

EXPLANATION OF SERVICES AND SUPPORTS

The following information includes a brief description of mental retardation services and supports provided by the Texas Department of Aging and Disability Services (DADS). Many of the following services and supports have an interest list because they are not currently available. If a particular service or support is desired, it is recommended that the individual's name be added to the interest list as early as possible. If an individual is currently receiving a particular service or support, his or her name can be added to the interest list for other services and supports.

Information about these services and supports can also be found at www.dads.state.tx.us. On the left side of the screen, click on "Mental Retardation," click on "Information for Persons with Mental Retardation," and then click on "Available services." If you would like more information about services and supports such as a listing of providers in your area, please contact a representative of your local mental retardation authority (MRA). You can find the MRA in your area by accessing the website listed above.

Services and Supports Provided Through DADS

The following information includes a description of a variety of services and supports, organized by funding (general revenue or state funded and Medicaid) and by program type. The following listing includes a range of services and supports – from community-based services and supports which enable an individual to remain in his or her own or family home to residential services in which the individual resides in a structured setting that provides 24-hour supervision.

General Revenue (GR) Funded Services

GR-funded services are intended primarily to assist an individual to remain in his or her own or family home. These services are provided by or through a local MRA. With the exception of "determination of eligibility for mental retardation services and supports," in order to receive GR funded services, an individual who resides in the MRA's service area must:

- have mental retardation, which is based on:
 - a measure of the individual's intellectual functioning (i.e., IQ);
 - a determination of the individual's adaptive behavior level (ABL); and
 - evidence of the disability originating during the individual's developmental period (i.e., before 18 years of age);
- have a pervasive developmental disorder (e.g., autism);
- be a nursing facility resident who is eligible for specialized services for mental retardation or a related condition pursuant to §1919(e)(7) of the Social Security Act; or
- be a child who is eligible for early childhood intervention (ECI) services.

Determination of Eligibility for Mental Retardation (MR) Services and Supports:

This service is an assessment (or endorsement of an assessment) conducted in accordance with state law and DADS rules to determine if an individual has mental retardation or is a member of the DADS mental retardation priority population. The assessment uses standardized tests to determine an individual's IQ and ABL and is conducted by a qualified professional. An assessment (or endorsement) typically includes an interview with the individual, the individual's legally authorized representative (LAR), or, if the individual doesn't have an LAR, other persons who are actively involved with the individual. This service also may be requested as part of a formal petition for guardianship.

Service Coordination: Service coordination is a service that provides assistance for an individual in accessing medical, social, educational, and other appropriate services and supports that will help the individual achieve a quality of life and community participation acceptable to the individual. Service coordination is provided by an MRA staff person who is typically referred to as a service coordinator.

Community Support: Community supports are individualized activities that are consistent with the individual's person-directed plan and provided in the individual's home and at community locations, (e.g., libraries and stores). Supports include:

- habilitation and support activities that foster improvement of, or facilitate, an individual's ability to perform functional living skills and other daily living activities;
- activities for the individual's family that help preserve the family unit and prevent or limit out-of-home placement of the individual;
- transportation for an individual between home and the individual's community employment site or day habilitation site; and
- transportation to facilitate the individual's employment opportunities and participation in community activities.

Respite: Respite is either planned or emergency relief that is provided to the individual's unpaid caregiver on a short-term basis when the caregiver is temporarily unavailable. Respite is provided by trained staff and can occur in the individual's home or another location. If enrolled in other services, the individual continues to receive those services and supports as needed during the respite period.

Employment Assistance: Employment assistance provides assistance to an individual in locating paid, individualized, competitive employment in the community, and includes:

- helping the individual identify employment preferences, job skills, work requirements and conditions; and
- prospective employers offering employment compatible with the individual's identified preferences, skills, and work requirements and conditions.

Supported Employment: Supported employment is provided to an individual who has paid, individualized, competitive employment in the community (i.e., a setting that includes non-disabled workers) to help the individual sustain that employment. It includes individualized support services consistent with the individual's person-directed plan as well as supervision and training.

Nursing: Nursing is provided to an individual who requires treatment and monitoring of health care procedures that are:

- prescribed by a physician or medical practitioner; or
- required by standards of professional practice or state law to be performed by licensed nursing personnel.

