax (808) 732-9531 website: <a href="http://www.thearcinhawaii.org">www.thearcinhawaii.org</a> email: <a href="mailto:info@thearcinhawaii.org">info@thearcinhawaii.org</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Skilled Nursing</li> <li>• Specialized Services</li> <li>• Transportation</li> </ul>
The ARC of Hilo	1099 Waianuenu Ave Hilo, HI 96720 (808) 935-8535; fax (808) 961-0148 website: <a href="http://www.hiloarc.org">http://www.hiloarc.org</a> email: <a href="mailto:info@hiloarc.org">info@hiloarc.org</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Transportation</li> </ul>
The ARC of Kaua`i	3201 Akahi St. Lihue, HI 96766 (808) 245-4132; fax (808) 245-1721	<ul style="list-style-type: none"> <li>• Adult Day Health 1</li> <li>• Personal Assistance I</li> <li>• Transportation</li> </ul>
The Arc of Maui	95 Mahalani St. Wailuku, HI 96793 (808) 242-5781; fax (808) 244-4061 email: <a href="mailto:camcntr@mauigateway.com">camcntr@mauigateway.com</a>	<ul style="list-style-type: none"> <li>• Adult Day Health 1, 2, 3</li> <li>• Habilitation</li> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, II, Chore</li> <li>• Respite</li> <li>• Specialized Services</li> <li>• Transportation</li> </ul>
Therapist and Homecare On Call	46-005 Kawa St., Suite 104 Kaneohe, HI 96744 (808) 235-8805; fax (808) 235-8807 email: <a href="mailto:tochoc@lava.net">tochoc@lava.net</a>	<ul style="list-style-type: none"> <li>• Personalized Assistance I, II, Chore</li> <li>• Skilled Nursing</li> <li>• Specialized Services</li> </ul>

<b>Agency</b>	<b>Contact Information</b>	<b>Services</b>
Total Home Care	2184 N. King St. Honolulu, HI 96816 (888) 779-8477	<ul style="list-style-type: none"> <li>• Specialized Medical Equipment and Supplies</li> </ul>
West Hawai`i Home Health Services, Inc.	PO Box 859 Captain Cook, HI 96704 (808) 328-9883; fax (808) 328-8052	<ul style="list-style-type: none"> <li>• Personal Assistance I, II</li> <li>• Skilled Nursing</li> <li>• Specialized Environmental Accessibility Adaptations – PERS</li> </ul>
Wilson In Home, Inc.	PO Box 2058 Honolulu, HI 96805 (808) 847-1404; fax (808) 596-4822 website: <a href="http://www.wilsoninhome.com">http://www.wilsoninhome.com</a> email: <a href="mailto:shelljw@aol.com">shelljw@aol.com</a>	<ul style="list-style-type: none"> <li>• Personal Assistance I, II, Chore</li> <li>• Skilled Nursing</li> </ul>
Winners at Work, Inc.	414 Kuwili St., Suite 103 Honolulu, HI 96817 (808) 532-2100; fax (808) 532-2108 website: <a href="http://www.winnersatwork.org">http://www.winnersatwork.org</a> email: <a href="mailto:info@winnersatwork.org">info@winnersatwork.org</a>	<ul style="list-style-type: none"> <li>• Habilitation – Supported Employment</li> <li>• Personal Assistance I, Chore</li> </ul>

# Waiver Support Services Definitions<sup>14</sup>

## (State Standards)

### Personal Assistance

“The goals of Personal Assistance are to assist the PARTICIPANT to meet health and safety needs, utilize community resources, and develop natural supports, in accordance with the goal(s) identified in the Plan of Care (POC).

Personal Assistance (PA) services include assistance to gain physical access to the community and the associated costs related to the use of community resources, assistance with non-medical care, supervision, and support assistance to promote socialization. All personal assistance services shall be provided to meet the goal(s) of the service as stated in the Developmental Disabilities/Mental Retardation (DD/MR) Medicaid Waiver Program STANDARDS and shall be individually defined in the Plan of Care (POC).”

Personal Assistance services shall consist of three levels:

- Personal Assistance Chore
- Personal Assistance Level I
- Personal Assistance Level II

The Case Manager (CM) with input from the circle of supports determines Personal Assistance Chore, Level I or Level II.

### Habilitation

“The goals of Habilitation (HAB) services are to increase the PARTICIPANT’S capacity and independence to reside and/or participate in their home and community, and increase the PARTICIPANT’S capacity toward economic self-sufficiency in accordance with goal(s) identified in the Plan of Care (POC).

Habilitation (HAB) services are defined as training to support the acquisition, improvement and retention of skills and behaviors that increase the PARTICIPANT’S capacity and independence to reside and/or participate in their home and community, and increase capacity toward economic self-sufficiency.

Habilitation (HAB) services shall be goal-oriented and include specific, detailed methods and measurable objectives to accomplish goals.

