

**Texas Long-Term Service and Supports (LTSS) Waiver Programs
As of April 27, 2016**

	State of Texas Access Reform (STAR)+PLUS Home and Community Based Services (HCBS)	Medically Dependent Children Program (MDCP)	Community Living Assistance and Support Services (CLASS)	Deaf Blind with Multiple Disabilities (DBMD)	Home and Community-based Services (HCS)	Texas Home Living (TxHmL)
Waives off	Nursing facility (NF)	NF	Intermediate care facility for individuals with an intellectual disability or related conditions (ICF/IID)	ICF/IID	ICF/IID	ICF/IID
Year initiated	1998	1984	1991	1995	1985	2004
Ages served	Age 21 and older	Age 0 – 20	All ages	All ages	All ages	All ages
Functional eligibility	Medical necessity and level of care criteria for nursing facility admission	Medical necessity and level of care criteria for NF admission	ICF/IID Level of Care (LOC) VIII: (1) primary diagnosis by a licensed physician of a related condition; ¹ and (2) moderate to extreme deficits in adaptive behavior.	(1) Be an individual with deaf blindness or function as a person with deaf blindness; (2) Have an additional disability that impairs independent functioning; and (3) Qualify for an ICF/IID LOC VIII.	ICF/IID LOC I: (1) full scale IQ of 69 or below; or full scale IQ of 75 or below and a primary diagnosis by a licensed physician of a related condition; and (2) mild to extreme deficits in adaptive behavior -OR- ICF/IID LOC VIII: ² (1) primary diagnosis by a licensed physician of a related condition; and (2) moderate to extreme deficits in adaptive behavior.	See HCS

¹ A related condition must occur before the age of 22 and the individual must have substantial functional limitations in at least three of the six major life skill areas assessed. For more information see DADS Approved Diagnostic Codes for Persons with Related Conditions at www.dads.state.tx.us

² For HCS and TxHmL, an applicant who meets LOC VIII must be transitioning or diverting from a nursing facility.

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Financial eligibility	Monthly income within 300% of SSI monthly income limit (\$2,163)	Monthly income within 300% of SSI monthly income limit (\$2,163)	Monthly income within 300% of SSI monthly income limit (\$2,163)	Monthly income within 300% of SSI monthly income limit (\$2,163)	Monthly income within 300% of SSI monthly income limit (\$2,163)	<ul style="list-style-type: none"> • SSI (\$721 per month); • Medical Assistance Only (MAO);³ • Under 20 and the financial responsibility of Department of Family and Protective Services (DFPS) in foster home or group home with foster parent; • Medicaid for Youth Transitioning Out of Foster Care; or • Member of family receiving Temporary Assistance for Needy Families
Consideration of parental income for eligibility of a minor	No	No	No	No	No	Yes

³ MAO means an individual who qualifies financially for Medicaid but who does not receive Supplemental Security Income (SSI) payments.

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Individual annual maximum cost	202% of the institutional average Resource Utilization Group (RUG) value ³	50% of the institutional average RUG value ⁴ as of August 31, 2010 For cost limits see the Case Manager MDCP Handbook	200 percent of the institutional average	\$114,736.07	Cost limit is based on the individual's level of need (LON): - \$167,468 for LON 1 (intermittent); LON 5 (limited); and LON 8 (extensive) - \$168,615 for LON 6 (pervasive) - \$305,877 for LON 9 (pervasive plus)	\$17,000
Services available in all LTSS waivers	<ul style="list-style-type: none"> • Adaptive aids (AA) • Employment assistance (EA) • Minor home modifications (MHM) • Respite • Supported employment (SE) 					
Services available in all LTSS waivers except MDCP	<ul style="list-style-type: none"> • Dental • Nursing • Professional therapies⁵ • Unlimited prescriptions 					
Services unique to a single LTSS waiver	<ul style="list-style-type: none"> • Adult foster care • Emergency response services (ERS) • Home delivered meals 	<ul style="list-style-type: none"> • Flexible family support 	<ul style="list-style-type: none"> • Auditory integration therapy/auditory enhancement therapy • Continued family services 	<ul style="list-style-type: none"> • Chore • Intervener • Orientation/mobility • Residential services - 1 to 3 person home 	<ul style="list-style-type: none"> • Residential services <ul style="list-style-type: none"> - Supervised living - Residential support services - Host home/companion care 	<ul style="list-style-type: none"> • Community support services (CSS)⁷

³ For MDCP, Texas calculates nursing facility rates by RUG due to differences in individual acuity levels, resulting in 34 different cost limits (MDCP rates do not include add-ons related to ventilator use).

⁵ Professional therapies include occupational, physical, speech, hearing and language therapies.

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	<ul style="list-style-type: none"> Personal assistance services (PAS) including protective supervision 		<ul style="list-style-type: none"> Prevocational services Specialized therapies (therapeutic horseback riding and aquatic, hippo, massage, music, and recreational therapy) Support family services 	- 4 to 6 person home (licensed assisted living facility or ALF)	- Supported home living (SHL) ⁶	
Services offered in two or more LTSS waivers	<ul style="list-style-type: none"> Assisted living Cognitive rehabilitation therapy (CRT) Transition assistance services (TAS) 	<ul style="list-style-type: none"> TAS 	<ul style="list-style-type: none"> Behavioral support services Case management CRT Dietary services Residential habilitation⁸ TAS 	<ul style="list-style-type: none"> Assisted living Audiology Behavioral support services Case management Day habilitation Dietary services Residential habilitation⁹ TAS 	<ul style="list-style-type: none"> Audiology Behavioral support services CRT Day habilitation Dietary services TAS 	<ul style="list-style-type: none"> Audiology Behavioral support services Day habilitation Dietary services

⁷ Effective March 20, 2016, transportation is the only habilitation activity that can be billed to CSS. PAS and HAB activities are now provided through the state plan Community First Choice benefit.

⁶ Effective March 20, 2016, transportation is the only habilitation activity that can be billed to SHL. SHL PAS and HAB activities are now provided through the state plan Community First Choice benefit.

⁸ Effective March 20, 2016, transportation is the only habilitation activity that can be billed to Residential habilitation. PAS and HAB activities are now provided through the state plan Community First Choice benefit.

⁹ Effective March 20, 2016, transportation is the only habilitation activity that can be billed to Residential habilitation. PAS and HAB activities are now provided through the state plan Community First Choice benefit.

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Where LTSS waiver services may be provided	<ul style="list-style-type: none"> • Adult foster care home • ALF • Community¹⁰ • Family home • Individual's home • Integrated employment setting • Respite only: <ul style="list-style-type: none"> - Adult foster care home - ALF - Individual's home - NF 	<ul style="list-style-type: none"> • Community • Day care setting • Family or foster care home • Individual's home • Integrated employment setting • Respite only: <ul style="list-style-type: none"> - Accredited camps - Host family's residence with DFPS licensure - Individual's home - Licensed child care setting - Medicaid certified hospital - NF - Specialty care facility 	<ul style="list-style-type: none"> • Community • Day habilitation site • Family home • Individual's home • Integrated employment setting • Respite only: <ul style="list-style-type: none"> - Adult foster care home - ALF - Camp accredited by American Camp Association - Individual's home or the residence of a relative or friend - ICF/IID - NF - Residence of another person receiving a Medicaid waiver service 	<ul style="list-style-type: none"> • 1 to 3 person group home • ALF (4-6 person) • Community • Day habilitation site • Family home • Individual's home • Integrated employment setting • Respite only: <ul style="list-style-type: none"> - Group home (1 to 3 person) - ALF (4-6 person) - Camp accredited by the American Camp Association - ICF/IID - Individual's home - Private residence of respite provider 	<ul style="list-style-type: none"> • 3 or 4 person group home • Community • Day habilitation site • Family home • Host home /companion care setting • Individual's home • Integrated employment setting • Respite only: <ul style="list-style-type: none"> - Camp - Group respite facility operated by an HCS provider - Host /companion care home - Individual's home - Respite provider's home 	<ul style="list-style-type: none"> • Community • Day habilitation site • Family home • Individual's home • Integrated employment setting • Respite only: <ul style="list-style-type: none"> - Camp - Group respite facility operated by an HCS provider - HCS group home - HCS host/companion care home - Individual's home - Respite provider's home

¹⁰Includes but is not limited to settings such as a doctor/therapist's office, grocery store, and church.

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LTSS waiver program services that may be provided by relative or legal guardian¹¹	<ul style="list-style-type: none"> • AA • Assisted living • CRT • Dental • EA • ERS • Medical supplies • MHM • Nursing • Professional therapies • Respite • SE 	<ul style="list-style-type: none"> • AA • EA • Flexible family supports • MHM • Respite • SE 	<ul style="list-style-type: none"> • Prevocational services • EA • MHM • Residential habilitation • Respite • SE 	<ul style="list-style-type: none"> • AA • Chore services • Day habilitation • EA • Intervener • MHM • Nursing • Residential habilitation • Respite • SE 	<ul style="list-style-type: none"> • Day habilitation • Dental • CRT • EA • Host/companion care • MHM • Nursing • Professional therapies • Respite • SE • Supported home living 	<ul style="list-style-type: none"> • CSS • Day habilitation • Dental • Dietary • EA • MHM • Nursing • Professional therapies • Respite • SE
Case management/ service coordination	Managed care organization	DADS	Contracted case management agency	Provider agency	Local intellectual and developmental disability authority (LIDDA)	LIDDA
Services for which the CDS option is available¹²	<ul style="list-style-type: none"> • EA • CRT • Nursing • PAS • Professional therapies • Respite • SE 	<ul style="list-style-type: none"> • EA • Flexible family support services • Respite • SE 	<ul style="list-style-type: none"> • CRT • EA • Nursing • Professional therapies • Residential habilitation • Respite • SE 	<ul style="list-style-type: none"> • EA • Intervener • Residential habilitation • Respite • SE 	<ul style="list-style-type: none"> • CRT • EA • Nursing • Respite • SE • Supported home living 	All services

¹¹ Relative means a person who is related by blood or marriage; additional restrictions may apply regarding the provider of services (e.g., in TxHmL CSS and respite cannot be provided by a relative or guardian who lives with the individual); spouses and parents of minor children are considered to have a legal responsibility to provide care and are not eligible for reimbursement as a service provider in any of the programs listed above.

¹²The CDS option is available to persons living in their own or family home only.

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Supports available only to CDS participants	<ul style="list-style-type: none"> Financial management services (required for persons using CDS) Support consultation (optional for persons using CDS, excluding MDCP which does not have support consultation) 					
Non-waiver services provided by individual's LTSS waiver program provider	<ul style="list-style-type: none"> CFC ERS¹³ CFC HAB CFC PAS CFC support management Day Activity and Health Services 	N/A	<ul style="list-style-type: none"> CFC ERS CFC PAS/HAB CFC support management 			
Licensure/certification by DADS	Licensed for services provided: <ul style="list-style-type: none"> ALF Home and community support services agency (HCSSA) 	Licensed as a HCSSA	Licensed as a HCSSA (direct services agency only)	Licensed for services provided: <ul style="list-style-type: none"> ALF HCSSA 	Certified	Certified
Additional Resources	<ul style="list-style-type: none"> Acute Care Services Community First Choice (CFC) Provider Resources Compare Long-term Services and Supports (LTSS) Programs Mutually Exclusive Services Waiver Program Interest Lists 					

¹³ An individual who is MAO is not eligible to receive CFC ERS or CFC PAS but may receive HCBS ERS or HCBS PAS.

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Star Plus HCBS Waiver Program Service Definitions	
Adaptive aids and medical supplies	Adaptive aids and medical supplies are specialized medical equipment and supplies which include devices, controls, or appliances that enable members to increase their abilities to perform activities of daily living, or to perceive, control, or communicate with the environment in which they live. This service also includes items necessary for life support, ancillary supplies, and equipment necessary to the proper functioning of such items, and durable and non-durable medical equipment not available under the Texas State Plan, such as: vehicle modifications, service animals and supplies, environmental adaptations, aids for daily living, reachers, adapted utensils, and certain types of lifts. The annual cost limit of this service is \$10,000 per waiver plan year. The \$10,000 cost limit may be waived by the HHSC upon request of the managed care organization. The State allows a member to select a relative or legal guardian, other than a legally responsible individual, to be his/her provider for this service if the relative or legal guardian meets the requirements for this type of service.
Adult foster care (AFC)	AFC services are personal care services, homemaker, chore, and companion services, and medication oversight provided in a licensed (where applicable) private home by an adult foster care provider who lives in the home. AFC services are furnished to adults who receive the services in conjunction with residing in the home. The total number of individuals (including persons served in the waiver) living in the home cannot exceed three without appropriate licensure. Separate payment will not be made for personal assistance services furnished to a member receiving AFC services, since these services are integral to and inherent in the provision of adult foster care services. Payments for AFC services are not made for room and board, items of comfort or convenience, or the costs of facility maintenance, upkeep, and improvement. The State allows a member to select a relative or legal guardian, other than a spouse, to be the provider of AL if the relative or legal guardian meets the provider requirements.
Assisted living (AL)	AL services are personal care, homemaker, and chore services; medication oversight; and therapeutic, social and recreational programming provided in a homelike environment in a licensed community facility in conjunction with residing in the facility. AL services include 24-hour on-site response staff to meet scheduled or unpredictable needs in a way that promotes maximum dignity and independence, and to provide supervision, safety, and security. Other individuals or agencies may also furnish care directly, or under arrangement with the community facility, but the services provided by these other entities supplement that provided by the community facility and do not supplant them. An individual has a right to privacy. Living units may be locked at the discretion of an individual, except when a physician or mental health professional has certified in writing that the individual is sufficiently cognitively impaired as to be a danger to self or others if given the opportunity to lock the door. The facility must have a central dining room, living room or parlor, and common activity centers which may also serve as living rooms or dining rooms. The individual retains the right to assume risk, tempered only by the individual's ability to assume responsibility for that risk. The State allows an individual to select a relative or legal guardian, other than a spouse, to be the provider for this service if the relative or legal guardian meets the requirements to provide AL. Nursing and skilled therapy services (except periodic nursing evaluations if specified above) are incidental, rather than integral to the provision of AL services. Payment will not be made for 24-hour skilled care or supervision. Federal financial participation is not available in the cost of room and board furnished in conjunction with residing in an assisted living facility.