Behavioral Support: Behavioral supports by professionals with required credentials are specialized interventions to assist an individual to increase adaptive behaviors and to replace or modify maladaptive behavior that prevent or interfere with the individual's inclusion in home and family life or community life. Supports include:

- assessing and analyzing assessment findings so that an appropriate behavior support plan can be designed;
- developing an individualized behavior support plan consistent with the outcomes identified in the individual's plan of services and supports;
- training and consulting with family members or other providers and, as appropriate, the individual; and
- monitoring and evaluating the success of the behavioral support plan and modifying the plan as necessary.

Specialized Therapies: Specialized therapies are:

- assessment and treatment by licensed or certified professionals for social work services, counseling services, occupational therapy, physical therapy, speech and language therapy, audiology services, dietary services, and behavioral health services other than those provided by a local mental health authority pursuant to its contract with the Department of State Health Services (DSHS); and
- training and consulting with family members or other providers.

Vocational Training: Vocational training is a day training service provided to individuals in an industrial enclave, work crew, sheltered workshop, or affirmative industry setting to enable them to obtain employment.

Day Habilitation: Day habilitation is assistance with acquiring, retaining, or improving self help, socialization, and adaptive skills necessary to live successfully in the community and to participate in home and community life. Individualized activities are consistent with achieving the outcomes identified in the individual's person-directed plan and are designed to reinforce therapeutic outcomes targeted by other service components, school, or other providers. Day habilitation is normally provided in a group setting (not in the individual's residence) on a regularly scheduled basis and includes personal assistance for an individual who cannot manage his or her personal care needs during day habilitation and assistance with medications and the performance of tasks delegated by a registered nurse in accordance with state law.

In Home Family Support (IHFS) – IHFS is a program that disburses assistance (i.e., money) to eligible individuals and families to pay for services or items that meet a need that exists solely because of the individual's mental disability or co-occurring physical disability and which allows the individual to maintain or improve his or her ability to live in the community. Annual assistance of up to \$2,500 can be used to pay for specialized

equipment, home modifications, medical services, personal attendant services, training, and respite.

Medicaid ICF/MR Program

ICF/MR Program (Intermediate Care Facilities for Persons with Mental Retardation):

An ICF/MR, which may be operated by a private or public entity, provides residential and habilitative services, medical services, skills training, and adjunctive therapies with 24-hour supervision and coordination of the individual program plan. These residential facilities range from six beds to several hundred beds for persons who have mental retardation or a condition related to mental retardation (related condition).

The two categories of ICF/MR are:

- State Mental Retardation Facilities – There are thirteen campus-based ICF/MR facilities located across the state. These facilities (also known as state schools or state centers) serve approximately 100 to 600 individuals. Staff focus on providing intensive and specialized residential services for individuals with severe or profound mental retardation and those individuals with mental retardation who are medically fragile or who have behavioral problems. Although the ICF/MR Program criteria include individuals with a related condition only, state law limits admissions to state mental retardation facilities to individuals with mental retardation.
- Community-Based ICF/MR – These are community-based residences for individuals who have:
 - mental retardation;
 - an IQ of 75 or below with a related condition originating prior to 22 years of age; or
 - a related condition with moderate to extreme problems with behavioral and medical issues.

The owner/operator of each community-based ICF/MR may determine for its facility, additional specific admission criteria. Although the MRA maintains a list of the names of individuals interested in receiving services and supports (including ICF/MR services) in the MRA's service area, each community-based ICF/MR can maintain its own interest list. The individual may select a particular ICF/MR; however, the ICF/MR must have a vacancy and the ICF/MR provider must agree to the individual's admission into the ICF/MR. Community ICFs/MR vary in size as follows:

- Small Community ICF/MR – serves up to eight individuals;
- Medium Community ICF/MR – serves between nine and 13 individuals; and
- Large Community ICF/MR – serves 14 or more individuals.

Information about current vacancies at ICFs/MR can be found at www.dads.state.tx.us. On the left side of the screen, click on "Mental Retardation," click on "Information for Persons with Mental Retardation," and then click on "Find an ICF/MR and search for vacancies."

Medicaid Waiver Programs

Medicaid home and community-based waiver programs provide services and supports to persons with mental retardation who live in their own or their family's home or in other

home-like settings in the community. (They are called "waivers" because certain ICF/MR requirements are "waived.")

