

B.1.2.a Criteria for Determining Eligibility and Placement on the Waiting List

Responsible Office: Community Programs, Support Coordination

Reference: Chapter 580-5-30-.13 Eligibility and Level of Care Determinations for Medicaid HCBS Programs, Alabama Department of Mental Health Division of Developmental Disabilities Administrative Code. Application for 1915(c) HCBS ID Waiver: AL.0001.R09.06 - Jul 01, 2024 (as of Jul 01, 2024). Application for 1915(c) HCBS Living at Home Waiver: AL.0391.R04.06 - Jul 01, 2024 (as of Jul 01, 2024), O.G. A.2.1 Appeals Process

Revised: February 3, 2025

Statement: Eligibility for HCBS services and placement on the Waiting List will be determined based on verifiable and valid documentation.

Purpose/Intent: The process for determining eligibility for HCBS services and being placed on the Waiting List involves specific, crucial steps governed by detailed standards and practices of communication between the Regional Community Services (RCS) Waiting List Coordinator and the referring 310 agencies.

HCBS Waivers: ID, LAH, CWP

Definitions:

Alabama Department of Intellectual Disabilities Information Management System (DDD IMS) – information management system used by ADMH-DDD

Inventory for Client and Agency Planning (ICAP) – used to determine if an individual meets eligibility criteria for the waiver based upon functional abilities

Regional Community Services (RCS)- office of the ADMH-DDD service delivery system

Procedures:

1. The person seeking Waiver services (or their caregiver) contacts the Call Center to initiate application.
2. The Call Center:
 - a. Takes information from the caller and completes the Initial Contact Form;
 - b. Opens a record for the person in the DDD IMS and enters data from the Initial Contact Form and notifies the RCS Waiting List Coordinator Community Service Director, and the 310 Board Agency of the new application via the DDD IMS; If the referral is deemed an emergency the Statewide Placement Coordinator is also notified.
 - c. Determines the county of residence of the caller and notifies them of the specific Waiver programs offered in that county,
 - i. The ID and LAH 1915c Waivers are available in counties not covered by the Community Waiver Program.
 - ii. In counties covered by the Community Waiver Program, the Community Waiver 1915c and the Community Waiver 1115 HCBS Programs (Group 5) are available.
 - d. Informs the caller of eligibility information required to be approved for the Waiver programs available in their county of residence;
 - e. Sends, via email or standard mail as the caller prefers, a letter verifying the date of the contact and outlining the eligibility determination process. Accompanying this letter is a brochure detailing the eligibility criterion for the Waiver programs in their county and examples of documentation required to satisfy them.
3. The 310 Board:

- a. Gathers information from the applicant and/or caregivers in order to accurately complete the Criticality Assessment (reference ADMH-DDD OG 1.4) and the ICAP (reference ADMH-DDD OG 1.3);
 - b. Assists the applicant and/or caregivers with gathering documents needed to substantiate eligibility as described in 4.a-c;
 - c. Uploads the eligibility documentation to the DDD IMS and tags the RCS Waiting List Coordinator to notify them of its availability.
4. The RCS Waiting List Coordinator reviews eligibility documentation in the application packet provided via DDD IMS by the designated 310 agency, which must include:
- a. Qualifying psychological evaluation(s) administered/interpreted by a qualified professional.
 - b. Qualifying evaluations that document evidence of an intellectual disability administered before the age of twenty-two (22), as well as one conducted within three (3) years of time of application.
 - c. An ICAP Compuscore report completed within ninety (90) days of the date of a complete application packet.
 - d. An accurately completed Criticality Assessment
5. In order for the applicant to be deemed eligible for placement on the Waiting List, the submitted eligibility documentation must demonstrate the following for 1915c services:
- a. The applicant evidences significant problems in at least three adaptive functioning areas (Self-Care, Receptive & Expressive Language, Mobility, Self-Direction, Capacity for Independent Living, and Learning) as demonstrated through:
 - i. Administration of an ICAP (Inventory for Client and Agency Planning, Riverside Press) to include an ICAP Compuscore report, with corresponding information entered into the ADIDIS Eligibility Assessment, which uses an algorithm to populate the adaptive functioning problem categories.
 - ii. The Diagnosis Record in ADIDIS (for Learning area)
 - iii. The limitations in adaptive functioning are determined from the ICAP completed by a Support Coordinator. If necessary to support a conclusive determination, an Adaptive Behavior Scale (ABS) will be required, but only when maladaptive behavior appears to be the only factor causing the ICAP to qualify an otherwise borderline individual.
 - b. The applicant achieved a full-scale IQ score of 72 or below, evidencing the presence of an intellectual disability, documented before the age of twenty-two (22).
 - i. If more than one IQ evaluation exists and was done prior to age twenty-two, the most recent evaluation administered will be the score considered valid unless there is a significant variation in IQ score as compared to older evaluation(s), and/or one or more of the IQ scores is above the cutoff score of 72. In this situation, the evaluations will undergo additional review by the ADMH-DDD Eligibility Review Committee to determine if 5.c. may apply. The Eligibility Review Committee consists of Regional Community Services Behavioral and Psychological Evaluators from at least three Regional Offices, who will provide a written response to the Community Services Waiting List Coordinator of their recommendations of eligibility within forty-five (45) days of receipt of request for review.
 - ii. For all applicants, additional information may be requested and reviewed in order to confirm eligibility, in the case that submitted information is not complete or sufficient. This could include updated IQ evaluations, medical records, school

documentation, etc. In the case that additional information is needed, the applicant will be notified as well as given time to gather and submit.