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Star Plus HCBS Waiver Program Service Definitions	
Cognitive rehabilitation therapy (CRT)	<p>CRT is a service that assists an individual in learning or relearning cognitive skills that have been lost or altered as a result of damage to brain cells/chemistry in order to enable the individual to compensate for the lost cognitive functions. CRT is provided when determined to be medically necessary through an assessment conducted by an appropriate professional. CRT is provided in accordance with the plan of care developed by the assessor, and includes reinforcing, strengthening, or reestablishing previously learned patterns of behavior, or establishing new patterns of cognitive activity or compensatory mechanisms for impaired neurological systems. Qualified providers: psychologists licensed under Texas Occupations Code Chapter 50, speech and language pathologists licensed under Title 3 of the Texas Occupations Code, Subtitle G, Chapter 401, and occupational therapists licensed under Title 3 of the Texas Occupations Code, Subtitle H, Chapter 454.</p>
Dental services	<p>Dental services which exceed the dental benefit under the State Plan are provided under this waiver when no other financial resource for such services is available or when other available resources have been used. Dental services are those services provided by a dentist to preserve teeth and meet the medical need of the member. Allowable services include:</p> <ul style="list-style-type: none"> • Emergency dental treatment procedures that are necessary to control bleeding, relieve pain, and eliminate acute infection; • Operative procedures that are required to prevent the imminent loss of teeth; • Routine dental procedures necessary to maintain good oral health; • Treatment of injuries to the teeth or supporting structures; and • Dentures and cost of fitting and preparation for dentures, including extractions, molds, etc. <p>The State allows a member to select a relative or legal guardian, other than a spouse, to be his/her provider for this service if the relative or legal guardian meets the requirements to provide this service. Payments for dental services are not made for cosmetic dentistry. The annual cost cap of this service is \$5,000 per waiver plan year. The \$5,000 cap may be waived by the managed care organization upon request of the member only when the services of an oral surgeon are required. Exceptions to the \$5,000 cap may be made up to an additional \$5,000 per waiver plan year when the services of an oral surgeon are required.</p>
Emergency response services (ERS)	<p>ERS provide members with an electronic device that enables certain members at high risk of institutionalization to secure help in an emergency. The member may also wear a portable “help” button to allow for mobility. The system is connected to the person’s phone and programmed to signal a response center once a “help” button is activated. Trained professionals staff the response center. ERS are limited to those members who live alone, who are alone for significant parts of the day, or who have no regular caregiver for extended periods of time, and who would otherwise require extensive routine supervision. The State allows a member to select a relative or legal guardian, other than a spouse, to be his/her provider for this service if the relative or legal guardian meets the requirements to provide this service.</p>
Employment assistance (EA)	<p>Assistance provided to an individual to help the individual locate paid employment in the community. EA includes: identifying an individual's employment preferences, job skills, and requirements for a work setting and work conditions; locating prospective employers offering employment compatible with an individual's identified preferences, skills, and requirements; and contacting a</p>

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	<p>prospective employer on behalf of an individual and negotiating the individual's employment. In the State of Texas, this service is not available to individuals receiving waiver services under a program funded under section 110 of the Rehabilitation Act of 1973. Documentation is maintained in the individual's record that the service is not available to the individual under a program funded under the Individuals with Disabilities Education Act (20 U.S.C. §1401 et seq.). An EA service provider must satisfy one of these options:</p> <p>Option 1: a bachelor's degree in rehabilitation, business, marketing, or a related human services field; and six months of documented experience providing services to people with disabilities in a professional or personal setting.</p> <p>Option 2: an associate's degree in rehabilitation, business, marketing, or a related human services field; and one years of documented experience providing services to people with disabilities in a professional or personal setting.</p> <p>Option 3: a high school diploma or GED, and two years of documented experience providing services to people with disabilities in a professional or personal setting.</p>
Financial management services (FMS)	<p>FMS provides assistance to members with managing funds associated with the services elected for self-direction. The service includes initial orientation and ongoing training related to responsibilities of being an employer and adhering to legal requirements for employers. The FMS provider, referred to as the Consumer Directed Services Agency, also:</p> <ul style="list-style-type: none"> • Serves as the member's employer-agent; • Provides assistance in the development, monitoring, and revision of the member's budget; • Provides information about recruiting, hiring, and firing staff, including identifying the need for special skills and determining staff duties and schedule; • Provides guidance on supervision and evaluation of staff performance; • Provides assistance in determining staff wages and benefits; • Provides assistance in hiring by verifying employee's citizenship status and qualifications, and conducting required criminal background checks in the Nurse Aide Registry and Employee Misconduct Registry; • Verifies and maintains documentation of employee qualifications, including citizenship status, and documentation of services delivered; • Collects timesheets, processes timesheets of employees, processes payroll and payables, and makes withholdings for, and payment of, applicable federal, state, and local employment-related taxes; • Tracks disbursement of funds and provides quarterly written reports to the member of all expenditures and the status of the member's Consumer Directed Services budget; and • Maintains a separate account for each member's budget. <p>The State allows a relative or legal guardian, other than a legally responsible member, to be the member's provider for this service if the relative or legal guardian meets the requirements for this type of provider.</p>

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Home delivered meals (HDM)	HDM services provide a nutritionally sound meal to members. The meal provides a minimum of one-third of the current recommended dietary allowance for the member as adopted by the United States Department of Agriculture.
Minor home modifications (MHM)	MHM are those physical adaptations to a member's home, required by the service plan, that are necessary to ensure the member's health, welfare, and safety, or that enable the member to function with greater 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 that are necessary to accommodate the medical equipment and supplies necessary for the member's welfare. Excluded are those adaptations or improvements to the home that are of general utility, and are not of direct medical or remedial benefit to the member, such as carpeting, roof repair, central air conditioning, etc. Adaptations that add to the total square footage of the home are excluded from this benefit. All services are provided in accordance with applicable state or local building codes. Modifications are not made to settings that are leased, owned, or controlled by waiver providers. The State allows a member to select a relative or legal guardian, other than a spouse, to be the member's provider for this service if the relative or legal guardian meets the requirements to provide this service. There is a lifetime limit of \$7,500 per member for this service and \$300 yearly for repairs. To request approval to exceed the service cost cap for minor home modifications, the managed care organization must send a written request to HHSC along with appropriate documentation which must include the cost estimate and an assurance that the plan of care is within the member's overall cost ceiling and adequate to meet the needs of the member. Once the \$7,500 cap or a higher amount approved by HHSC is reached, only \$300 per year per member, excluding the fees, will be allowed for repairs, replacement, or additional modifications. The home and community support services provider is responsible for obtaining cost-effective modifications authorized on the member's ISP by the managed care organization.
Nursing	Nursing services are those services that are within the scope of the Texas Nurse Practice Act and are provided by a registered nurse (or licensed vocational nurse under the supervision of a registered nurse), licensed to practice in the state. In the State Plan, nursing services are provided only for acute conditions or exacerbations of chronic conditions lasting less than 60 days. Nursing services provided in the waiver cover ongoing chronic conditions such as medication administration and supervising delegated tasks. This broadens the scope of these services beyond extended State Plan services.
Occupational therapy (OT)	OT consists of interventions and procedures to promote or enhance safety and performance in activities of daily living, instrumental activities of daily living, education, work, play, leisure, and social participation. OT services consist of the full range of activities provided by a licensed occupational therapist, or a licensed occupational therapy assistant under the direction of a licensed occupational therapist, acting within the scope of his/her state licensure. Texas assures that OT is cost-effective and necessary to avoid institutionalization. The State allows a member to select a relative or legal guardian, other than a spouse, to be the member's provider for this service if the relative or legal guardian meets the requirements to provide this service.

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Personal assistance services (PAS)	<p>PAS provides assistance to members in performing the activities of daily living based on their service plan. PAS services include assistance with the performance of the activities of daily living and household chores necessary to maintain the home in a clean, sanitary, and safe environment. PAS also includes the following services: protective supervision provided solely to ensure the health and safety of a member with cognitive/memory impairment and/or physical weakness; tasks delegated by a registered nurse under the rules of the Texas Board of Nursing; escort services consist of accompanying, but not transporting, and assisting a member to access services or activities in the community; and extension of therapy services. The attendant may perform certain tasks if delegated and supervised by a registered nurse in accordance with Board of Nursing rules found in 22 Texas Administrative Code, Part 11, Chapter 224. The home and community support services agency registered nurse is responsible for delegating any task to the attendant, and the home and community support services agency must maintain a copy of the delegation requirements in the member’s case record. Health Maintenance Activities are limited to tasks that enable a member to remain in an independent living environment and go beyond activities of daily living because of the higher skill level required. A registered nurse may determine that performance of a health maintenance activity for a particular member does not constitute the practice of professional nursing. An unlicensed person may perform health maintenance activities without delegation. (See Board of Nursing rules at 22 Texas Administrative Code, Part 11, Chapter 225.) Licensed therapists may choose to instruct the attendants in the proper way to assist the member in follow-up on therapy sessions. This assistance and support provides reinforcement of instruction and aids in the rehabilitative process. In addition, a registered nurse may instruct an attendant to perform basic interventions with members that would increase and optimize functional abilities for maximum independence in performing activities of daily living such as range of motion exercises. The following contingencies apply to providers: Texas does not allow service breaks of personal assistance services for health and safety reasons; therefore, providers are required to have back-up attendants if the regular attendant is not available. The provider nurse may provide personal assistance services if the regular and back-up attendants are not available and nurse delegation is authorized. The State allows, but does not require, a member to select a relative or legal guardian, other than a spouse, to be the member’s provider for this service if the relative or legal guardian meets the requirements to provide this service. PAS will not be provided to members residing in adult foster care homes, assisted living facilities, or during the same designated hours or time period a member receives respite care.</p>
Physical therapy (PT)	<p>PT is defined as specialized techniques for evaluation and treatment related to functions of the neuro-musculo-skeletal systems provided by a licensed physical therapist (LPT) or by a licensed physical therapy assistant directly supervised by a LPT. PT is the evaluation, examination, and utilization of exercises, rehabilitative procedures, massage, manipulations, and physical agents (such as mechanical devices, heat, cold, air, light, water, electricity, and sound) in the aid of diagnosis or treatment. PT consists of the full range of activities provided by a LPT, or a licensed physical therapy assistant under the direction of a LPT, acting within the scope of state licensure. PT services are available through this waiver program only after benefits available through Medicare, Medicaid, or other third party resources have been exhausted. The State allows a member to select a relative or legal guardian, other than a spouse, to be the member’s provider for this service if the relative or legal guardian meets the requirements to provide this service.</p>

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Respite	Respite care services are provided to individuals unable to care for themselves, and are furnished on a short-term basis because of the absence of or need for relief for those persons normally providing unpaid services. Respite care may be provided in the following locations: member’s home or place of residence; adult foster care home; Medicaid certified NF; and an assisted living facility. Respite care services are authorized by a member’s PCP as part of the member’s care plan. Respite services may be self-directed. Limited to 30 days per year. There is a process to grant exceptions to the annual limit. The managed care organization reviews all requests for exceptions, and consults with the service coordinator, providers, and other resources as appropriate, to make a professional judgment to approve or deny the request on a case-by-case basis. Members residing in adult foster care homes and assisted living facilities are not eligible to receive respite services. Other waiver services, such as Personal Assistance Services, may be provided on the same day as respite services, but the two services cannot be provided at the exact same time.
Speech, hearing, and language therapy	Speech therapy is defined as evaluation and treatment of impairments, disorders, or deficiencies related to an individual's speech and language. The scope of Speech, Hearing, and Language therapy services offered to HCBS participants exceeds the State Plan as the service in this context is available to adults. Speech, hearing, and language therapy services are available through the waiver program only after benefits available through Medicare, Medicaid, or other third party resources have been exhausted. The State allows a member to select a relative or legal guardian, other than a spouse, to be the member’s provider for this service if the relative or legal guardian meets the requirements to provide this service.
Support consultation (SC)	SC is an optional service component that offers practical skills training and assistance to enable a member or his legally authorized representative (LAR) to successfully direct those services the member or the legally authorized representative chooses for consumer-direction. This service is provided by a certified support advisor (SA) and includes skills training related to recruiting, screening, and hiring workers, preparing job descriptions, verifying employment eligibility and qualifications, completion of documents required to employ an individual, managing workers, and development of effective back-up plans for services considered critical to the member's health and welfare in the absence of the regular provider or an emergency situation. Skill training involves such activities as training and coaching the employer regarding how to write an advertisement, how to interview potential job candidates, and role-play in preparation for interviewing potential employees. In addition, the support advisor assists the member or LAR to determine staff duties, to orient and instruct staff in duties and to schedule staff. The SA also assists the member or LAR with activities related to the supervision of staff, the evaluation of the job performance of staff, and the discharge of staff when necessary. This service provides sufficient information and assistance to ensure that members and their representatives understand the responsibilities involved with consumer direction. SC does not address budget, tax, or workforce policy issues. The State defines SC activities as the types of support provided beyond that provided by the financial management services provider. The scope and duration of SC will vary depending on a member’s need. SC may be provided by a certified SA associated with a consumer directed services agency selected by the member or by an independent certified SA hired by the member. SC has a specific reimbursement rate and is a component of the member's service budget. In conjunction with the service planning team, the member or LAR determines the level of SC necessary for inclusion in each member's service plan.