In most situations an individual who is eligible for the ICF/MR Program is also eligible to participate in one of the waiver programs. An important and distinguishing feature of funding provided in the waiver programs is the funding's ability to move with the individual to any part of the state. For example, if an individual enrolled in a waiver program in Houston, then moves to El Paso, he or she can continue to participate in the waiver program in El Paso. An individual also can change providers within the same city or area of the state.

Public or private entities may provide waiver program services and supports. DADS certifies all waiver providers initially and then reviews each provider at least annually to ensure the provider continues to meet the program certification principles.

The two waiver programs are:

- Home and Community-based Services (HCS) Program: The HCS Program provides services to individuals with mental retardation who live with their family, in their own home, in a foster/companion care setting, or in a residence with no more than four individuals who also receive services. The HCS Program provides services to meet an individual's needs so that he/she can maintain him/herself in the community and have opportunities to participate as a citizen to the maximum extent possible. Services consist of case management, adaptive aids, minor home modifications, counseling and therapies, dental treatment, nursing, residential assistance, respite, day habilitation, and supported employment. In the HCS Program, individuals pay for their room and board either with their SSI check or other personal resources. There is a limit to the yearly cost of services provided through the HCS Program.
- Texas Home Living (TxHmL) Program: The TxHmL Program provides essential services and supports so that individuals with mental retardation can continue to live with their families or in their own homes in the community. TxHmL services are intended to supplement instead of replace the services and supports an individual may receive from other programs, such as the Texas Health Steps Program, or from natural supports such as his or her family, neighbors, or community organizations. Services consist of community support, nursing, adaptive aids, minor home modifications, specialized therapies, behavioral support, dental treatment, respite, day habilitation, employment assistance, and supported employment. Service coordination is provided to the individual by the MRA. TxHmL Program services are limited to a yearly cost of \$10,000 per participant.

If an individual's name is on the Interest list for the HCS Program, he or she may be offered an opportunity to enroll in the TxHmL Program. If the individual enrolls in TxHmL, his or her name will remain on the interest list for the HCS Program.

If an individual is offered an opportunity to enroll in either the HCS or TxHmL Program, the MRA will provide information about the applicable timelines for enrollment.

The following table is a description of the **ICF/MR Program**, the **HCS Program**, and the **TxHmL Program** that may be useful in understanding the differences and similarities between the programs:

Program Element	ICF/MR Program	HCS Program	TxHmL Program
Who's eligible?	<ul style="list-style-type: none"> ▪ Individual must be Medicaid eligible* ▪ Individual must have mental retardation or a related condition* 	<ul style="list-style-type: none"> ▪ Individual must be Medicaid eligible* ▪ Individual must have mental retardation or an IQ of 75 or below with a related condition* ▪ Total annual cost for services is limited to a percentage of an annual ICF/MR reimbursement rate 	<ul style="list-style-type: none"> ▪ Individual must be Medicaid eligible* ▪ Individual must have mental retardation or an IQ of 75 or below with a related condition* ▪ Total annual cost for services may not exceed \$10,000
How is a provider selected?	The individual may select a particular ICF/MR; however, the ICF/MR must have a vacancy and the ICF/MR provider must agree to the individual's admission into the ICF/MR	The individual may select any provider that serves the area in which the individual lives or intends to live. If the individual moves to another area in Texas, then the individual may select any provider that serves the area in which he or she has relocated. The waiver program provider is required to serve any individual who selects that provider. **	
What's paid for?	Rates pay for the cost of all services as well as room and board and basic personal care items ***	Rates pay for all services, but do not pay the cost of room and board or any personal care items, which must be paid by the individual's SSI or personal funds ***	
Where must the individual live? Who else would live there?	<ul style="list-style-type: none"> ▪ The individual must reside in the ICF/MR ▪ The number of individuals served by an ICF/MR can range from six to several hundred 	Individual must reside: <ul style="list-style-type: none"> ▪ in own home; ▪ in his or her family's home; ▪ in a foster/companion care setting; or ▪ in a program residence that has no more than four residents 	Individual must reside: <ul style="list-style-type: none"> ▪ in own home; or ▪ in his or her family's home
When would staff be available?	Program provides staff 24 hours per day	Staff availability depends on the needs of the individual and where he or she lives	Staff availability depends on the needs of the individual and the total cost of services

* Specific eligibility criteria are described in 40 TAC Chapter 9, Subchapter E governing ICF/MR Programs -- Contracting; 40 TAC Chapter 9, Subchapter D governing HCS; and 40 TAC Chapter 9, Subchapter N governing TxHmL.