- c. The primary cause(s) of impaired functioning and/or the full-scale IQ of 72 or below is not the result of mental illness, a developmental disability, traumatic brain injury acquired after age twenty-two (22), or external factors such as medication, substance use effects, significant distraction, or stress.
 - d. In the instance that an applicant has been evaluated by a qualified professional and a Full-Scale IQ score is determined unable to be rendered due the applicant's significant cognitive deficit/ un-testability, it is requested that the qualified professional provide an "assumed score" in writing accompanied by evidenced based justification for the score assignment. When unable to receive the "assumed score" from the qualified professional, the ADMH-DDD Eligibility Review Committee will review and render a determination.
 - e. Although persons as young as three (3) years of age can be admitted to the waiver, available state plan and EPSDT services must be utilized for all participants who are under twenty-one (21) years of age.
6. **Approved Supporting Documentation-** additional documentation may be submitted for eligibility determination review:
- a. Results of all relevant educational, medical, social, or other assessments and records;
 - b. Reports concerning the cause of the suspected intellectual disability;
 - c. Types of services the individual has received or is receiving, whether through the school system, vocational rehabilitation, or other service systems;
 - d. Records from the Social Security Administration specific to disability benefits; and
 - e. Previous and current psychological, medical, and psychiatric treatments and diagnoses.
7. **Specific to the Community Waiver Program:** In the event, the applicant meets the eligibility criteria outlined in items 5.b-c., above, but does not meet the adaptive functioning criteria stipulated in item 5.a., the Waiting List Coordinator will review the applicant's ICAP Compuscore report. The applicant will be determined eligible for placement on the Community Waiver Program Waiting List for Enrollment Group 5 services if they scored below 480 in at least one of the following ICAP domains: Social & Communication, Personal Living, Community Living, or Broad Independence.
8. In the event the application packet does not include all of the documentation listed in 4.a-c above or does not unequivocally demonstrate that the person meets the eligibility criteria listed above for placement on the Waiting List, the application packet will be considered incomplete, and the Waiting List Coordinator will communicate via DDD IMS to the Support Coordination agency details on what additional information is needed to complete the packet and make a determination on eligibility.
9. In the event the needed additional information is not submitted within sixty (60) calendar days of the Waiting List Coordinator's DDD IMS notification, the application packet will be deemed incomplete, and the Waiting List Coordinator will send to the applicant a Notice of Incomplete Application (found in the Enrollments record in the DDD IMS). A copy of this notification will be recorded in the DDD IMS.
10. In the event the needed additional information is submitted within sixty (60) calendar days, but the cumulative information does not unequivocally demonstrate that the person meets the eligibility criteria listed above, the applicant is deemed ineligible for placement on the Waiting List. The Waiting List Coordinator will send to the applicant a Wait List Denial Notification (found in the Enrollments record in the DDD IMS). A copy of this notification will be recorded in the DDD IMS.

11. For applicants with a complete application packet who've been deemed eligible for the Waiting List, within ninety days of eligibility determination, the Wait List Coordinator reviews the criticality assessment, completed by the 310 agency, to ensure:
 - a. All fields are completed fully and accurately.
 - b. Confirm DDD IMS eligibility conclusion through accessing the Alabama Waiting List Application Report.
12. Once eligibility has been positively determined, and the criticality assessment is reviewed and determined to be fully and accurately completed, the Waiver Coordinator will designate the person's Waiting List record in the DDD IMS as Approved, thus placing them on the Waiting List.
13. Upon approval for placement on a Waiting List, the Waiting List Coordinator will send to the applicant an Initial Eligibility Notification Letter. A copy of this notification will be recorded in the DDD IMS.
14. If an applicant is determined ineligible for Wait List for HCBS Waiver Services, a Wait List Denial Notification is sent, also known as a Notice of Adverse Action (NOA). The determining office will send a NOA along with the Appeal Request Form (ARF) to the applicant.
15. If the applicant feels the decision was made in error, they may appeal the decision by submitting the ARF or a written request (i.e. handwritten or typed statement, letter and/or email) requesting an appeal for an Informal Conference via email to ddoaca.dmh@mh.alabama.gov or by mail to:

Alabama Department of Mental Health
Office of Waiver Appeals
P.O. Box 301410
Montgomery, AL 36130-1410
16. More information on the appeals process can be found in Operational Guideline (O.G) Chapter Individual Rights- A.2 Appeals Process