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<sup>14</sup> All of the definitions in this section are taken from the State of Hawai`i Department of Health standard Medicaid Waiver provider service contract.

Habilitation (HAB) services may include the associated costs related to the use of community resources when increasing the PARTICIPANT'S capacity to participate in the community."

### **Habilitation-Supported Employment**

"The goals of Habilitation-Supported Employment services are to provide long-term ongoing support to PARTICIPANTS in competitive employment and increase PARTICIPANT independence.

Habilitation-Supported Employment services consist of paid employment for persons for whom competitive employment at or above the minimum wage is unlikely, and who because of their disabilities, need intensive ongoing support to perform in a work setting. Supported employment is conducted in integrated work sites in which persons without disabilities are employed. Supported employment includes activities needed to sustain paid work by individuals receiving waiver services, including job development, placement, supervision and training. When supported employment services are provided at a work site in which persons without disabilities are employed, payment will be made only for the adaptations, supervision and training required by individuals receiving waiver services as a result of their disabilities, and will not include payment for the supervisory activities rendered as a normal part of the business setting.

Habilitation-Supported Employment services shall be reduced as PARTICIPANT independence is increased."

### **Respite**

"The goal of respite services is to support family relationships to sustain PARTICIPANT living in the family home.

Respite services provide supervision and/or assistance for PARTICIPANTS who are unable to care for themselves because of the absence or need for relief of the persons normally providing the care. Respite services shall be furnished on a short-term basis.

Short-term basis shall be defined as 30 consecutive days. Exceptions may be made by the Department of Health (DOH) on a case-by-case basis."

### **Adult Day Health**

"The goal of Adult Day Health (ADH) services is to use the group environment to foster growth and challenge the PARTICIPANT to increase independence and become more involved in the community. Adult Day Health (ADH) services

should support individual decision-making and result in the achievement of PARTICIPANT'S person-centered goals as identified in the Plan of Care (POC).

Adult Day Health includes:

- Offering opportunities for meaningful participation in community activities;
- Developing associations with community members;
- Discovering ways for PARTICIPANTS to make contributions;
- Establishing roles of leadership and partnership within one's community.

Adult Day Health services are furnished six (6) or more hours per day on a regularly scheduled basis, for one or more days per week, in a community. Meals provided as part of these services shall not constitute a "full nutritional regimen" (3 meals per day). Recommendations of specialized therapies as indicated in the Plan of Care (POC) could be incorporated within this service. Adult Day Health (ADH) services may provide more than one-to-one direct service worker coverage. Transportation between the individual's place of residence and the Adult Day Health (ADH) settings will be provided as a component part of the Adult Day Health (ADH) services, as would transportation to community settings during Adult Day Health (ADH). Adult Day Health (ADH) services shall be provided by the appropriate level of direct support worker and shall be consistent with the service needs of the PARTICIPANT."

### **Specialized Environmental Accessibility Adaptations**

"Specialized Environmental Accessibility Adaptations refer to the physical adaptations made to the home in order to create a healthy and safe place for the individual, or to allow for more independence in the home. Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems and/or equipment and supplies. All adaptations or improvements to the home must have direct medical or corrective benefit for the individual.

Also, SEAA provides funds to purchase, rent, or lease equipment, ancillary supplies, devices, controls, or appliances that assist the individual with his or her daily activities, communication, and/or participation within the community. Additionally, this service includes training, technical support, warranties and repairs necessary to maintain the proper functioning of the equipment and supplies."

### **Skilled Nursing**

“Skilled Nursing services assure that PARTICIPANTS’ medical and health needs are met in order to live in the community. Skilled Nursing services fall within the scope of the State’s Nurse Practice Act and must be provided by a Registered Nurse (RN), or a Licensed Practical Nurse (LPN) under the supervision of a Registered Nurse (RN).”

### **Specialized Services**

“The goals of Specialized Services are to sustain community living and assure health and safety of PARTICIPANTS. Specialized services include therapeutic interventions, non-traditional approaches, training and consultation, crisis outreach, and 24-hour crisis services, that are necessary to assure health and safety of PARTICIPANTS and are not available as a Medicaid State Plan service.”

### **Transportation**

The goal of transportation is to support community living. Transportation shall assist PARTICIPANTS to gain access to waiver and community services, activities and resources identified in the PARTICIPANT’S Plan of Care (POC). This service is to be considered only when transportation is not available through the State Medicaid Plan or as a component of any other Medicaid waiver service. Whenever possible, family, neighbors, friends, or community agencies that can provide this service without charge shall be utilized.”

### **Specialized Medical Equipment and Supplies**

Specialized medical equipment and supplies include specific devices, controls or appliances identified in your individual service plan (ISP), which will help you increase your ability to perform activities of daily living. Specialized medical equipment and supplies can also be used to help you see, control or communicate with your environment.

For a copy of this contract, ask your case manager or call the Hawai`i State Council on Developmental Disabilities at (808) 586-8100.

## **Your Notes**