** Providers who are operating at their contracted capacity level are not required accept additional individuals.

*** For a Medicare beneficiary in ICF/MR, HCS, or TxHmL, all prescription medications are provided through the Medicare Prescription Drug Program. Individuals in the HCS or TxHmL Program are responsible for minimal co-payments.

Person-Directed Planning

When an individual is offered mental retardation services and supports, the MRA uses a person-directed planning process to develop an individualized plan of services and supports. This process empowers the individual and the individual's family to direct the development of a plan that meets the individual's goals. The process:

- identifies existing supports and services necessary to achieve the individual's goals;
- identifies natural supports available to the individual and negotiates needed services and supports;
- occurs with the support of a planning team that consists of people chosen by the individual and the individual's family; and
- mirrors the way in which people without disabilities make plans.

Information about these services and supports can also be found at www.dads.state.tx.us. On the left side of the screen, click on "Mental Retardation," click on "Information for Persons with Mental Retardation," and then click on "Available services."

Additional information about person-directed planning can be obtained from the MRA or found at: www.dads.state.tx.us. On the left side of the screen, click on "Mental Retardation" and then click on "Information for Mental Retardation Providers." Scroll down and on the left side of the screen click on "Person Directed Planning and Family Directed Planning Guidelines for Individuals with Mental Retardation."

Permanency Planning for an Individual Under 22 Years of Age

In Texas, a family-based setting is the preferred living arrangement for an individual under 22 years of age because that individual is more likely to reach his or her potential with the support of a sustained, long-term relationship. The process by which state agencies promote this type of living arrangement is called "permanency planning." Permanency planning refers to a philosophy and planning process that focuses on achieving the outcome of family support for an individual under 22 years of age by facilitating a permanent living arrangement that includes an enduring and nurturing parental relationship.

Texas law requires permanency planning for all individuals under 22 years of age who are placed in an institution, such as an ICF/MR or HSC program residence. Permanency planning is intended to remove barriers that prevent an individual from living in the family home or own home. If this is not possible, the next preferred living arrangement is with another family. In those cases, on-going involvement of the birth family is desired and supported (except in cases in which a court of law has restricted parental involvement).

An individual under age 22 years will not be required to move to another setting without the support and approval of the individual's parent or guardian. The intent of permanency planning is not to replace the parent's or guardian's choice or decision-making authority. Additionally, the state will not support an individual's move from the

institution without adequate community services and supports in place for the individual and family.

The permanency planning process and requirements ensure that families have ongoing opportunities to consider all options of care available and to have the information necessary to select the supports and services that are in the best interest of the individual.

Additional information about permanency planning can be obtained from the MRA or found at:

<http://www.dads.state.tx.us/business/pi/permanancy/index.html>

http://www.hhsc.state.tx.us/si/C-LTC/ltc_home.html

Selecting a Provider of Services and Supports

After you identify your preferred services and supports and it is determined that they are available, a provider must be selected. In most areas of the state, there is a choice of providers for the services and supports described in this document. It is important that you visit with different providers in order to gather information that will assist you in making a selection. The number of providers you choose to contact is your decision, but in most cases it is helpful to talk with more than one.

You may consider asking potential providers some of the following questions. Not all questions may be pertinent to your personal situation but they may assist you in formulating your own set of questions. You are encouraged to add or delete questions to fit your situation.

1. What is your agency's mission statement or philosophy? Why does your agency provide services and supports to individuals with mental retardation (MR) or developmental disabilities (DD)?
2. How long has your agency been a provider? What areas of the state does your agency currently serve?
3. Do you own or lease your residential home(s)? If you lease, is it a short-term or long-term lease?
4. How many individuals receive services and supports from your program at the current time? What is the maximum number of individuals the program can serve?
5. Do you have a list of families or individuals willing to share with me their experiences with your agency?
6. What type of experience does your staff have serving an individual with *[fill in the blank as appropriate, for example, MR, autism, mental illness]*?
7. How do you ensure that staff are trained and prepared before working with individuals?
8. Does your staff receive training in serving individuals with *[fill in the blank as appropriate, for example, MR, autism, mental illness]*? Can you provide records for staff training specific to *[fill in the blank as appropriate e.g., MR, autism, mental illness]*?
9. How often does staff turnover, especially direct care staff?

