



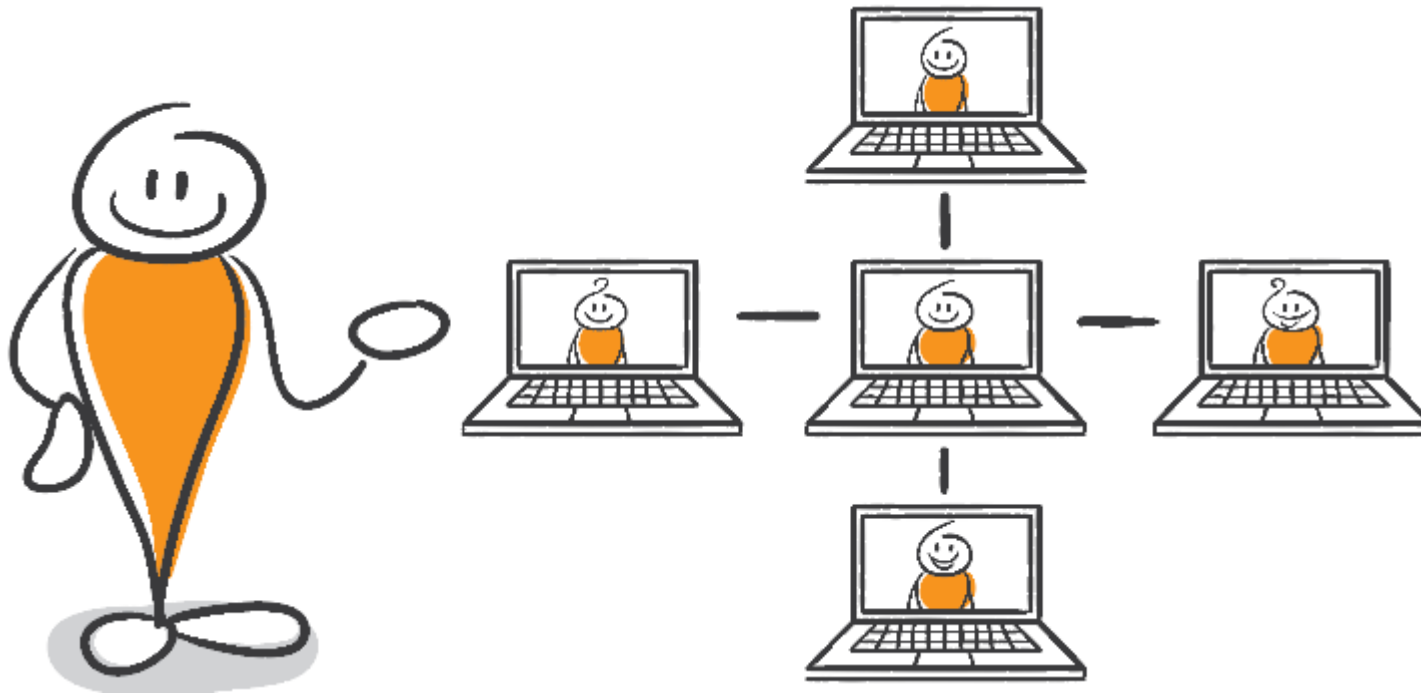
**DEPARTMENT OF
HUMAN SERVICES**

Building a Strong Foundation of Knowledge: Rule 185 and the Developmental Disabilities Waiver

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Introductions



- Intro
- MN Rule 9525 (Rule 185) Overview
- Rule 185 Case Management
- Rule 185 Case Management Eligibility
- Developmental Disabilities Waiver Overview
- Developmental Disabilities Waiver Eligibility
- Developmental Disabilities Waiver Case Management
- Resources and Tools

Learning objectives

After this session, learners will be able to:

- Summarize the history of MN Rule 9525 (Rule 185) and the Developmental Disabilities Waiver.
- Understand the purpose of MN Rule 9525 (Rule 185) and the Developmental Disabilities Waiver.
- Summarize the qualifications for eligibility for Rule 185 Case Management and Developmental Disabilities Waiver Case Management.
- Recognize the responsibilities of Rule 185 Case Managers and DD Waiver Case Managers.
- List some of the services supported by Rule 185 Case Management and availability under the DD Waiver.