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Star Plus HCBS Waiver Program Service Definitions	
Supported employment (SE)	<p>Assistance provided, in order to sustain competitive employment, to an individual who, because of a disability, requires intensive, ongoing support to be self-employed, work from home, or perform in a work setting at which individuals without disabilities are employed. SE includes adaptations, supervision, training related to an individual's assessed needs, and earning at least minimum wage (if not self-employed). In the State of Texas, this service is not available to individuals receiving waiver services under a program funded under section 110 of the Rehabilitation Act of 1973. Documentation is maintained in the individual's record that the service is not available to the individual under a program funded under the Individuals with Disabilities Education Act (20 U.S.C. §1401 et seq.). A supported employment service provider must satisfy one of these options:</p> <p>Option 1: a bachelor's degree in rehabilitation, business, marketing, or a related human services field; and six months of documented experience providing services to people with disabilities in a professional or personal setting.</p> <p>Option 2: an associate's degree in rehabilitation, business, marketing, or a related human services field; and one year of documented experience providing services to people with disabilities in a professional or personal setting.</p> <p>Option 3: a high school diploma or GED, and two years of documented experience providing services to people with disabilities in a professional or personal setting.</p>
Transition assistance services (TAS)	<p>TAS pays for non-recurring, set-up expenses for members transitioning from nursing homes to the STAR+PLUS HCBS program. Allowable expenses are those necessary to enable members to establish basic households and may include: security deposits for leases on apartments or homes; essential household furnishings and moving expenses required to occupy and use a community domicile, including furniture, window coverings, food preparation items, and bed and bath linens; set-up fees or deposits for utility or service access, including telephone, electricity, gas, and water; services necessary for the member's health and safety, such as pest eradication and one-time cleaning prior to occupancy; and activities to assess need, arrange for, and procure needed resources (limited to up to 180 consecutive days prior to discharge from the nursing facility). Services do not include room and board, monthly rental or mortgage expenses, food, regular utility charges, or household appliances or items that are intended for purely recreational purposes. There is a \$2,500 limit per member.</p>

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Medically Dependent Children Program Service Definitions	
Adaptive aids (AA)	AA are devices necessary to treat, rehabilitate, prevent or compensate for conditions resulting in disability or loss of function. AA enable people to perform the activities of daily living or control the environment in which they live.
Employment assistance (EA)	EA means assistance provided to an individual to help the individual locate paid employment in the community. EA includes: identifying an individual's employment preferences, job skills, and requirements for a work setting and work conditions; locating prospective employers offering employment compatible with an individual's identified preferences, skills, and requirements; and contacting a prospective employer on behalf of an individual and negotiating the individual's employment.
Financial management services (FMS)	FMS provide assistance to individuals with managing funds associated with the services elected for self-direction. The service includes initial orientation and ongoing training related to responsibilities of being an employer and adhering to legal requirements for employers.
Flexible family support services (FFSS)	FFSS promote community inclusion in typical child/youth activities through the enhancement of natural supports and systems and through recognition that these supports may vary from setting to setting, from day to day, from moment to moment, hence the need for a diverse provider base. To accomplish this, FFSS providers may provide personal care supports for activities of daily livings and instrumental activities of daily living, skilled care, non-skilled care and delegated skilled care supports to support inclusion. This service may be reimbursed if part of an approved service plan and if delivered in a setting where provision of such supports is not already required or included as a matter of practice.
Minor home modification (MHM)	MHM are necessary to ensure the health, welfare, and safety of the individual, or to enable the individual to function with greater independence in his or her home.
Respite	Respite provides temporary relief from care giving to the primary caregiver of an individual during times when the primary caregiver would normally provide care. All respite settings must be located in Texas.
Supported employment (SE)	SE means assistance provided, in order to sustain competitive employment, to an individual who, because of a disability, requires intensive, ongoing support to be self-employed, work from home, or performs in a work setting at which individuals without disabilities are employed. SE includes employment adaptations, supervision, and training related to an individual's assessed needs. Individuals receiving supported employment earn at least minimum wage (if not self-employed).
Transition assistance services (TAS)	TAS pays for non-recurring, set-up expenses for individuals transitioning from a nursing facility to the community.

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Community Living Assistance and Support Services Waiver Program Service Definitions

Adaptive aids (AA)	<p>Adaptive aids are items or services that enable individuals to retain or increase their abilities to perform activities of daily living or to perceive, control, or communicate with the environment in which they live, and are included in the list of adaptive aids in the CLASS Provider Manual or are repair and maintenance of an adaptive aid on such list that is not covered by warranty.</p> <p>Adaptive aids include items that assist an individual with mobility and communication and ancillary supplies and equipment necessary to the proper functioning of such items. Also included are medically necessary supplies and items needed for life support. All items must meet applicable standards of manufacture, design, and installation. Items reimbursed with waiver funds must be in addition to any medical equipment and supplies furnished under the Medicaid State Plan.</p> <p>An adaptive aid is provided for a specific individual and becomes the exclusive property of that individual.</p> <p>Excluded are those items and supplies, which are not of direct medical or remedial benefit to the individual, and items and supplies that are available to the individual through the Medicaid State Plan, through other governmental programs, or through private insurance.</p> <p>This service provides devices, controls, or appliances that are necessary to address specific needs identified by the individual's service plan.</p> <p>Adaptive aids are limited to the following categories including repair and maintenance not covered by warranty:</p> <ol style="list-style-type: none"> 1. Lifts; 2. Mobility Aids (including batteries and chargers) 3. Position Devices 4. Communication aids 5. Computers and Appropriate Accessories for communication needs not met by an augmentative communication device, to operate adaptive software, for assistance with money management or for environmental control purposes 6. Environmental controls 7. Adaptive equipment for activities of daily living 8. Medically necessary supplies 9. Specialized Training and Instructions 10. Modification/Additions to Primary Transportation Vehicles 11. Temporary lease/rental of durable medical equipment to allow for repair, purchase, or replacement of an essential support system or while non-CLASS resources reviews the necessity of an adaptive aid for an individual. Lease/rental shall not exceed 90 days.
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Auditory integration/auditory enhancement training	Auditory integration training/auditory enhancement training means specialized training that assists an individual to cope with hearing dysfunction or over-sensitivity to certain frequency ranges of sound by facilitating auditory processing skills and exercising the middle ear and auditory nervous system.
Behavioral support	<p>Behavioral support services provide specialized interventions that assist an individual in increasing adaptive behaviors and replacing or modifying challenging or socially unacceptable behaviors that prevent or interfere with the individual's inclusion in the community and which consist of the following activities:</p> <ol style="list-style-type: none"> (1) Conducting a functional behavior assessment; (2) Developing an individualized behavior support plan; (3) Training of and consultation with an individual, family member, or other persons involved in the individual's care regarding the implementation of the behavior support plan; (4) Monitoring and evaluation of the effectiveness of the behavior support plan; (5) Modifying, as necessary, the behavior support plan based on monitoring and evaluation of the plan's effectiveness; and (6) Counseling with and educating an individual, family members, friends, or other persons involved in the individual's care about the techniques to use in assisting the individual to control maladaptive or Socially unacceptable behaviors. <p>Behavioral support services can include the full range of psychological activities within the scope of state licensure for psychologists and other licensed professionals in addition to specific behavioral support services. The scope of behavioral support services offered in this waiver exceeds the State Plan psychological services benefit and may be provided by a certified behavior analyst. Under the waiver, behavioral support services will be provided to maintain the individual's optimum condition.</p>
Case management	<p>Case management means a service that assists an individual in the following:</p> <ul style="list-style-type: none"> - assessing the individual's needs; - enrolling the individual into the CLASS Program; - developing the individual's service plan; - coordinating the provision of CLASS services; - monitoring the effectiveness of the CLASS services and the individual's progress toward achieving the outcomes identified; - revising the individual's service plan, as appropriate; - accessing non-waiver services, including Medicaid State Plan services; - resolving crisis situations in the individual's life; and - advocating for the individual. <p>Case managers initiate and oversee the process of assessment and reassessment of the individual's level of care and the review of service plans at enrollment, annually, and as needed. They lead the service planning team in development of a service plan that</p>

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	<p>optimizes the opportunities for the individual to use their abilities and to integrate in community settings. They communicate with service planning team members to ensure that the service plan is being carried out appropriately. They monitor the success of the service plan by observing the individual at home and in the community. Case managers are responsible for ongoing monitoring of the provision of services included in the service plan. Case managers advocate for an individual's needs when necessary and appropriate. Case management is required for enrollment and annual service planning.</p>
Cognitive rehabilitation therapy (CRT)	<p>Cognitive rehabilitation therapy is a service that assists an individual in learning or relearning cognitive skills that have been lost or altered as a result of damage to brain cells/chemistry in order to enable the individual to compensate for the lost cognitive functions.</p> <p>Cognitive rehabilitation therapy is provided when determined to be medically necessary through an assessment conducted by an appropriate professional. Cognitive rehabilitation therapy is provided in accordance with the plan of care developed by the assessor, and includes reinforcing, strengthening, or reestablishing previously learned patterns of behavior, or establishing new patterns of cognitive activity or compensatory mechanisms for impaired neurological systems.</p>
Continued family services (CFS)	<p>Continued family services are services provided to an individual 18 years of age or older who resides with a support family, as described in Title 40 of the Texas Administrative Code, Part 1, Chapter 45, Subchapter E, Division 3, Section 531 (relating to Support Family Requirements), that allow the individual to reside successfully in a community setting by training the individual to acquire, retain, and improve self-help, socialization, and daily living skills or assisting the individual with activities of daily living. The individual must be receiving support family services immediately before receiving continued family services. Continued family services consist of services described in Title 40 of the Texas Administrative Code, Part 1, Chapter 45, Subchapter E, Division 3, Section 533 (relating to Support Family Duties).</p> <p>Continued family services are available to allow the individual to attend high school, a program leading to a high school diploma, a Certificate of High School Equivalency (GED credentials), or transition to independence, including attending college or vocational or technical training.</p> <p>Continued family services consist of the same services that a support family must provide, that are applicable to an individual 18 years of age or older, and are as follows:</p> <ol style="list-style-type: none"> (1) direct personal assistance activities of daily living (such as grooming, eating, bathing, dressing, and personal hygiene); (2) assistance with meal planning and preparation; (3) assistance with housekeeping; (4) assistance with communication and mobility; (5) reinforcement of behavioral, educational, and therapeutic activities; (6) assistance with medications and the performance of tasks delegated by a registered nurse; (7) supervision for the individual's safety and security; (8) transportation related to routine family activities; (9) assistance with participation in community activities; and

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	<p>(10) habilitation. The support family must:</p> <ul style="list-style-type: none"> (1) allow the individual's family members and friends access to the individual without arbitrary restrictions, unless exceptional conditions are justified by the service planning team, documented in the individual service plan, and approved by DADS; (2) assist a school-age individual in receiving educational services in a six-hour-per-day program five days a week provided by the local school district; (3) ensure that no individual receives educational services at a state school/state center educational setting, unless contraindications are documented with justification by the service planning team; (4) ensure that a preschool-age individual receives an early childhood education with appropriate activities and services, including small group and individual play with peers without disabilities, unless contraindications are documented with justification; (5) provide individuals with age-appropriate activities that enhance self-esteem and maximize functional level; and (6) ensure the individual receives medical care prescribed by a physician, including: <ul style="list-style-type: none"> (A) doctors' appointments; (B) medications; (C) evaluations, therapies, and treatment; and (D) lab work and other medical tests. <p>The support family must not provide services to more than three unrelated children at any one time in their home. The support family must ensure that the child participates in age-appropriate community activities and the support family home environment is healthy and safe for the child.</p> <p>The support family must provide service in a residence that the support family owns or leases. The residence must be a typical residence in the neighborhood and meet the needs of the child and the child's parents or legally authorized representative.</p>
Dental treatment	<p>Dental treatment means a service that consists of the following:</p> <ul style="list-style-type: none"> - Emergency dental treatment: procedures necessary to control bleeding, relieve pain, and eliminate acute infection; operative procedures that are required to prevent the imminent loss of teeth; and treatment of injuries to the teeth or supporting structures; - Routine preventive dental treatment: examinations, X-rays, cleanings, sealants, oral prophylaxes, and topical fluoride applications; - Therapeutic dental treatment: treatment that includes fillings, scaling, extractions, crowns, pulp therapy for permanent and primary teeth; restoration of carious permanent and primary teeth; maintenance of space; and limited provision of removable prostheses when masticatory function is impaired, when an existing prosthesis is unserviceable, or when aesthetic considerations interfere with employment or social development; - Orthodontic dental treatment: procedures that include treatment of retained deciduous teeth; cross-bite therapy; facial accidents involving severe traumatic deviations; cleft palates with gross malocclusion that will benefit from early treatment; and severe, handicapping malocclusions affecting permanent dentition with a minimum score of 26 as measured on the Handicapping Labio-lingual Deviation Index; and