10. Do you require pre-employment screenings prior to hiring staff (e.g., drugs, criminal background, abuse and neglect)?
11. What types of emergencies or crisis situations are staff trained to handle?
12. What is your staff-to-individual ratio?
13. For medical or dental issues, do you have staff on site or on call?
14. What type of licensure or credential is required for staff?
15. Describe ways in which you involve an individual and family members in the development of an individual's program plan. How are their preferences addressed if they differ from the goals of your agency?
16. What choices are provided with regard to day programming, vocational training, supported employment, etc.?
17. Describe how staff assist an individual to learn daily living skills.
18. What types of items used by an individual are purchased by your agency? What types of items are not purchased by the agency?
19. If an individual enrolled in the program has behavior problems, do you develop a formal plan to manage those behaviors? If so, does that plan have to be approved by a special committee or an outside professional (e.g., a psychiatrist)? If a special committee is used, does it include outside members, professionals, parents, and individuals?
20. What are your policies regarding visitors and privacy?
21. Does an individual choose his or her daily routine?
22. What types of leisure and recreational activities are available?
23. How does your program accommodate a non-ambulatory individual?
24. Do you have staff fluent in other languages or other types of communication (e.g., sign language)? If not, is an interpreter available?
25. What type of transportation is available for an individual? Is it reliable and readily available?
26. Is staff available to support an individual to participate in activities in the community (e.g., leisure activities, sports, and religious services)?
27. How and where is an individual cared for when ill?
28. Is medical staff willing to practice with an individual who is uncomfortable with a medical or dental procedure?
29. Will the individual be able to live in close proximity to *[fill in the blank as appropriate e.g., current school, day program, place of employment, family]*?
30. How does your agency build community awareness and prepare neighborhoods about individuals with MR or DD who may move into their neighborhood? How are neighborhood disputes handled?
31. If the individual or the individual's family member is unhappy with a provider-related issue, what is the process to make a complaint?
32. Have allegations about abuse or neglect been made about your program? Have any been confirmed?

Provider Survey and Certification Information

Certification principles that HCS and TxHmL program providers must comply with can be found in DADS rules governing these programs at: www.sos.state.tx.us. Click on "Texas Register" icon. On the left side of the screen click on "Texas Administrative

Code." In the box on the low right screen, click on "TAC Viewer." At the bottom of the screen, click on "Title 40 Social Services and Assistance." Click on "part 1 Department of Aging and Disability Services." Click on "Chapter 9," then:

- for HCS provider certification principles, click on "Subchapter D," then click on §§9.172-9.178.
- for TxHmL provider certification principles, click on "Subchapter N," then click on §§9.578-9.580.

To request copies of survey documents, which include investigations of complaints, or agency literature such as directories, regulations, or publications, call 1-800-458-9858 and follow the voice prompts.

Every licensed ICF/MR is required to post in its facility its most recent survey report and a notice that survey and related reports are available for public inspection.

Information about ICF/MR licensing and certification, as well as reviews, surveys and enforcement process can be found at:

http://www.dads.state.tx.us/business/ltr/mr/mr_license.html

Agencies that investigate abuse, neglect and exploitation in mental retardation programs can be found at:

http://www.dfps.state.tx.us/Contact_Us/hotlines.asp

http://www.dads.state.tx.us/news_info/report_problems.html

Other Services and Supports

DADS provides other community-based services through the programs listed below. More information about these programs can be found at www.dads.state.tx.us. On the left side of the screen, click on "Mental Retardation," click on "Information for Persons with Mental Retardation," and click on "Available services." Scroll down to "Other Community-based Services."