Acronyms

- **CMS:** Centers for Medicare and Medicaid
- **CSG:** Consumer Support Grant
- **CSP:** Community Support Plan
- **CSSP:** Coordinated Services and Support Plan
- **DD:** Developmental Disabilities Waiver
- **DD/ RC:** Developmental Disabilities/ Related Conditions
- **DT&H:** Day Training and Habilitation
- **FSG:** Family Support Grant
- **HCBS:** Home and Community Based Services
- **ICF/DD Facility:** Intermediate Care Facilities for persons with Developmental Disabilities

Acronyms, continued

- **LTSS:** Long-Term Services and Supports
- **MA:** Medical Assistance
- **PCA:** Personal Care Assistant
- **QDDP:** Qualified Developmental Disabilities Professional
- **RC:** Related Conditions
- **SILS:** Semi-Independent Living Services
- **VA/DD TCM:** Vulnerable Adult/Developmental Disabilities Targeted Case Management
- [Online Glossary](#)



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An overview of MN Rule 9525 (Rule 185)

History of Rule 185 Case Management and the DD Waiver

- 1974 Developmental Disabilities Act passed by the US Congress
- Using federal guidelines, MN established Rule 185; Revised in 1991, to MN Rule 9525.
- Prior to 1983 the two major options for providing residential services for persons with DD/RC:
 - Regional Treatment Centers (RTCs)
 - Intermediate Care Facilities (ICF/DD)
- 1984 Developmental Disabilities (DD Waiver) approved by CMS



What does the law say?

- Lists the standards that govern services available to people with developmental disabilities and related conditions.
- Defines “developmental disability” and “related conditions”
- Defines the eligibility requirements for services and supports

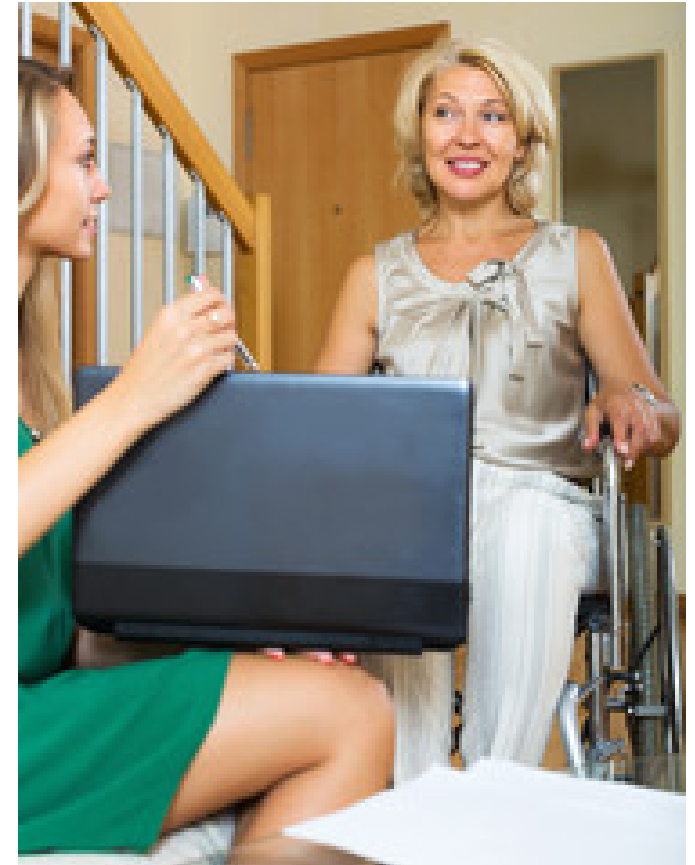


What does the law mean for people we serve?

- Defines whether a person is eligible for these services
- Provides access to and coordination of supports and services
- Supports people with developmental disabilities in living a better life

How does the law guide case managers?

- Defines the service of case management
- Defines the eligibility requirements for services and supports





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Rule 185 Case Management Eligibility

Eligibility for DD/Rule 185 Case Management

- There are two ways that a person can qualify for DD/Rule 185 case management:
 1. The diagnostic determination process determines that a person has a developmental disability *or*
 2. The diagnostic determination revealed a related condition that could potentially make the person eligible for Rule 185 case management services

What is a Qualified developmental disability professional (QDDP)?