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	-Dental sedation: sedation necessary to perform dental treatment including non-routine anesthesia, (for example, intravenous sedation, general anesthesia, or sedative therapy prior to routine procedures) but not including administration of routine local anesthesia only.
Dietary	Dietary services is the provision of nutrition services as defined in Title 3 of the Texas Occupations Code, Chapter 701 and includes: <ul style="list-style-type: none"> - assessing the nutritional needs of an individual or group and determining constraints and resources in the practice; - establishing priorities and goals that meet nutritional needs and are consistent with constraints and available resources; - providing nutrition counseling in health and disease; - developing, implementing, and managing nutritional care systems; and - evaluating, changing, and maintaining appropriate quality standards in food and nutritional care services.
Employment assistance (EA)	Employment assistance means assistance provided to an individual to help the individual locate paid employment in the community. Employment assistance includes: <ul style="list-style-type: none"> - identifying an individual's employment preferences, job skills, and requirements for a work setting and work conditions; - locating prospective employers offering employment compatible with an individual's identified preferences, skills, and requirements; and - contacting a prospective employer on behalf of an individual and negotiating the individual's employment.
Financial management services (FMS)	Financial management services are services provided by a financial management services agency to an employer, under the consumer directed services option to assist to individual/employers with managing funds associated with consumer directed services. The service includes initial orientation and ongoing training . The financial management services provider, referred to as the financial management services agency also provides assistance in the development, monitoring and revision of the individual's budget for each service delivered through the consumer directed services option and must maintain a separate account for each individual's budget. The financial management services agency provides assistance in determining staff wages and benefits subject to state limits, assistance in hiring by verifying employee's citizenship status and qualifications, and conducting required background checks. The financial management services agency verifies and maintains documentation of employee qualifications, including citizenship status, and documentation of services delivered. The financial management services agency also collects timesheets, processes timesheets of employees, processes payroll, withholding, filing and payment of applicable federal, state, and local employment-related taxes and insurance. The financial management services agency makes payments directly to the consumer directed services employee. The financial management services agency tracks disbursement of funds and provides periodic reports to the individual of all expenditures and the status of the individual's consumer directed services budget. The financial management services agency must not provide other waiver services to the individual other than support consultation. The financial management services agency must not provide case management to the individual.

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Minor home modification (MHM)	<p>A minor home modification is a physical adaptation to an individual's residence that is necessary to address the individual's specific needs and that enables the individual to function with greater independence in the individual's residence or to control his or her environment.</p> <p>Minor home modifications consist of the following categories and include the installation, maintenance, and repair not covered by warranty:</p> <ul style="list-style-type: none"> (1) Home Modifications; (2) Specialized Accessibility/Safety Adaptations/Additions (including repair and maintenance); and (3) Repair and maintenance of items on the authorized list in the CLASS Provider Manual as allowable by rule. <p>Except as provided by Title 40 of the Texas Administrative Code, Part 1, Chapter 45, Subchapter F, Division 2, §45.618(c) of this chapter (relating to Repair or Replacement of Minor Home Modification), minor home modifications include the repair and maintenance of a minor home modification purchased through the CLASS Program that is needed after one year has elapsed from the date the minor home modification is complete and that is not covered by a warranty.</p> <p>Minor home modifications will be limited to those services identified by the service planning team, and approved by staff from DADS on the service plan as necessary to prevent institutionalization. The home modifications listed are essential to provide safe access to and within the home while facilitating self-reliance and independence. Home modifications are cost-effective since greater individual access and greater overall independence allow the individual to perform more activities of daily living with less assistance. This decreases reliance on paid staff.</p> <p>Home modifications will be provided to meet the needs of the individual, which have been identified and approved in the individual's service plan, as necessary to prevent institutionalization.</p> <p>Direct services agencies are required to obtain specifications and bids from qualified contractors for modifications that are estimated to cost more than \$1000. Direct services agency providers are also required to inspect all completed modifications for workmanship and compliance with the written specifications. All services shall be provided in accordance with applicable state and local building codes.</p>
Nursing	<p>The nursing service provides treatment and monitoring of medical conditions prescribed by a physician/medical practitioner and/or required by standards of professional practice or state law to be performed by licensed nursing personnel.</p> <p>Nursing services include: licensed vocational nursing, registered nursing, specialized licensed vocational nursing, and specialized registered nursing.</p> <p>Nursing services are those services listed in the plan of care that are within the scope of the Texas Nurse Practice Act and are provided by a registered nurse, or licensed vocational nurse under the supervision of a registered nurse, licensed to practice in the State.</p>

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Occupational therapy (OT)	<p>The practice of occupational therapy means:</p> <ul style="list-style-type: none"> - The evaluation or treatment of a person whose ability to perform the tasks of living is threatened or impaired by developmental deficits, the aging process, environmental deprivation, sensory impairment, physical injury or illness, or psychological or social dysfunction; - The use of therapeutic goal-directed activities to: (1) evaluate, prevent, or correct physical or emotional dysfunction; or (2) maximize function in a person's life; or - The application of therapeutic goal-directed activities in treating patients on an individual basis, in groups, or through social systems, by means of direct or monitored treatment or consultation. <p>Occupational therapy services include: screening and assessment; development of therapeutic treatment plans; providing direct therapeutic intervention; recommending adaptive aids; training and assisting with adaptive aids and augmentative communication devices; consulting with other providers and family members; and participating on the service planning team, when appropriate. The practice of occupational therapy does not include diagnosis or psychological services of the type typically performed by a licensed psychologist.</p> <p>The scope of occupational therapy services offered in this waiver exceeds the Medicaid State Plan occupational therapy benefit. Through the waiver, occupational therapy services are provided to maintain the individual's optimum condition.</p>
Physical therapy (PT)	<p>Physical therapy means a form of health care that prevents, identifies, corrects, or alleviates acute prolonged movement dysfunction or pain of anatomic or physiologic origin.</p> <p>Physical therapy includes the evaluation, examination, and utilization of exercises, rehabilitative procedures, massage, manipulations, and physical agents. Physical agents include mechanical devices, heat, cold, air, light, water, electricity, and sound used in the aid of diagnosis or treatment.</p> <p>Physical therapy services include: screening and assessment; developing therapeutic treatment plans; providing direct therapeutic intervention; recommending adaptive aids; training and assisting with adaptive aids; consulting with other providers and family members; and participating on the service planning team, when appropriate.</p> <p>The scope of physical therapy services offered in this waiver exceeds the state plan physical therapy benefit. State Plan physical therapy services are provided only to treat for acute conditions or to treat exacerbation of chronic condition lasting less than 180 days. Services provided through the waiver cover ongoing chronic conditions even after rehabilitation has reached a plateau (e.g. range of motion). Through the waiver, physical therapy services will be provided to maintain the individual's optimum condition.</p>
Prescribed drugs	<p>Provides unlimited prescribed medications beyond the three per month limit available under the Texas Medicaid State Plan to individuals enrolled in the waiver, unless the individual is eligible for both Medicaid and Medicare (dually eligible).</p>

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Prevocational services	<p>Prevocational services means services that are not job-task oriented and are provided to an individual who the service planning team does not expect to be employed (without receiving supported employment) within one year after prevocational services are to begin, to prepare the individual for employment. Prevocational services consist of:</p> <ul style="list-style-type: none"> (A) assessment of vocational skills an individual needs to develop or improve upon; (B) individual and group instruction regarding barriers to employment; (C) training in skills: <ul style="list-style-type: none"> (i) that are not job-task oriented; (ii) that are related to goals identified in the individual's habilitation plan; (iii) that are essential to obtaining and retaining employment, such as the effective use of community resources, transportation, and mobility training; and (iv) for which an individual is not compensated more than 50 percent of the federal minimum wage or industry standard, whichever is greater; (D) training in the use of adaptive equipment necessary to obtain and retain employment; and (E) transportation between the individual's place of residence and prevocational services work site when other forms of transportation are unavailable or inaccessible.
Residential habilitation	<p>Residential habilitation is provided to individuals living in their own home or family home to allow an individual to reside successfully in a community setting by training the individual to acquire, retain, and improve self-help, socialization, and daily living skills or assisting the individual with activities of daily living. Residential habilitation services consist of the following:</p> <ul style="list-style-type: none"> (A) habilitation training, which is interacting face-to-face with an individual who is awake, to train the individual in the following activities: <ul style="list-style-type: none"> (i) self-care; (ii) personal hygiene; (iii) household tasks; (iv) mobility; (v) money management; (vi) community integration; (vii) use of adaptive equipment; (viii) management of caregivers; (ix) personal decision making; (x) interpersonal communication; (xi) reduction of challenging behaviors; (xii) socialization and the development of relationships; (xiii) participating in leisure and recreational activities;

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(xiv) use of natural supports and typical community services available to the public;

(xv) self-administration of medication; and

(xvi) strategies to restore or compensate for reduced cognitive skills;

(B) habilitation activities of daily living, which are:

(i) interacting face-to-face with an individual who is awake to assist the individual in the following activities:

- (I) self-care;
- (II) personal hygiene;
- (III) ambulation and mobility;
- (IV) money management;
- (V) community integration;
- (VI) use of adaptive equipment;
- (VII) self-administration of medication;
- (VIII) reinforce any therapeutic goal of the individual;
- (IX) provide transportation to the individual; and
- (X) protect the individual's health, safety and security;

(ii) interacting face-to-face or by telephone with an individual or an involved person regarding an incident that directly affects the individual's health or safety; and

(iii) performing one of the following activities that does not involve interacting face-to-face with an individual:

- (I) shopping for the individual;
- (II) planning or preparing meals for the individual;
- (III) housekeeping for the individual;
- (IV) procuring or preparing the individual's medication; or
- (V) arranging transportation for the individual; and

(C) habilitation delegated, which is tasks delegated by a registered nurse to a service provider of habilitation in accordance with Title 22 of the Texas Administrative Code, Part 11, Chapter 224 or Chapter 225.

Personal assistance may be an incidental component to habilitation for some activities of daily living for some individuals in the waiver.

Individuals in the CLASS waiver must have an ongoing demonstrated need for and be able to benefit from CLASS residential habilitation services based on the pre-enrollment needs assessment by the case manager and the service plan developed by the service planning team.

Transportation costs which are not billable, but which are incurred to provide residential habilitation, are included in the indirect portion of the rate.

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Community Living Assistance and Support Services Waiver Program Service Definitions

Respite (in-home and out-of-home)

Respite services means the temporary assistance with an individual’s activities of daily living if the individual has the same residence as a person who routinely provides such assistance and support to the individual, and the person is temporarily unavailable to provide such assistance and support.

Respite is provided intermittently when the primary caregiver is temporarily unavailable to provide supports. Respite provides an individual with assistance with activities of daily living and instrumental activities of daily living, the performance of tasks delegated by a registered nurse in accordance with state law, and supervision of the individual’s safety and security. Respite includes activities that facilitate the individual’s inclusion in community activities, use of natural supports and typical community services available to all people, social interaction, and participation in leisure activities, and development of socially valued behaviors and daily living and functional living skills.

Respite services consist of the following:

(a) interacting face-to-face with an individual who is awake to assist the individual in the following activities:

- (1) self-care;
- (2) personal hygiene;
- (3) ambulation and mobility;
- (4) money management;
- (5) community integration;
- (6) use of adaptive equipment;
- (7) self-administration of medication;
- (8) reinforce any therapeutic goal of the individual;
- (9) provide transportation to the individual; and
- (10) protect the individual's health, safety, and security;

(b) interacting face-to-face or by telephone with an individual or an involved person regarding an incident that directly affects the individual's health or safety; and

(c) performing one of the following activities that does not involve interacting face-to-face with an individual:

- (1) shopping for the individual;
- (2) planning or preparing meals for the individual;
- (3) housekeeping for the individual;
- (4) procuring or preparing the individual's medication;
- (5) arranging transportation for the individual; or
- (6) protecting the individual's health, safety, and security while the individual is asleep.