- **Medically Dependent Children Program (MDCP)** offers home and community-based services to medically dependent children and young adults (under 21 years of age) as an alternative to a nursing facility. MDCP is designed to provide respite, adjunct support services, adaptive aids, and minor home modifications in support of families caring for their minor children and young adult children with disabilities. A statewide interest list for MDCP is maintained. Services are provided to a limited number of eligible individuals on a first-come, first-serve basis. For more information, call 1(877) 438-5658.
- **Community Living Assistance and Support Services (CLASS) Program** provides home and community-based services to both children and adults with a related condition, which is a disability, other than mental retardation, that originated before age 22 years and that affects the ability to function in daily life. Services include respite, nursing services, adaptive aids and medical supplies, minor home modifications, case management, and other related services, offering a cost-

effective alternative to an ICF/MR. CLASS is available only in certain geographic areas in the state. For more information, call 1(877) 438-5658.

- **Community-Based Alternatives (CBA) Program** provides home and community-based services to aged and disabled adults (21 years of age or older) as a cost-effective alternative to institutional care in a nursing facility. Services include respite, nursing services, adaptive aids and medical supplies, minor home modifications, home delivered meals, adult foster care, assisted living/residential care services, emergency response services, prescription drugs, case management, and other related services. For more information contact your local DADS CCAD Office. Information about how to find the DADS CCAD Office nearest to you can be found at: www.txstars.net/servlet/HSGServlet?page=Home. Look for the "TDHS Office Locator" on the lower left side of the screen and enter the zip code of the person interested in services and click "GO." Select the office that offers "Community Care for the Aged and Disabled" (CCAD) services.
- **Deaf-Blind Multiple Disabilities Program** serves adults (18 years of age and older) who are deaf and blind and who have another disability that has resulted in a demonstrated need for daily habilitation services. The program is provided statewide as a cost-effective alternative to ICF/MR institutional placement. Services include adaptive aids and medical supplies, assisted living (in settings that serve no more than 6 individuals), behavior communication services, case management, habilitation, minor home modifications, respite, nursing services, prescription drugs, and other related therapies. To apply for services, call 1(877) 438-5658 and ask for the DB-MD waiver program.

Department of Assistive and Rehabilitative Services (DARS)

DARS helps individuals prepare for, find, and keep employment. Individuals with a physical or mental disability that results in a substantial impediment to employment are eligible. Vocational rehabilitation services include supported employment, extended rehabilitation services, and transition planning. Call 1(800) 628-5115 or visit the web at: <http://www.dars.state.tx.us/>

DARS also provides support to families with children (from birth to 3 years of age) with disabilities or developmental delays through Early Childhood Intervention (ECI) Services. More information is available by calling 1(800) 250-2246 or by visiting the web at: <http://www.dars.state.tx.us>

For Additional Information

After reviewing this information, you may have questions or concerns. You are encouraged to visit with your MRA representative in person. You may find it useful to speak with individuals who are currently receiving services as well as their family members. If you would like to do this, your MRA representative can assist you. Additionally, there are a variety of organizations that provide advocacy and information to individuals with mental retardation and their family members. The following alphabetical listing is offered for your convenience:

<p>Advocacy, Incorporated 7800 Shoal Creek Blvd., Suite 171-e Austin, TX 78757 (512) 454-4816 -- 8 am - 5 pm 1-800-252-9108 -- 12:30 pm - 5 pm (M W F) 12:30 pm - 8 pm (T Th)</p>	<p>Texas Center for Disabilities Studies 4030-2 W. Braker Lane Austin TX 78759-5329 1- 800-828-7839 http://uap.edb.utexas.edu</p>
<p>DADS Consumer Rights and Services 1-800-458-9858</p>	<p>Texas Council for Developmental Disabilities 6201 E. Oltorf, Suite 600 Austin, TX 78741-7509 1-800-262-0334 http://www.txddc.state.tx.us</p>
<p>EveryChild, Inc. 4107 Spicewood Springs Rd, Suite 216 Austin, TX 78759 (512) 342-8844</p>	<p>The Arc of Texas (and Texas Advocates) 8001 Centre Park Drive, Suite 100 Austin, TX 78754 1-800-252-9729 http://www.thearcoftexas.org</p>
<p>Parent Association for the Retarded of Texas, Inc. (PART) P.O. Box 9733 Austin, TX 78766-9733 http://www.partoftx.org</p>	<p>United Cerebral Palsy of Texas 5555 N. Lamar, #L-139 Austin, TX 78751 1-800-1492 http://www.ucptexas.org</p>