Individual qualified to work as an expert with people with developmental disabilities or related conditions

- Four-year college degree in an area related to developmental disabilities and
- Minimum of one-year experience working in that field.
- Must be employed by a county or tribal nation

For the federal definition of a QDDP, see [42 CFR 483.430](#).

Diagnostic determination

The county or tribal nation QDDP will gather and review the person's:

- Diagnostic evaluation
- Social history
- Medical evaluation

What qualifies as a “comprehensive diagnostic evaluation?”

- Comprehensive diagnostic evaluation:
 - Standardized test of intellectual functioning and an assessment of adaptive skills, OR
 - For children under the age of five, standardized assessments of developmental functioning.



Information about the person's social and developmental history:

- When was the person diagnosed
- Previous and current support
- Factors that may have contributed to person's current functioning level
- Any supporting or contradicting information that the person had a developmental disability before the age of 22

Medical evaluation

- Medical evaluation of the person
 - The medical evaluation must be performed by a licensed physician no more than 12 months before the date of application for case management
- The medical evaluation must evaluate the individual's general health, including vision, hearing, and any physical or neurological disorders
- The case manager must request that the evaluation include the physician's comments on the individual's mental health and emotional well-being, if known

What is a Developmental Disability?

- **“Substantial functional limitations and significantly sub-average intellectual functioning...”**
 - **Substantial functional limitations:** long term inability to significantly perform an activity or task
 - **Significantly sub-average intellectual functioning:** full scale IQ score of 70 or less, based on assessment that includes 1 or more individually administered standardized intelligence tests developed for the purpose of assessing intellectual functioning.

“Developmental Disability” continued

- “... exists concurrently with demonstrated **deficits in adaptive behavior.**”
 - **Deficits in adaptive behavior:** significant limitation in a person’s effectiveness in meeting the standards of maturation, personal independence and social responsibility expected for the person’s age level and cultural group, as determined by clinical assessment and, generally, standardized scales
- All conditions are manifested before the person’s 22nd birthday.

“Developmental Disability” continued

- Questions to ask when determining if someone is eligible for DD/Rule 185 case management services:
 - Is the IQ score 70 or below? *And*
 - Was the condition present prior to the person’s 22nd birthday? *If no...*
 - Is there another condition is present? If so, move on to related conditions checklist.



Related Conditions Checklist

- [DHS Form 3848](#): Related Conditions Checklist, guides the process of determining if a person has a related condition.
- The form assists the QDDP:
 - Determines if the needed information has been collected and
 - Summarizes the results of the Assessments, history, level of functioning, and treatment needs

The related conditions checklist is completed annually

What is a “Related Condition?”

“Related condition” is a diagnosis of severe, chronic disability that meets all of the following conditions:

1. Is found to be closely related to developmental disability because the condition results in impairment of general intellectual functioning or adaptive behavior similar to that of persons with developmental disability and requires treatment or services similar to those required for persons with developmental disability

“Related Conditions” continued

2. Is manifested before the person reaches 22 years of age

3. Is likely to continue indefinitely



Areas of Functional Limitations

4. Results in substantial functional limitations in three or more of the following areas of major life activity:

- A. Self-care
- B. Understanding and use of language
- C. Learning
- D. Mobility
- E. Self-direction
- F. Capacity for Independent Living

Eligibility, Dual Diagnosis with Mental Health

- Questions to ask when determining if someone with a dual diagnosis is eligible:
 - Does person have a diagnosis that is primarily attributed to mental health (excluding autism)?
 - If deficits are not attributable to diagnosis, what other condition is present?

Dual Diagnosis with Mental Health, continued

- Is the person's adaptive behavior similar to that of someone with a developmental disability?
- Does the person require skill development or services similar to those needed by someone with a developmental disability?



Eligibility, Dual Diagnosis with Emotional Disturbance

- Questions to ask when determining if someone with a dual diagnosis is eligible:
 - Does person have a diagnosis that is attributable to an emotional disturbance (excluding autism)
 - If deficits are not attributable to diagnosis, what other condition is present?