Respite care will be provided in the following locations:

- Individual’s home or place of residence;
- Three person Adult Foster Home;

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	<ul style="list-style-type: none"> - Four person Adult Foster Home; - Assisted living facility; - Nursing facility; - Intermediate care facility; and - Camp accredited by the American Camp Association. <p>Transportation to and from the respite service site is not a billable service for the respite service but is included in the billable service for residential habilitation.</p>
Specialized therapies	<p>Massage Therapy</p> <p>Massage therapy means the manipulation of soft tissue by hand or through a mechanical or electrical apparatus for the purpose of body massage and includes effleurage (stroking), petrissage (kneading), tapotement (percussion), compression, vibration, friction, nerve strokes, and Swedish gymnastics. The terms "massage," "therapeutic massage," "massage technology," "myotherapy," "body massage," "body rub," or any derivation of those terms are synonyms for "massage therapy."</p> <p>Recreational Therapy</p> <p>Recreational therapy means recreational or leisure activities that assist an individual to restore, remediate, or habilitate the individual's level of functioning and independence in life activities, promote health and wellness, and reduce or eliminate the activity limitations caused by an illness or disabling condition.</p> <p>Music Therapy</p> <p>Music therapy is the use of musical or rhythmic interventions to restore, maintain, or improve an individual's social or emotional functioning, mental processing, or physical health.</p> <p>Aquatic Therapy</p> <p>Aquatic therapy means a service that involves a low-risk exercise method done in water to improve an individual's range of motion, flexibility, muscular strengthening and toning, cardiovascular endurance, fitness, and mobility.</p> <p>Aquatic therapy will only be considered a specialized therapy if provided by a licensed therapist other than a physical, occupational or speech therapist (such as, a recreational therapist, massage therapist): otherwise it is to be billed under the appropriate therapy service category.</p> <p>Hippotherapy</p> <p>Hippotherapy means the provision of therapy that involves an individual interacting with and riding horses. Hippotherapy is designed to improve the balance, coordination, focus, independence, confidence, and motor and social skills of the individual.</p>

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	<p>The service is delivered by a riding instructor certified by the Professional Association of Therapeutic Horsemanship International in a structured therapeutic riding program administered in cooperation with a licensed physical therapist, occupational therapist, physical therapist assistant, or occupational therapy assistant that has an expertise in hippotherapy.</p> <p>Therapeutic Horseback Riding</p> <p>Therapeutic horseback riding means the provision of therapy that involves an individual interacting with and riding on horses. Therapeutic horseback riding is designed to improve the balance, coordination, focus, independence, confidence, and motor and social skills of the individual.</p>
Speech and language pathology	<p>Speech and language pathology means the application of nonmedical principles, methods, and procedures for measurement, testing, evaluation, prediction, counseling, habilitation, rehabilitation, or instruction related to the development and disorders of communication, including speech, voice, language, oral pharyngeal function, or cognitive processes, for the purpose of evaluating, preventing, or modifying or offering to evaluate, prevent, or modify those disorders and conditions in an individual or a group.</p> <p>Speech and language pathology includes: screening and assessment; developing therapeutic treatment plans; providing direct therapeutic intervention; recommending augmentative communication devices; training and assisting with augmentative communication devices; consulting with other providers and family members; and participating on the service planning team as appropriate.</p> <p>The scope of speech and language pathology offered in this waiver exceeds the Medicaid State Plan benefit. Through the waiver, speech and language pathology will be provided to maintain the individual's optimum condition.</p>
Support consultation (SC)	<p>Support consultation is an optional service that may provide to an individual who chooses to participate in consumer directed services. This service is provided by a support advisor and provides a level of assistance beyond that provided by the consumer direct services agency through the financial management service. Support consultation helps the employer to meet the required employer responsibilities of the consumer directed services option and to successfully deliver program services.</p> <p>Support consultation offers practical skills training and assistance to enable an individual or his/her legally authorized representative to successfully direct those services the individual or the legally authorized representative elect for self-direction. This service includes skills training related to recruiting, screening, and hiring workers, preparing job descriptions, verifying employment eligibility and qualifications, completion of documents required to employ an individual, managing workers, and development of effective backup plans for services considered critical to the individual's health and welfare in the absence of the regular provider or in an emergency situation. This service provides sufficient information and assistance to assure individuals and their representatives understand the responsibilities involved with self-direction. Support consultation may be provided by a qualified person associated with a financial management services agency selected by the individual or by an independent person hired by the individual. The support advisor does not provide any other waiver service except for support consultation services to the individual.</p>

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Support family services (SFS)	<p>Support family services are services provided to an individual under 18 years of age who resides with a "support family," as described in Title 40 of the Texas Administrative Code, Part 1, Chapter 45, Subchapter E, Division 3, Section 531 (relating to Support Family Requirements), that allow the individual to reside successfully in a community setting by supporting the individual to acquire, maintain, and improve self-help, socialization, and daily living skills or assisting the individual with activities of daily living.</p> <p>The support family must provide services to the CLASS individual as authorized on the individual service plan and defined in the individual program plan, including:</p> <ol style="list-style-type: none"> (1) direct personal assistance activities of daily living (such as grooming, eating, bathing, dressing, and personal hygiene); (2) assistance with meal planning and preparation; (3) assistance with housekeeping; (4) assistance with communication and mobility; (5) reinforcement of behavioral, educational, and therapeutic activities; (6) assistance with medications and the performance of tasks delegated by a registered nurse; (7) supervision for the individual's safety and security; (8) transportation related to routine family activities; (9) assistance with participation in community activities; and (10) habilitation. <p>The support family must:</p> <ol style="list-style-type: none"> (1) allow the individual's family members and friends access to the individual without arbitrary restrictions, unless exceptional conditions are justified by the service planning team, documented in the individual service plan, and approved by DADS; (2) assist a school-age individual in receiving educational services in a six-hour-per-day program five days a week provided by the local school district; (3) ensure that no individual receives educational services at a state school/state center educational setting, unless contraindications are documented with justification by the service planning team; (4) ensure that a preschool-age individual receives an early childhood education with appropriate activities and services, including small group and individual play with peers without disabilities, unless contraindications are documented with justification; (5) provide individuals with age-appropriate activities that enhance self-esteem and maximize functional level; and (6) ensure the individual receives medical care prescribed by a physician, including: <ol style="list-style-type: none"> (A) doctors' appointments; (B) medications; (C) evaluations, therapies, and treatment; and (D) lab work and other medical tests.
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	<p>Support family services are available to allow the individual to attend school, or participate in a program leading to a high school diploma or a Certificate of High School Equivalency (GED credentials).</p> <p>The support family must not provide services to more than three unrelated children at any one time in their home. The support family must ensure that the child participates in age-appropriate community activities and the support family home environment is healthy and safe for the child.</p> <p>The support family must provide service in a residence that the support family owns or leases. The residence must be a typical residence in the neighborhood and meet the needs of the child and the child's parents or legally authorized representative.</p>
Supported employment (SE)	<p>Supported employment means assistance provided, in order to sustain competitive employment, to an individual who, because of a disability, requires intensive, ongoing support to be self-employed, work from home, or perform in a work setting at which individuals without disabilities are employed. Supported employment includes employment adaptations, supervision, and training related to an individual's assessed needs. Individuals receiving supported employment earn at least minimum wage (if not self-employed).</p> <p>A provider of supported employment may bill for such services as: (1) transporting the individual to and from the worksite, (2) activities related to supporting the individual to be self-employed, work from home, or perform in a work setting, and (3) participating in the service planning team meetings.</p>
Transition assistance services (TAS)	<p>Transition assistance services means services provided to a person who is receiving institutional services and is eligible for and enrolling into the CLASS Program. Transition assistance services assist an individual in setting up a household in the community before being discharged from an intermediate care facility or a nursing facility and enrolling into the CLASS Program. Allowable expenses are those necessary to enable individuals to establish basic households and include:</p> <ul style="list-style-type: none"> - security deposits required to lease a home, including an apartment. or to establish utility services for the home; - purchase essential furnishings for the home, including table, chairs, window blinds, eating utensils, and food preparation items; - moving expenses required to move into or occupy the home and - services necessary to ensure the health and safety of the individual in the home, such as pest eradication, allergen control, or a one-time cleaning before occupancy. <p>Room and board are not allowable expenses. Transition assistance services do not include: monthly rental or mortgage expenses; food; regular utility charges; or household appliances or items that are intended for purely entertainment or recreational purposes. Transition assistance services' funding is authorized for expenses that are reasonable and necessary as determined through the service plan development process; and that are clearly identified in the individual service plan, and for which individuals are unable to pay for or obtain from other sources.</p>

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Assisted living	Provides personal assistance with activities of daily living and assistance with acquisition, retention, or improvement in skills related to activities of daily living, such as personal grooming and cleanliness, bed making and household chores, eating and the preparation of food, and the social and adaptive skills necessary to enable the individual to reside in the community. Services also include homemaker and chore services and therapeutic social and recreational activities. This service includes 18 or 24-hour on-site staff to meet scheduled or unpredictable needs and to provide supervision of safety and security. Personalized services are furnished to individuals in homes with 1 to 3 residents or 4 to 6 residents. Assisted living may also include assistance with health care maintenance and medication administration provided within the scope of state law, and non-medical transportation as specified in the service plan. Transportation provided within the assisted living service is above and beyond the scope of transportation through the State Plan service.
Audiology services	Audiology provides assessment and treatment by licensed audiologists, and includes training and consultation with an individual's family members or other support providers. The audiology service includes: screening and assessment; development of therapeutic treatment plans; direct therapeutic intervention; assistance and training with adaptive aids and augmentative communication devices; consultation with other service providers and family members; and participation on the service planning team, when appropriate.
Behavioral support	Behavioral support provides specialized interventions that assist an individual to increase adaptive behaviors to replace or modify maladaptive or socially unacceptable behaviors that prevent or interfere with the individual's inclusion in home and family life or community life, with a particular emphasis on communication as it affects behavior. The service includes assessment and analysis of assessment findings of the behavior(s) to be targeted so that an appropriate behavior support or communication plan may be designed; development of an individualized behavioral support plan consistent with the outcomes identified in the individual's service plan; training of and consultation with family members or other support providers on the implementation of the behavioral support plan or revisions of the plan; monitoring and evaluation of the success of the behavioral support plan implementation; and modification, as necessary, of the behavioral support plan based on documented outcomes of the plan's implementation. When appropriate, the person providing behavioral support educates the individual in the purpose/objectives, methods and documentation requirements of the plan. The service may also include counseling with and educating a participant's family, friends or other service providers about interacting with a participant whose behaviors may interfere with independent living. The scope of behavioral support services offered in this waiver exceeds the State Plan psychological services benefit and may be provided by a certified behavior analyst or a behavior communications specialist, neither of which is allowed under the State Plan service. Through the waiver, behavioral support services will be provided to maintain the individual's optimum condition.
Case management	Services which assist individuals who receive waiver services in gaining access to needed waiver and other State Plan services, as well as needed medical, social, educational and other services, regardless of the funding source for the services to which access is gained. Case managers initiate and oversee the process of assessment and reassessment of the individual's level of care and the review of

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	<p>service plans at enrollment, annually and as needed. Case managers observe the individual in his or her home and determine the intent and level of the individual's communication. If necessary, they determine from non-verbal communication the likes and dislikes of the individual. They lead the service planning team in development of a service plan that optimizes the opportunities for the individual to use their abilities and to integrate in community settings. They use their knowledge of sign language and other communication systems to make the individual as aware as possible of his or her service plan and options. They communicate with service planning team members to ensure that the service plan is being carried out appropriately. They monitor the success of the service plan by observing the individual at home and in the community. Case managers are responsible for ongoing monitoring of the provision of services included in the service plan.</p>
Chore service	<p>Services needed to maintain the individual's home as a clean, sanitary and safe environment. This service includes heavy household chores such as washing floors, windows and walls, securing loose rugs and tiles, moving heavy items or furniture in order to provide safe access and egress.</p>
Day habilitation	<p>Provides individuals assistance with acquiring, retaining, or improving the self-help, socialization, and adaptive skills necessary to live successfully in the community and participate in home and community life. Day habilitation provides the individual with individualized activities in environments designed to foster the development of skills and behavior supportive of greater independence and personal choice consistent with achieving the outcomes identified in the individual's service plan. Activities are also designed to reinforce therapeutic outcomes targeted by other waiver services, school, or other support providers. Day habilitation is normally furnished in a group setting other than the individual's residence on a regularly scheduled basis. This service includes transportation necessary for the individual's participation in day habilitation activities, such as shopping, swimming, going to the park, or other community activities.</p>
Dental treatment	<p>This service includes the following two elements:</p> <p>(A) Routine preventive, therapeutic, orthodontic treatment, and emergency dental treatment, to include:</p> <ol style="list-style-type: none"> 1. Emergency dental treatment: those procedures necessary to control bleeding, relieve pain, and eliminate acute infection; operative procedures that are required to prevent the imminent loss of teeth; and treatment of injuries to the teeth or supporting structures. 2. Preventive dental treatment: examinations, X-rays, cleanings, sealants, oral prophylaxes, and topical fluoride applications. 3. Therapeutic dental treatment: treatment that includes but is not limited to: fillings, scaling, extractions, crowns, pulp therapy for permanent and primary teeth; restoration of carious permanent and primary teeth; maintenance of space; and limited provision of removable prostheses when masticatory function is impaired, when an existing prosthesis is unserviceable, or when aesthetic considerations interfere with employment or social development. 4. Orthodontic dental treatment: procedures that include treatment of retained deciduous teeth; cross-bite therapy; facial accidents involving severe traumatic deviations; cleft palates with gross malocclusion that will benefit from early treatment; and severe, handicapping malocclusions affecting permanent dentition with a minimum score of 26 as measured on the Handicapping Labio-

