



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: FAMILY SUPPORT EMERGENCIES AND PROGRAM TRANSFERS POLICY 4.06

Authority: RCW 71A.12.040
WAC 388-825-200 through 388-825-256

PURPOSE

This policy clarifies the current procedures for granting exceptions to policy (ETPs) for individuals using family support services and for individuals transferring between programs.

SCOPE

This policy applies to all regional field services offices and outstations.

POLICY

- A. Requests for ETPs to Exceed Short-term Intervention Amount
1. Review the situation to see if the person qualifies for serious need. If the person does not qualify, review the following factors:
 - a. Is the requested service or item related to the individual's disability?
 - b. Is the item or service one that is used by a typically developing child?
 - c. Is the item or service part of an active therapeutic program?
 - d. Is funding available to cover the cost?
 2. The request must be reviewed and approved by the regional administrator.

B. Emergency Requests

All emergency requests must be reviewed and approved or denied at the local level by the regional administrator or designee. This includes, but is not limited to:

1. Emergency requests from individuals on the family support waiting list who are not currently getting any family support services. Persons living with their family who are not receiving family support services may be considered for emergency funding; and
2. Emergency requests for an increase in service from individuals who are current family support recipients. Requests exceeding serious need or service need level lids are covered below in Sections D and E.

C. Requests to Exceed Community Guide Hours

A request to exceed the designated amount for community guide services in any year is an exception to policy. The ETP must be reviewed by the regional administrator or designee and a decision made based on:

1. The circumstances of the family; and
2. The amount of available funding.

D. Requests to Exceed Serious Need Maximum Levels

Requests to exceed the maximum amount for serious need are reviewed by the regional administrator and forwarded to the division director for approval or denial.

E. Requests to Exceed the Service Need Level Lids

ETP requests to exceed the lid must be reviewed by the regional administrator and submitted to the division director for approval or denial. All ETPs must be reviewed annually. This does not apply to individuals whose original ETP was submitted for the May through July 1992 authorization period.

F. Requests for Family Support From Individuals Who Have Been Receiving But Are Not Currently Eligible for Medicaid Personal Care (MPC)

If the individual was receiving traditional family support services and was later transferred to MPC and subsequently lost eligibility for MPC, proceed as follows:

1. Consider the individual immediately eligible for ongoing family support services. No ETP is necessary;
2. Complete a family support form and establish the service need level;
3. Establish a family support authorization either at the level the individual was receiving from MPC, or at the maximum for the individual's service need level, whichever is less; and
4. Consider adding person to the CAP Waiver.

G. Requests from Individuals Whose Family Support Services Have Been Interrupted

If the individual was receiving family support and subsequently stopped using the service and now needs the service, family support may be authorized if the reason for stopping the service was:

1. The child went into the Voluntary Placement Program or Children's Administration Placement; or
2. Providers were not available.

H. Requests From Individuals Who Have Previously Received Private Duty Nursing Through the Medically Intensive Home Care Program (MIHCP) or Who Currently Need Licensed Nursing Services

1. Individuals who are no longer medically eligible for services through the MIHCP and have requested family support services to be able to keep their child in the home may be added to the Family Support Opportunity.
2. Individuals who have been receiving a specified number of hours of family support services, and whose medical care needs change to needing licensed nursing care, may be addressed as follows:
 - a. If the person is on the Traditional Family Support program, revise the family support form and establish the service need level; and
 - b. Authorize the same amount of funding the person has been receiving, and the family can choose to spend that amount on licensed nursing care; or

TITLE:

FAMILY SUPPORT EMERGENCIES AND
PROGRAM TRANSFERS

POLICY 4.06

- c. Submit an ETP requesting a continuation of the same number of hours of family support to the division director, with a change in the level of funding to provide licensed nursing support;
- d. If the individual is on the Family Support Opportunity, submit a request for serious need funding; or
- e. The Medically Intensive Home Care Program (MIHCP) covers all private duty nursing hours when the child is in that program.

I. Family Support Services Termination

Family support services must be terminated when:

- 1. Residential support is authorized for the person;
- 2. The person moves into a residential placement and no longer lives with a family member; or
- 3. The person goes to the Voluntary Placement Program.

SUPERSESSSION

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Approved: /s/ Linda Rolfe
Acting Director, Division of Developmental Disabilities

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