Dual Diagnosis with Emotional Disturbance, continued

- Questions to ask:
 - Is the person's adaptive behavior similar to that of someone with a developmental disability?
 - Does the person require treatment or services similar to those needed by someone with a developmental disability?





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Rule 185 Case Management

Rule 185 Case Management



Case Managers support people living with DD/RC with gaining access to needed:

- Social
- Medical
- Educational
- Other supports & services

DD/Rule 185 Case Management Standards

Case managers must ensure:

- Informed choice
- Needed services and supports are identified and in place
- Cost-effective services and supports
- Continuity of services and supports
- Services monitored and delivered consistent with goals

DD/Rule 185 Case Manager duties

- Reasonably ensures medical, health and safety needs are met
- Meet with the person, at a minimum, twice per 12 month period
- Review DD Rule 185 case management eligibility, as needed
- Ensure MnCHOICES assessments occur timely (see [CBSM-Choice to waive an annual assessment](#))
- Complete the CSSP with the person annually
- Authorize services and supports as appropriate

Rule 185 Case Management Monitoring

- Case Managers are required to have a minimum of two face to face contacts per 12 month period.



Choice to waive an annual assessment on Rule 185

This policy allows a person to choose to waive the annual MnCHOICES reassessment when:

- There are no changes to his or her current, non-Medicaid funded support plan (including no changes to guardianship status)
- People who receive Rule 185 developmental disability or related condition (DD/RC) case management without any other services
- People who receive Rule 185 DD/RC case management with services not funded by Medicaid (e.g., SILS, county-paid DT&H).

When a person chooses to waive their annual assessment:

- A CSSP is required within 365 days of the date of the person's last CSSP

When a person chooses to have a MnCHOICES assessment:

- The CSSP is completed within 10 business days of receiving the person's CSP

Design and Delivery of Services

- According to [MN Rule 9525](#) these services are to be designed and delivered consistent with the following goals:
 - Recognize the person's history, dignity, and cultural background
 - Protect the person's civil and legal rights



Design and Delivery of Services, continued

AND

- Services and supports will:
 - Promote community inclusion and self-sufficiency
 - Provide services in the least restrictive environment
 - Promote social relationships, natural supports, and participating in community life
 - Allow for a balance between safety and opportunities
 - Provide opportunities for exercise of age-appropriate skills, decision-making and choice, personal advocacy and communication.

Access to services

- Some of the services that Rule 185 Case Management can assist a person in accessing are:
 - County-funded Day Training and Habilitation (DT&H)
 - Semi-Independent Living Services (SILS)
 - Family Support Grant (FSG)
 - Consumer Support Grant (CSG)
 - Personal Care Assistant (PCA)
 - Home Health Aide



DD/Rule 185 Case Management Funding

- **Adults** – Vulnerable Adult/Developmental Disabilities Targeted Case Management ([VA/DD TCM](#))
- **Children-** No funding source



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Developmental Disabilities Waiver

Rule 185 Case Management only vs DD Waiver



Rule 185

DD Waiver



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Developmental Disabilities Waiver Eligibility

DD Waiver Eligibility

1. Eligible for Medical Assistance (MA) based on a disability diagnosis
2. Have a developmental disability or a related condition as defined in MN Rule 9525.0016
3. Determined by the MnCHOICES assessment tool to meet the ICF/DD level of care criteria