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	<p>lingual Deviation Index.</p> <p>(B) Sedation necessary to perform dental treatment including non-routine anesthesia, e.g., intravenous sedation, general anesthesia, or sedative therapy prior to routine procedures. Sedation does not include administration of routine local anesthesia only.</p> <p>Cosmetic orthodontia is excluded from the dental treatment service.</p>
Dietary services	<p>Dietary services assist individuals in meeting their basic and/or special therapeutic nutritional needs. Dietary services are especially important to ensure and maintain the health of persons on modified diets required by a disability and those requiring enteral or parenteral nutrition regimens. A dietician develops individualized meal plans as appropriate for the individual. A registered, licensed, or provisionally licensed dietitian delivers the service. Through a nutritional assessment, the dietician evaluates the nutritional needs of an individual based on biochemical, anthropometric, physical, and dietary data to determine nutrient needs and to recommend appropriate nutritional intake through counseling and/or in consultation with the physician. In the State Plan, dietician services are provided only to children or to adults with specific high-risk conditions as defined in Title V. Services provided in the waiver are outside the scope of the State Plan.</p>
Employment assistance (EA)	<p>EA means assistance provided to an individual to help the individual locate paid employment in the community. EA includes: identifying an individual's employment preferences, job skills, and requirements for a work setting and work conditions; locating prospective employers offering employment compatible with an individual's identified preferences, skills, and requirements; and contacting a prospective employer on behalf of an individual and negotiating the individual's employment. A provider of EA may bill for such services as: (1) transporting the individual to and from the work site, (2) activities related to supporting the individual to be self-employed, work from home, or perform in a work setting, and (3) participating in service planning team meetings.</p>
Financial management services (FMS)	<p>FMS provides assistance to individuals with managing funds associated with consumer directed services. The service includes initial orientation and ongoing training related to responsibilities of being an employer and adhering to employer legal requirements. The financial services provider, referred to as the financial management services agency (FMSA), also provides assistance in the development, monitoring and revision of the individual's budget for each service delivered through the consumer directed services option and must maintain a separate account for each individual's budget. The FMSA provides assistance in determining staff wages and benefits subject to state limits, assistance in hiring by verifying employee's citizenship status and qualifications, and conducting required background checks. The FMSA verifies and maintains documentation of employee qualifications, including citizenship status, and documentation of services delivered. The FMSA collects and processes timesheets, processes payroll and payables, and makes withholdings for and payment of applicable federal, state and local employment-related taxes. The FMSA tracks disbursement of funds and provides periodic reports to the individual and case manager of all expenditures and the status of the individual's consumer directed services budget.</p>
Intervener	<p>The intervener serves as a facilitator to involve the individual in home and community services and activities. The intervener makes sights, sounds, and activities accessible to the individual by learning the specific communication system of the individual. This system</p>

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	is an individualized combination of expressive and receptive communication forms that may include sign language, speech, tangible symbols, gestures, non-verbal cues, actions, and behaviors. Intervener services include one-to-one contact to provide communication and information from the environment that would otherwise be available through vision and hearing; periodic development and preparation of activities for the individual; transporting individuals to gain access to community services and resources included in the service plan; and instructing individuals in skills related to community access.
Minor home modifications (MHM)	MHM are those physical adaptations to the home, required to address specific needs identified in the individual's service plan, that are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home, and without which, the individual would require institutionalization. Modifications may also include safety adaptations necessary for the welfare of the individual. All MHM must be authorized by the individual's service planning team. Any modification or combination of modifications must be authorized by the team based on prior written evaluations and recommendations from a professional qualified to assess the individual's need for the specific minor home modification. The written evaluation must document the necessity and appropriateness of the minor home modification to meet the specific needs of the individual. MHM must be provided in accordance with applicable state and local building codes and include installation, maintenance, and repair not covered by warranty. The service includes the following categories: construction or repair of wheelchair ramps and landings, or both to meet ADA specifications, protective awnings over ramps, modifications to bathroom facilities, modifications to kitchen facilities, and specialized accessibility and safety adaptations.
Nursing	Nursing services provide treatment and monitoring of health care procedures prescribed by a physician/medical practitioner, or as required by standards of professional practice or state law to be performed by licensed nursing personnel. State Plan nursing services are provided only for acute conditions or to treat an exacerbation of a chronic condition lasting less than 60 days. Services provided in the waiver cover ongoing chronic conditions such as wound care, medication administration and supervision of delegated tasks. This broadens the scope of these services beyond extended State Plan services.
Occupational therapy (OT)	The scope of OT services in the waiver exceeds the State Plan OT benefit. Through DBMD, OT services are provided to maintain the individual's optimum condition. OT services include: screening and assessment; development of therapeutic treatment plans; providing direct therapeutic intervention; recommending adaptive aids; training and assisting with adaptive aids and augmentative communication devices; consulting with other providers and family members; and participating on the service planning team, when appropriate. OT services are provided by an occupational therapist, or a licensed occupational therapy assistant under the direction of a licensed occupational therapist, within the scope of state licensure. The practice of OT does not include diagnosis or psychological services of the type typically performed by a licensed psychologist. The scope of OT services offered in this waiver exceeds the Medicaid State Plan OT benefit. Through the waiver, OT services are provided to maintain the individual's optimum condition.

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Orientation and mobility	Orientation and mobility teaches independent travel skills to an individual who is deafblind, so that the individual is able to negotiate in the environment safely and efficiently. The service includes evaluation of the strengths and needs of the individual, and creation of a plan to develop skills across an expanding environment using functional vision in a variety of travel situations. The service includes training other staff to create environments that enhance independent travel to meet the goals and objectives of orientation and mobility activities.
Physical therapy (PT)	PT is the evaluation, examination, and utilization of exercises, rehabilitative procedures, massage, manipulations, and physical agents. Physical agents include mechanical devices, heat, cold, air, light, water, electricity, and sound used in the aid of diagnosis or treatment. The scope of PT services offered in this waiver exceeds the State Plan PT benefit. State Plan PT services are provided only to treat for acute conditions or to treat exacerbation of chronic condition lasting less than 180 days. Services provided through the waiver cover ongoing chronic conditions even after rehabilitation has reached a plateau (e.g., range of motion). Through the waiver PT services will be provided to maintain the individual's optimum condition. PT services include: screening and assessment; developing therapeutic treatment plans; providing direct therapeutic intervention; recommending adaptive aids; training and assisting with adaptive aids; consulting with other providers and family members; and participating on the service planning team, when appropriate.
Prescribed drugs	Provides unlimited prescription medications to individuals enrolled in the waiver who are eligible for both Medicaid and Medicare (dually eligible). An individual who is dually eligible must obtain prescribed medications through the Medicare Prescription Drug Plan or through the Texas Medicaid State Plan (for certain medications excluded from Medicare), before using the waiver to obtain the medications. Individuals who are not dually eligible for Medicare and Medicaid and are receiving acute care services through managed care will receive unlimited prescription medications through their managed care plan. Children (under 21 years) will continue to have access to unlimited prescriptions through State Plan.
Residential habilitation	<p>Habilitation is services that assist an individual in acquiring, retaining, and improving socialization and adaptive skills related to activities of daily living to enable the individual to live successfully in the community and participate in home and community life, including day habilitation and residential habilitation. Residential habilitation is provided to individuals living in their own home or family home. Residential Habilitation is not provided to individuals receiving licensed assisted living or licensed home health assisted living.</p> <p>With the availability of Community First Choice (CFC) effective June 1, 2015, the majority of residential habilitation services are now available to all DBMD waiver participants through the CFC state plan services. However, transportation remains an exclusive DBMD waiver service. State plan services, including those provided under CFC, must be exhausted before using DBMD waiver services. The DBMD residential waiver service may include:</p> <ul style="list-style-type: none"> - transportation necessary for the individual to participate in community activities or assistance in securing such transportation;

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	<ul style="list-style-type: none"> - assistance with ambulation and mobility; - reinforcement of behavioral support or therapy activities; - assistance with medications and the performance of tasks delegated by a registered nurse in accordance with state law; - supervision of the individual's safety and security; - assistance with acquisition, retention, or improvement of skills related to activities of daily living, including: personal grooming and cleanliness; bed making and household chores; and preparation and consumption of food; - use of natural supports and typical community services; and - social interaction and participation in leisure activities.
Respite	<p>Respite is provided on a short-term basis to address a need caused by the absence or need for relief of persons normally providing care for the individual. This service must not be provided by the individual's spouse or a paid caregiver of residential habilitation with whom the individual resides. This service provides the individual with assistance with activities of daily living (grooming, eating, bathing, dressing, and personal hygiene) and functional living tasks; assistance with planning and preparing meals; transportation or assistance in securing transportation; assistance with ambulation and mobility; reinforcement of behavioral support or therapy activities; assistance with medications and the performance of tasks delegated by a registered nurse in accordance with state law; and supervision of the individual's safety and security. This service includes activities that facilitate the individual's inclusion in community activities, use of natural supports and typical community services, social interaction and participation in leisure activities, and daily and functional living skills. Respite may be provided in the following locations: the individual's home or place of residence, the private residence of the respite provider, an intermediate care facility, an assisted living home, or a camp accredited by the American Camping Association.</p>
Speech, hearing and language therapy services	<p>Speech, hearing and language therapy services are defined as the evaluation and treatment of impairments disorders or deficiencies related to an individual's speech and language by a licensed speech language pathologist or a licensed speech language pathologist assistant under the direction of the licensed speech language pathologist; within the scope of state licensure. Speech, hearing, and language therapy services include: screening and assessment; developing therapeutic treatment plans; providing direct therapeutic intervention; recommending augmentative communication devices; training and assisting with augmentative communication devices; consulting with other providers and family members; and participating on the service planning team as appropriate. The scope of speech, hearing, and language therapy services offered in this waiver exceeds the state plan speech, hearing, and language therapy benefit. Through the waiver, speech, hearing, and language therapy will be provided to maintain the individual's optimum condition.</p>
Support consultation (SC)	<p>Support consultation offers practical skills training and assistance to enable an individual or his or her legally authorized representative to successfully direct those services the individual or the legally authorized representative elects to self-direct. This service is provided by a certified support advisor, and includes skills training related to recruiting, screening, and hiring workers; preparing job descriptions; verifying employment eligibility and qualifications; completion of documents required to employ an</p>

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	<p>individual; managing workers; and development of effective back-up plans for services considered critical to the individual's health and welfare in the absence of the regular provider or an emergency situation. Skills training involves such activities as training and coaching the individual or his or her legally authorized representative regarding how to write an ad, how to interview potential job candidates, and role-play to prepare to interview potential employees. In addition, the support advisor assists the individual or his or her legally authorized representative to determine staff duties, to orient and instruct staff in duties and to schedule staff. Support advisers also assist the individual or his or her legally authorized representative with activities related to the supervision, performance evaluation, and discharge of staff. This service provides sufficient information and assistance to ensure that individuals and their representatives understand the responsibilities involved with consumer direction. Support consultation does not address budget, tax, or workforce policy issues. The State defines support consultation as an optional service that is provided by a support advisor and provides a level of assistance and training beyond that provided by the consumer directed services agency through financial management services. Support consultation helps an individual or his or her legally authorized representative to meet the required employer responsibilities of the consumer directed services option and to successfully deliver program services. Support consultation may be provided by a certified support advisor associated with a financial management services agency selected by the individual or his or her legally authorized representative or by an independent certified support advisor hired by the individual or his or her legally authorized representative.</p>
Supported employment (SE)	<p>Supported Employment means assistance provided, in order to sustain competitive employment, to an individual who, because of a disability, requires intensive, ongoing support to be self-employed, work from home, or perform in a work setting at which individuals without disabilities are employed. Supported Employment includes employment adaptations, supervision, and training related to an individual's assessed needs. Individuals receiving supported employment earn at least minimum wage (if not self-employed).</p> <p>A provider of supported employment may bill for such services as: (1) transporting the individual to and from the worksite, (2) activities related to supporting the individual to be self-employed, work from home, or perform in a work setting, and (3) participating in the service planning team meetings.</p>

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Adaptive aids (AA)	AA are devices necessary to treat, rehabilitate, prevent or compensate for conditions resulting in disability or loss of function. AA enable people to perform the activities of daily living or control the environment in which they live.
Audiology	<p>Audiology provides assessment and treatment by licensed audiologist and includes:</p> <ul style="list-style-type: none"> • Screening and assessment; • Development of therapeutic treatment plans; • Direct therapeutic intervention; • Assistance, and training with adaptive aids and augmentative communication devices • Consulting with other service providers and family members; and • Participating on the interdisciplinary team, when appropriate.
Behavioral support	<p>The behavioral support service component provides specialized interventions that assist an individual to increase adaptive behaviors to replace or modify maladaptive or socially unacceptable behaviors that prevent or interfere with the individual’s inclusion in home and family life or community life. This component includes assessment and analysis of assessment findings of the behavior(s) to be targeted so that an appropriate behavioral support plan may be designed; development of an individualized behavioral support plan consistent with the outcomes identified in the individual's person-directed plan; training of and consultation with family members or other support providers and, as appropriate, with the individual in the purpose/objectives, methods and documentation of the implementation of the behavioral support plan or revisions of the plan; monitoring and evaluation of the success of the behavioral support plan implementation; and modification, as necessary, of the behavioral support plan based on documented outcomes of the plan’s implementation. Behavioral support services include:</p> <ul style="list-style-type: none"> • Screening and assessment; • Development of therapeutic treatment plans; • Direct therapeutic intervention; • Assistance, and training with adaptive aids and augmentative communication devices; • Consulting with and training other service providers and family members; and • Participating on the service planning team, when appropriate. <p>ABA (Applied Behavior Analysis) is a therapeutic discipline, practice or approach that uses techniques and principles derived from learning theory in order to change behavior in a meaningful way. As such, ABA is not a “service” but rather an approach that a trained professional can use in the delivery of the service, behavioral support, which is available in CLASS, HCS, TxHmL, and DBMD.</p>
Cognitive rehabilitation therapy (CRT)	CRT is a service that assists an individual in learning or relearning cognitive skills that have been lost or altered as a result of damage to brain cells/chemistry in order to enable the individual to compensate for the lost cognitive functions. CRT is provided when determined to be medically necessary through an assessment conducted by an appropriate professional. CRT is provided in

