Iowa Medicaid
IOWA HHS

INFORMATIONAL LETTER NO. 2518-MC-FFS

DATE: December 27, 2023

TO: Home- and Community-Based Services (HCBS) Waiver, Case Managers, Targeted Case Managers (TCM), Integrated Health Home (IHH), Care Coordinators, Community-Based Case Managers (CBCM)

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Health and Human Services (HHS), Iowa Medicaid

RE: Changes to the HCBS Children's Mental Health (CMH) Waiver

EFFECTIVE: October 1, 2023

Pursuant to the authority of Iowa Code section 249A.4, HHS has renewed the 1915(C) HCBS CMH Waiver. As part of the renewal, the Department has made the changes listed below to the CMH Waiver. These changes are effective October 1, 2023.

Amendment	**What this means.**
Removes the prohibition on children in foster care applying for the CMH Waiver.	Children in Foster Care residing in a foster family home are considered as residing in the family home and may apply for the CMH Waiver.
Adds 20 additional reserved capacity slots under the CMH Waiver.	Additional children transitioning out of institutional settings will have access to a CMH Waiver funding slot.
Adds qualified residential treatment programs (QRTP) to the list of eligible "institutional" settings to the reserved capacity slot criteria under the CMH Waiver.	This means that children who are placed in a QRTP and are preparing to transition to home or a foster family home may request a

	reserved capacity slot under the CMH Waiver.
Adds the Waiver Priority Needs Assessment to the CMH Waiver.	This means that children who have applied for the CMH Waiver and have been placed on the CMH Waiver waitlist and have an emergent or urgent need for waiver services to otherwise avoid institutionalization may complete form 470-5795 Waiver Priority Needs Assessment (WPNA) and submit it to the Department for consideration of waitlist prioritization. Children meeting the Emergent or Urgent Need Criteria will have their names moved up the CMH Waiver waitlist based on the date of the request and number of emergent and or urgent criteria met. Waitlist prioritization does not guarantee access to the CMH Waiver. The following criteria must also be met: ▪ A funding slot must be available; and ▪ The applicant must be financially eligible; and ▪ The applicant must be under the age of 18; and ▪ The applicant must have psychological documentation that substantiates a mental health diagnosis of serious emotional disturbance (SED) as determined by a mental health professional must be current within the 12-month period before the application date; and ▪ The applicant must have a Serious Emotional Disturbance (SED) diagnosis and have needs that would otherwise be met in a Psychiatric Medical Institution for Children (PMIC) were it not for the waiver.

Adds medical day care for children as a service under the waiver.	This means that children (aged 0-18) residing in their family home who, because of their complex medical or complex behavioral needs, require specialized exceptional care that cannot be served in traditional childcare settings may request this service. For additional information refer to Informational Letter No. 2468-MC-FFS[1]
Added telehealth as a service delivery option for in home family therapy.	This means that CMH Waiver members may receive this service via Telehealth. Providers delivering this service via the Telehealth service delivery option must demonstrate policies and procedures that include: •Health Insurance Portability and Accountability Act (HIPAA) compliant platforms; •Client support given when client needs, includes: accessibility, translation or limited auditory or visual capacities are present; •Have a contingency plan for provision of services if technology fails; •Professionals do not practice outside of their respective scope; and •Assessment of clients and caregivers that identifies a client's ability to participate in and outlines any accommodations needed while using Telehealth.
Updated definition of major and minor incidents.	This means that major incidents that involve a member receiving HCBS must be reported. "Major Incidents" are defined as an occurrence involving a member that is enrolled in an HCBS waiver, targeted case

[1] https://secureapp.dhs.state.ia.us/IMPA/Information/Bulletins.aspx

	management or habilitation services, and that: (1) results in a physical injury to or by the member that requires a physician's treatment or admission to a hospital; (2) results in the death of any person; (3) requires emergency mental health treatment for the member; (4) requires the intervention of law enforcement; (5) requires a report of child abuse pursuant to Iowa Code section 232.69 or a report of dependent adult abuse pursuant to Iowa Code section 235B.3; (6) constitutes a prescription medication error or a pattern of medication errors that leads to the outcome in paragraph "1," "2" or "3"; or (7) involves a member's location being unknown by provider staff who are assigned protective oversight. "Minor Incidents" are defined as an occurrence involving a member who is enrolled in an HCBS waiver, targeted case management or habilitation services, and that is not a major incident and that: (1) results in the application of basic first aid; (2) results in bruising; (3) results in seizure activity; (4) results in injury to self, to others or to property; or (5) constitutes a prescription medication error.

	For additional information refer to Informational Letter No. 2128-MC-FFS[2] and Informational Letter No. 2480-MC-FFS[3]

Please submit any questions regarding this IL to HCBSwaivers@dhs.state.ia.us.

[2] https://secureapp.dhs.state.ia.us/IMPA/Information/Bulletins.aspx
[3] https://secureapp.dhs.state.ia.us/IMPA/Information/Bulletins.aspx