

INTRODUCTION

Before 1981, when a person with mental retardation or a related condition and their family needed services or supports, the options were limited. Medicaid funding was only available to pay for services in Intermediate Care Facilities for the Mentally Retarded (ICFs/MR), which includes state Regional Treatment Centers (RTCs) and group homes. In order to help a person remain in their family home or other individualized community settings, changes needed to be made in the way states could use money from Medicaid to pay for services.

In 1981, the federal government passed the Omnibus Budget Reconciliation Act which created the Title XIX Home and Community-Based Services Program. This act allows the Department of Health and Human Services to waive traditional Medicaid requirements and is referred to as the "waiver," and the services it pays for as "waivered services." The Act allows states the option of applying for a waiver to use Medicaid funds to provide home and community-based services as an alternative to institutional care including ICFs/MR or group homes, regional treatment centers, hospitals and nursing facilities. In 1984, Minnesota began its home and community-based services program for persons with mental retardation and related conditions, also referred to as the Mental Retardation and Related Conditions (MR/RC) Waiver.

The goals of the waiver are to provide the necessary services and support which are meaningful to the person receiving the services, respectful of the person's beliefs and customs, and are also cost-effective. Waivered services are different from institutional care services in that they are uniquely developed based on individual needs, and are available or can be developed in their community. Waivered services help a person to become involved in and develop relationships in the community where he or she lives and works, and to develop skills to be as independent as possible. Waivered services may also be modified at any time when the needs of the person change.

To meet these needs, the MR/RC Waiver provides a variety of services to persons who meet the following eligibility requirements:

1. Have mental retardation or a related condition
2. Require a 24-hour plan of care
3. Be a resident of an ICF/MR or need the level of services found in an ICF/MR if waiver services were not available
4. Meet income and asset requirements for Medical Assistance (MA), including the deeming waiver for families with disabled children
5. Have made an informed choice requesting waiver services instead of ICF/MR services.

The services available through the MR/RC Waiver include:

Adult Day Care	Extended Personal Care Attendants
Assistive Technology	Homemaker Services
Caregiver Living Expenses	Housing Access Coordination
Caregiver Training and Education	In-Home Family Support
Case Management	Personal Support
Chore Services	Respite Care
Consumer Training and Education	Specialist Services
Consumer-Directed Support	Supported Employment Services
Crisis Respite	Supported Living Services
Day Training and Habilitation	24-Hour Emergency Assistance
Environmental Modifications	Transportation

A description of these services can be found in Attachment A.

The number of persons receiving waived services continues to grow. In 1984, there were less than 300 recipients. That number has grown to 2,115 persons in 1990, 6,989 in January 1999, and as of October 1, 1999, 7,352 person are receiving waived services.