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	accordance with the plan of care developed by the assessor, and includes reinforcing, strengthening, or reestablishing previously learned patterns of behavior, or establishing new patterns of cognitive activity or compensatory mechanisms for impaired neurological systems.
Day habilitation	Day habilitation provides individuals assistance with acquiring, retaining, or improving self-help, socialization, and adaptive skills necessary to live successfully in home and community-based settings. Day habilitation provides individualized activities in environments designed to promote the development of skills and behavior supportive of greater independence and personal choice and consistent with achieving the outcomes identified in the individual's service plan. If the individual's personal goals or current needs as they may relate to long term employment goals can be met through day habilitation, this choice is an option. These environments might be facilities, but if justified by the preferences of the individual the service can be provided in a non-facility environment. The facilities are program sites operated by HCS providers or other providers under contract with HCS providers for service provision. School-aged children are given the opportunity to participate in day habilitation on days when school is not in session (e.g., holidays, summer). Individuals aged 17 or older may choose to discontinue school and participate in day habilitation. Activities are also designed to reinforce therapeutic outcomes targeted by other waiver services, school, or other support providers. Day habilitation is normally furnished in a group setting other than the individual's residence. Day habilitation includes personal assistance for individuals who cannot manage their personal care needs during the day habilitation activity and assistance with medications and the performance of tasks delegated by an RN in accordance with the Texas Board of Nursing rules as defined by Title 22 of the Texas Administrative Code, Part 11, Chapter 225. This service also provides transportation during day habilitation activities necessary for the individual's participation in those activities.
Dental	<p>Elements of this service include the following:</p> <p>(A) Emergency dental treatment. Those procedures necessary to control bleeding, relieve pain, and eliminate acute infection; operative procedures that are required to prevent the imminent loss of teeth; and treatment of injuries to the teeth or supporting structures.</p> <p>(B) Preventive dental treatment. Examinations, oral prophylaxes, and topical fluoride applications.</p> <p>(C) Therapeutic dental treatment. Treatment that includes, but is not limited to, pulp therapy for permanent and primary teeth; restoration of carious permanent and primary teeth; maintenance of space; and limited provision of removable prostheses when masticatory function is impaired, when an existing prosthesis is unserviceable, or when aesthetic considerations interfere with employment or social development. For example, an individual who has a severe dental deformity may receive aesthetic treatment to enhance their opportunities for community integration.</p> <p>(D) Orthodontic dental treatment. Procedures that include treatment of retained deciduous teeth; cross-bite therapy; facial accidents involving severe traumatic deviations; cleft palates with gross malocclusion that will benefit from early treatment; and severe, handicapping malocclusions affecting permanent dentition with a minimum score of 26 as measured on the Handicapping Labio-lingual Deviation Index.</p>

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Dietary services	Dietary services include: screening and assessment, development of therapeutic treatment plans, direct therapeutic intervention, assistance and training with adaptive aids relative to eating, consulting with other service providers and family members; and participating on the service planning team, when appropriate.
Employment assistance (EA)	EA is assistance provided to an individual to help the individual locate paid employment in the community. EA includes: identifying an individual's employment preferences, job skills, and requirements for a work setting and work conditions; locating prospective employers offering employment compatible with an individual's identified preferences, skills, and requirements; contacting a prospective employer on behalf of an individual and negotiating the individual's employment; transporting the individual to help the individual locate paid employment in the community; and participating in service planning team meetings.
Financial management services (FMS)	FMS provides assistance to individuals with managing funds associated with the services elected for self-direction. The service includes initial orientation and ongoing training that is limited to budget development and management as well as the legal and programmatic requirements of being an employer; as the Consumer Directed Services Agency (CDSA) also provides assistance in the development, monitoring and revision of the individual's budget for each service component delivered through the Consumer Directed Service (CDS) option and must maintain a separate account for each individual's budget. The CDSA provides assistance in determining staff wages and benefits subject to state limits, assistance in hiring by verifying employee's citizenship status and qualifications, and conducting required background checks. The CDSA verifies and maintains documentation of employee qualifications, including citizenship status, and documentation of services delivered. The CDSA also collects timesheets, processes timesheets of employees, processes payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance. The CDSA makes payments directly to all service providers. The CDSA tracks disbursement of funds and provides periodic reports to the individual of all expenditures and the status of the individual's CDS budget. The CDSA must not provide case management to the individual.
Host home/ companion care (HH/CC)	HH/CC provides personal assistance with activities of daily living and functional living tasks; assistance with planning and preparing meals; transportation or assistance in securing transportation; assistance with ambulation and mobility; reinforcement of behavioral support or specialized therapies activities; assistance with medications based upon the results of an RN assessment; performance of tasks delegated by a RN ; and supervision of the individual's safety and security. HH/CC includes habilitation activities that facilitate the individual's inclusion in community activities, use of natural supports and typical community services available to all people, social interaction and participation in leisure activities, and development of socially valued behaviors and daily living and functional living skills. Individuals receiving Adult Foster Care or Texas Department of Family and Protective Services foster care services may not receive HH/CC through HCS. HH/CC is provided in a private residence meeting HCS requirements by a host home or companion care provider who lives in the residence. HH/CC is combined because the actual services provided are identical. In a host home arrangement, the host home provider owns or leases the residence. In a companion care arrangement, the residence may be owned or leased by the companion care provider or may be owned or leased by the individual.

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Minor home modifications (MHM)	<p>This service component provides physical adaptations to an individual’s home to address specific needs identified by an individual’s service plan. MHM are necessary to ensure the health, welfare, and safety of the individual, or to enable the individual to function with greater independence in his or her home. Without the modification, the individual would require institutionalization. Modifications may include the installation of ramps and grab-bars, widening of doorways, and other specialized accessibility adaptations, modification of kitchen and bathroom facilities, or safety adaptations necessary for the welfare of the individual. Excluded are those adaptations or improvements to the home which are of general utility and are not of direct medical or remedial benefit to the individual. Examples of items excluded are installation of carpeting, roof repair, installation of central air conditioning, major home renovations, and construction of additional rooms or other modifications, which add to the total square footage of the home. All MHM must be authorized by the individual’s interdisciplinary team. Any modification or combination of modifications costing more than \$1,000 must be authorized by the team based on prior written evaluations and recommendations from the individual’s physician, a licensed occupational or physical therapist, or a psychologist or behavior analyst qualified to assess the individual’s need for the specific MHM. The written evaluation must document the necessity and appropriateness of the MHM to meet the specific needs of the individual. MHM must be provided in accordance with applicable state or local building codes and are limited to the following categories including the repair and/or maintenance of modifications: purchase or repair of wheelchair ramps and construction or repair of wheelchair ramps; modifications to bathroom facilities; modifications to kitchen facilities; and specialized accessibility and safety adaptations.</p>
Nursing	<p>Nursing provides treatment and monitoring of medical conditions prescribed by a physician/medical practitioner and/or required by standards of professional practice or state law to be performed by licensed nursing personnel. Nursing is provided under this waiver when no other financial resource for such service is available or when other available resources have been used. Individuals who are under 21 years of age must access benefits through the Texas Health Steps-- Comprehensive Care Program (EPSDT) before nursing may be provided under this waiver.</p>
Occupational therapy (OT)	<p>OT services consist of the full range of activities provided by a licensed occupational therapist, or a licensed occupational therapy assistant, under the direction of a licensed occupational therapist, within the scope of state licensure. Texas assures that OT is cost-effective and necessary to avoid institutionalization. Services include:</p> <ul style="list-style-type: none"> • screening and assessment; • development of therapeutic treatment plans; • direct therapeutic intervention; • assistance, and training with adaptive aids and augmentative communication devices • consulting with other service providers and family members; and • participating on the interdisciplinary team, when appropriate.
Physical therapy (PT)	<p>PT services consist of the full range of activities provided by a licensed physical therapist, or a licensed physical therapy assistant under the direction of a licensed physical therapist, within the scope of his state licensure. The scope of PT services offered in this</p>

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	<p>waiver exceeds the State Plan PT benefit. Under the waiver, PT will be provided to maintain the individual's optimum condition.</p> <p>Services include:</p> <ul style="list-style-type: none"> • screening and assessment; • development of therapeutic treatment plans; • direct therapeutic intervention; • assistance, and training with adaptive aids and augmentative communication devices • consulting with other service providers and family members; and • participating on the interdisciplinary team, when appropriate. <p>PT is provided under this waiver when no other financial resource for such therapy is available or when other available resources have been used. Participants who are under 21 years of age must first access PT benefits through the Texas Health Steps-- Comprehensive Care Program (EPSDT) before therapy may be provided under this waiver.</p>
Residential support services (RSS)	<p>RSS provides individuals with personal assistance with activities of daily living (grooming, eating, bathing, dressing and personal hygiene) and functional living tasks; assistance with planning and preparing meals; transportation or assistance in securing transportation; assistance with ambulation and mobility; reinforcement of behavioral support or specialized therapies activities; assistance with medications based upon the results of a registered nurse (RN) assessment, the performance of tasks delegated by a RN in accordance with the Texas Board of Nursing rules as defined by Title 22 of the Texas Administrative Code, Part 11, Chapter 225. Transportation costs are included in the rate for all types of residential services. Type and frequency of supervision is determined on an individual basis based on the level of need for each individual.</p>
Respite	<p>Respite is provided for the planned or emergency short-term relief of the unpaid primary caregiver of an individual who lives in their family home. Respite is provided intermittently when the primary caregiver is temporarily unavailable to provide supports due to non-routine circumstances. This service provides an individual with personal assistance with activities of daily living. This service includes habilitation activities that facilitate the individual's inclusion in community activities, use of natural supports and typical community services available to all people, social interaction and participation in leisure activities, and development of socially valued behaviors and daily living and functional living skills. Respite is provided in the residence of the individual or in other locations, including residences in which supervised living or residential support is provided or in a respite facility that meets HCS waiver requirements and afford an environment that ensures the health, safety, comfort, and welfare of the individual.</p>
Social work	<p>Social work services include: screening and assessment, development of therapeutic treatment plans, direct therapeutic intervention, assistance, and training with adaptive aids and augmentative communication devices, consulting with other service providers and family members, and participating on the service planning team, when appropriate.</p>
Speech	<p>Speech/language therapy services consist of the full range of activities provided by a licensed speech/language pathologist, or a licensed associate in speech/language pathology, under the direction of a licensed speech/language pathologist, within the scope of</p>

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	<p>licensure. Services include:</p> <ul style="list-style-type: none"> • screening and assessment; • development of therapeutic treatment plans; • direct therapeutic intervention; • assistance, and training with adaptive aids and augmentative communication devices • consulting with other service providers and family members; and • participating on the interdisciplinary team, when appropriate.
Supervised living (SL)	<p>SL provides individuals with personal assistance with activities of daily living (grooming, eating, bathing, dressing and personal hygiene) and functional living tasks; assistance with planning and preparing reinforcement of behavioral support or specialized therapies activities; assistance with medications based upon the results of a registered nurse assessment and supervision of the individual's safety and security. SL includes habilitation activities that facilitate the individual's inclusion in community activities, use of natural supports and typical community services available to all people, social interaction and participation in leisure activities, and development of socially valued behaviors and daily living and functional living skills. SL provides residential assistance as needed by individuals who live in residences in which the HCS provider holds a property interest and that meet program certification standards. SL is provided to individuals by direct service providers who are not awake during normal sleep hours. SL providers provide services and supports as needed by individuals and are present in the residence and able to respond to the needs of individuals during normal waking hours.</p>
Support consultation (SC)	<p>SC is an optional service that offers practical skills training and assistance to enable an individual or legally authorized representative to successfully direct those services the individual or the legally authorized representative elect for consumer direction. This service is provided by a certified support advisor, and includes skills training related to recruiting, screening, and hiring workers; preparing job descriptions; verifying employment eligibility and qualifications; completion of documents required to employ an individual; managing workers; and development of effective backup plans for services considered critical to the individual's health and welfare in the absence of the regular provider or an emergency situation.</p>
Supported employment (SE)	<p>SE means assistance provided, in order to sustain competitive employment, to an individual who, because of a disability, requires intensive, ongoing support to be self-employed, work from home, or performs in a work setting at which individuals without disabilities are employed. SE includes employment adaptations, supervision, and training related to an individual's assessed needs. Individuals receiving SE earn at least minimum wage (if not self-employed). SE includes employment adaptations, supervision, and training related to an individual's assessed needs. Individuals receiving supported employment earn at least minimum wage (if not self-employed).</p>

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Supported home living (SHL) transportation¹⁴	SHL provides individuals with direct personal assistance with activities of daily living (grooming, eating, bathing, dressing, and personal hygiene) and functional living tasks; assistance with planning and preparing meals; transportation or assistance in securing transportation; assistance with ambulation and mobility; reinforcement of behavioral support or specialized therapies activities; assistance with medications and the performance of tasks delegated by a registered nurse. This service includes habilitation activities that facilitate the individual's inclusion in community activities, use of natural supports and typical community services available to all people, social interaction and participation in leisure activities, and development of socially valued behaviors and daily living and functional living skills. SHL is provided to individuals residing in their own residence or the residence of their natural or adoptive families or to individuals receiving foster care from the Texas Department of Family and Protective Services. SHL provided to individuals residing with their family members is designed to support rather than supplant the family and natural supports. Individuals residing in their own homes receive SHL as necessary to support them in their independent residence.
Transition assistance services (TAS)	TAS pay for non-recurring set-up expenses for individuals transitioning from an intermediate care facility, a nursing facility, or a General Residential Operation into the HCS waiver. TAS are billed on or after the individual's enrollment into the waiver. Allowable expenses are those necessary to enable individuals to establish basic households and may include: security deposits for leases on apartments or homes; essential household furnishings and moving expenses required to occupy and use a community domicile, including furniture; window coverings; food preparation items; and bed and bath linens; set-up fees or deposits for utility or service access, including telephone, electricity, gas, and water; services necessary for the individual's health and welfare, such as pest eradication and one-time cleaning of the residence prior to occupancy; and activities to assess need for, facilitate, arrange for, and procure needed resources, (limited to up to 180 consecutive days prior to discharge from the intermediate care facility, general residential operation, or nursing facility and entrance to the waiver); and necessary minor home modifications, as listed in Appendix X of the HCS Billing Guidelines, including assessments performed by a medical doctor, occupational therapist, physical therapist, psychologist or a behavior analyst required to obtain the minor home modifications. Room and board are not allowable expenses. TAS does not include: monthly rental or mortgage expenses; food; regular utility charges; or household appliances or items that are intended for purely diversional or recreational purposes. Funding is authorized for expenses that are reasonable and necessary as determined through the service plan development process; and that are clearly identified in the individual service plan, and for which individuals are unable to pay for or obtain from other sources. To be eligible to receive TAS the individual must be a resident of a Texas nursing facility, intermediate care facility, or General Residential Operation who wishes to be discharged from that facility; be Medicaid eligible; and be determined eligible for the HCS waiver.

¹⁴ For additional information see the HCS Program Billing Guidelines at www.dads.state.tx.us.

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Adaptive aids (AA)	This service component provides devices, controls, or appliances that are necessary to address specific needs identified by the individual's service plan. AA enable individuals to increase their abilities to perform activities of daily living or to perceive, control, or communicate with the environment in which they live. AA include items that assist an individual with mobility and communication and ancillary supplies and equipment necessary to the proper functioning of such items. Also included are medically necessary supplies and items needed for life support.
Audiology	The audiology service component provides assessment and treatment by licensed audiologists, and includes training and consultation with an individual's family members or other support providers. The audiology service includes: <ul style="list-style-type: none"> • Screening and assessment; • Development of therapeutic treatment plans; • Direct therapeutic intervention; • Assistance, and training with adaptive aids and augmentative communication devices; • Consulting with other service providers and family members; and • Participating on the interdisciplinary team, when appropriate.
Behavioral support	The behavioral support service component provides specialized interventions that assist an individual to increase adaptive behaviors to replace or modify maladaptive or socially unacceptable behaviors that prevent or interfere with the individual's inclusion in home and family life or community life. The component includes assessment and analysis of assessment findings of the behavior(s) to be targeted so that an appropriate behavioral support plan may be designed; development of an individualized behavioral support plan consistent with the outcomes identified in the individual's person-directed plan; training of and consultation with family members or other support providers and, as appropriate, with the individual in the purpose/objectives, methods and documentation of the implementation of the behavioral support plan or revisions of the plan; monitoring and evaluation of the success of the behavioral support plan implementation; and modification, as necessary, of the behavioral support plan based on documented outcomes of the plan's implementation. Behavioral support services include: <ul style="list-style-type: none"> • Screening and assessment; • Development of therapeutic treatment plans; • Direct therapeutic intervention; • Assistance, and training with adaptive aids and augmentative communication devices; • Consulting with and training other service providers and family members; and • Participating on the service planning team, when appropriate.

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Community support services transportation ¹⁵	The community support service component provides services and supports in an individual’s home and at other community locations such as city bus terminals, libraries, or stores, etc. that are necessary to achieve outcomes identified in the individual’s person-directed plan. This component provides habilitative or support activities that provide, foster improvement of, or facilitate an individual’s ability to perform functional living skills and other activities of daily living.
Day habilitation	Day habilitation provides individuals assistance with acquiring, retaining, or improving self-help, socialization, and adaptive skills necessary to live successfully in home and community-based settings. Day habilitation provides individualized activities in environments designed to promote the development of skills and behavior supportive of greater independence and personal choice and consistent with achieving the outcomes identified in the individual’s service plan. If the individual’s personal goals or current needs as they may relate to long term employment goals can be met through day habilitation, this choice is an option. Day habilitation includes personal assistance for individuals who cannot manage their personal care needs during the day habilitation activity and assistance with medications and the performance of tasks delegated by an RN in accordance with the Texas Board of Nursing rules as defined by Title 22 of the Texas Administrative Code, Part 11, Chapter 225. This service also provides transportation during day habilitation activities necessary for the individual's participation in those activities.
Dental	<p>(A) Emergency dental treatment. Those procedures necessary to control bleeding, relieve pain, and eliminate acute infection; operative procedures that are required to prevent the imminent loss of teeth; and treatment of injuries to the teeth or supporting structures.</p> <p>(B) Preventive dental treatment. Examinations, oral prophylaxes, and topical fluoride applications.</p> <p>(C) Therapeutic dental treatment. Treatment that includes, but is not limited to, pulp therapy for permanent and primary teeth; and</p> <p>(D) Orthodontic dental treatment. Procedures that include treatment of retained deciduous teeth.</p> <p>Elements include the following:</p> <ul style="list-style-type: none"> • Emergency dental treatment: procedures necessary to control bleeding, relieve pain, and eliminate acute infection; operative procedures required to prevent the imminent loss of teeth; and treatment of injuries to the teeth or supporting structures. • Preventive dental treatment: examinations, oral prophylaxes, and topical fluoride applications. • Therapeutic dental treatment: treatment that includes but is not limited to, pulp therapy for permanent and primary teeth; restoration of carious permanent and primary teeth; maintenance of space; and limited provision of removable prostheses when masticatory function is impaired, when an existing prosthesis is unserviceable or when aesthetic considerations interfere with employment or social development. • Orthodontic dental treatment: procedures that include treatment of retained deciduous teeth; cross bite therapy; facial accidents involving severe traumatic deviations; cleft palates with gross malocclusion that will benefit from early treatment; and severe, handicapping malocclusions affecting permanent dentition with a minimum score of 26 as measured on the

¹⁵ For additional information see the TxHmL Program Billing Guidelines at www.dads.state.tx.us

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	<p>Handicapping Labio-lingual Deviation Index.</p> <p>Cosmetic orthodontia is excluded from the dental treatment component.</p>
Dietary	<p>The dietary service component assists individuals in meeting their basic and/or special therapeutic nutritional needs. Medically oriented nutritional services are especially important to ensure and maintain the health of persons on modified diets required by a disability and those requiring enteral or parenteral nutrition regimens. The dietary service component consists of assessment and treatment by licensed dietitians and includes training and consultation with an individual's family members or other support providers.</p>
Employment assistance (EA)	<p>EA is assistance provided to an individual to help the individual locate paid employment in the community. EA includes:</p> <ul style="list-style-type: none"> • identifying an individual's employment preferences, job skills, and requirements for a work setting and work conditions; • locating prospective employers offering employment compatible with the individual's identified preferences, skills, and requirements; and • contacting a prospective employer on behalf of an individual and negotiating the individual's employment.
Financial management services (FMS)	<p>The FMS component provides assistance to individuals with managing funds associated with the services elected for self-direction. The service includes initial orientation and ongoing training that is limited to budget development and management as well as the legal and programmatic requirements of being an employer; as the Consumer Directed Services Agency (CDSA) also provides assistance in the development, monitoring and revision of the individual's budget for each service component delivered through the consumer Directed Service (CDS) option and must maintain a separate account for each individual's budget. The CDSA provides assistance in determining staff wages and benefits subject to state limits, assistance in hiring by verifying employee's citizenship status and qualifications, and conducting required background checks. The CDSA verifies and maintains documentation of employee qualifications, including citizenship status, and documentation of services delivered. The CDSA also collects timesheets, processes timesheets of employees, processes payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance. The CDSA makes payments directly to all service providers. The CDSA tracks disbursement of funds and provides periodic reports to the individual of all expenditures and the status of the individual's CDS budget. The CDSA must not provide case management to the individual.</p>
Minor home modifications (MHM)	<p>This service component provides physical adaptations to an individual's home to address specific needs identified by an individual's service plan. MHM are necessary to ensure the health, welfare, and safety of the individual, or to enable the individual to function with greater independence in his or her home. Without the modification, the individual would require institutionalization. Modifications may include the installation of ramps and grab-bars, widening of doorways, and other specialized accessibility adaptations, modification of kitchen and bathroom facilities, or safety adaptations necessary for the welfare of the individual. Excluded are those adaptations or improvements to the home which are of general utility and are not of direct medical or remedial benefit to the individual. Examples of items excluded are installation of carpeting, roof repair, installation of central air conditioning,</p>

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	major home renovations, and construction of additional rooms or other modifications, which add to the total square footage of the home. All MHM must be authorized by the individual's interdisciplinary team. Any modification or combination of modifications costing more than \$1,000 must be authorized by the team based on prior written evaluations and recommendations from the individual's physician, a licensed occupational or physical therapist, or a psychologist or behavior analyst qualified to assess the individual's need for the specific MHM. The written evaluation must document the necessity and appropriateness of the MHM to meet the specific needs of the individual. MHM must be provided in accordance with applicable state or local building codes and are limited to the following categories including the repair and/or maintenance of modifications: purchase or repair of wheelchair ramps and construction or repair of wheelchair ramps; modifications to bathroom and kitchen facilities; and specialized accessibility and safety adaptations.
Nursing	The skilled nursing service component provides treatment and monitoring of health care procedures prescribed by a physician/medical practitioner and/or required by standards of professional practice or state law to be performed by licensed nursing personnel.
Occupational therapy (OT)	OT services consists of the full range of activities provided by a licensed occupational therapist, or a licensed occupational therapy assistant, under the direction of a licensed occupational therapist, within the scope of state licensure. Texas assures that OT is cost-effective and necessary to avoid institutionalization. Services include: <ul style="list-style-type: none"> • Screening and assessment; • Development of therapeutic treatment plans; • Direct therapeutic intervention; • Assistance, and training with adaptive aids and augmentative communication devices • Consulting with other service providers and family members; and • Participating on the interdisciplinary team, when appropriate.
Physical therapy (PT)	PT services consist of the full range of activities provided by a licensed physical therapist, or a licensed physical therapy assistant under the direction of a licensed physical therapist, within the scope of his state licensure. The scope of PT services offered in this waiver exceeds the State Plan PT benefit. Under the waiver, PT will be provided to maintain the individual's optimum condition. Services include: <ul style="list-style-type: none"> • Screening and assessment; • Development of therapeutic treatment plans; • Direct therapeutic intervention; • Assistance, and training with adaptive aids and augmentative communication devices • Consulting with other service providers and family members; and • Participating on the interdisciplinary team, when appropriate.

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	PT is provided under this waiver when no other financial resource for such therapy is available or when other available resources have been used. Participants who are under 21 years of age must first access PT benefits through the Texas Health Steps-- Comprehensive Care Program (EPSDT) before therapy may be provided under this waiver.
Respite	The respite service component is provided for the planned or emergency short-term relief of the unpaid caregiver of an individual when the caregiver is temporarily unavailable to provide supports due to non-routine circumstances. This component provides an individual with personal assistance with activities of daily living (grooming, eating, bathing, dressing, and personal hygiene) and functional living tasks, assistance with planning and preparing meals, transportation or assistance in securing transportation, assistance with ambulation and mobility, reinforcement of behavioral support or specialized therapies activities, assistance with medications and the performance of tasks delegated by a registered nurse in accordance with state law, and supervision of the individual's safety and security.
Speech/ language therapy	Speech/language therapy services consist of the full range of activities provided by a licensed speech/language pathologist, or a licensed associate in speech/language pathology, under the direction of a licensed speech/language pathologist, within the scope of licensure. Services include: <ul style="list-style-type: none"> • Screening and assessment; • Development of therapeutic treatment plans; • Direct therapeutic intervention; • Assistance, and training with adaptive aids and augmentative communication devices • Consulting with other service providers and family members; and • Participating on the interdisciplinary team, when appropriate.
Support consultation (SC)	SC is an optional service that offers practical skills training and assistance to enable an individual or legally authorized representative to successfully direct those services the individual or the legally authorized representative elect for consumer direction. This service is provided by a certified support advisor, and includes skills training related to recruiting, screening, and hiring workers; preparing job descriptions; verifying employment eligibility and qualifications; completion of documents required to employ an individual; managing workers; and development of effective backup plans for services considered critical to the individual's health and welfare in the absence of the regular provider or an emergency situation.
Supported employment (SE)	SE means assistance provided, in order to sustain competitive employment, to an individual who, because of a disability, requires intensive, ongoing support to be self-employed, work from home, or performs in a work setting at which individuals without disabilities are employed. SE includes employment adaptations, supervision, and training related to an individual's assessed needs. Individuals receiving SE earn at least minimum wage (if not self-employed).