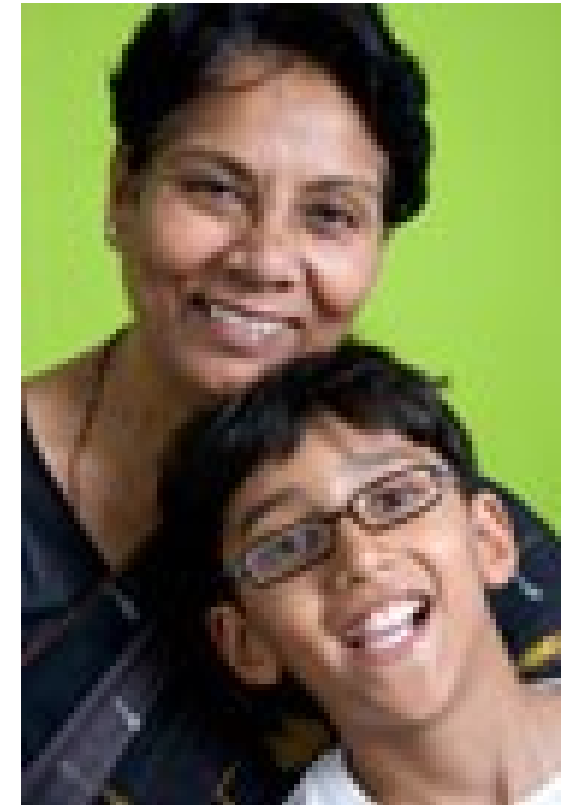
DD Waiver Eligibility

4. Require daily interventions, daily service needs and a 24-hour plan of care
5. Assessed to need a residential habilitation service
6. Have made an informed choice to use waiver services
7. Assessed need for supports and services



State Plan Medical Assistance

- The person must be on Medical Assistance
- The person's needs exceed what State Plan services can support. State Plan services include:
 - Personal Care Attendance
 - Home Health Aide
 - Skilled Nursing Services
 - Home Health Medical Supplies and Equipment



ICF/DD Level of Care

- Have a diagnosis of developmental disability or a related condition
- Require a 24-hour plan of care
- In need of continuous **active treatment**
- Require aggressive and consistent training due to an inability to apply skills learned in one environment to a new environment



Level of Care, DD Waiver



- Waiver requirements for level of care: Code of Federal Regulations 42, [Section 441.301](#)
- ICF/DD Level of Care, Defined in Code of Federal Regulations 42, [Section 440.150](#)

Active Treatment

Aggressive and consistent implementation of a 24-hour program of specialized and generic training, treatment, health services and related services.

- Acquisition of behaviors necessary for the person to function with as much self-determination and independence as possible
- Prevention or deceleration of regression or loss of current optimal functional status



Eligibility Requirement Definitions

24-Hour Plan of Care: Written plan that provides access to direct or indirect supports 24 hours a day.

Community Support Plan: A plan that is person-centered that documents the services a person will use to meet their needs in order to remain in or return to the community.

Informed choice: A choice a person makes that is based on the following: his or her likes, dislikes and community-based experiences; the potential impact(s) on his or her quality of life; and information about other available options he or she receives from his or her support system.



Assessed need for supports and services

- Does Rule 185 CM, State Plan Services, other non-waiver services currently meet your needs?
- What services under the DD Waiver would help support your unmet needs?
- Do you have natural, informal supports that would help support your unmet needs?

Residential Habilitation

- Services provided to a person who cannot live in his or her home without such services or who need outside support to remain in his or her home.
- Provided in the person's residence and in the community, and should be directed toward increasing and maintaining the person's physical, intellectual, emotional and social functioning.
- [Residential Habilitation CBSM Page](#)



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Developmental Disabilities Waiver Case Management

Waiver case manager responsibilities

- Supports initial/annual assessment process
- Develop support plan
- Referral and linkage
- Coordination
- Monitor / semi-annual visits
- Advocate



MnCHOICES Assessment

- Assessor completes the MnCHOICES Assessment
- Assessor indicates the person's support needs in the Community Support Plan (CSP)
- Assessor sends completed CSP, and Notice of Action to person and notifies case manager with MnCHOICES Reassessment Communication Form

Phase 2: Meet with Person to Develop a Support Plan

Meet with person to develop a support plan

(Phases 2-4 can be completed interchangeably)

- Case Manager reviews the CSP to obtain information about the most current assessment
- Case Manager meets with person to:
 - Review the Community Support Plan (CSP) and prior Coordinated Service and Support Plan (CSSP) and discuss support needs and preferences
 - Identify services and support options that match person's assessed needs, stated goals and preferences
 - Completes necessary Lead Agency Documentation/Forms
- Case Manager develops the CSSP, pending provider service authorization

Phase 3: Coordinate with provider(s)

Coordinate with provider(s)

- Case Manager coordinates referrals for services and schedules introductions with service providers
- Provider communicates with the person and case manager to determine if the provider's services will meet the person's support needs and goals
- Case Manager will coordinate with the provider regarding [rate worksheets](#)
- Provider sends completed form(s) to case manager

Phase 4: Authorize Services

Authorize Services

Case manager:

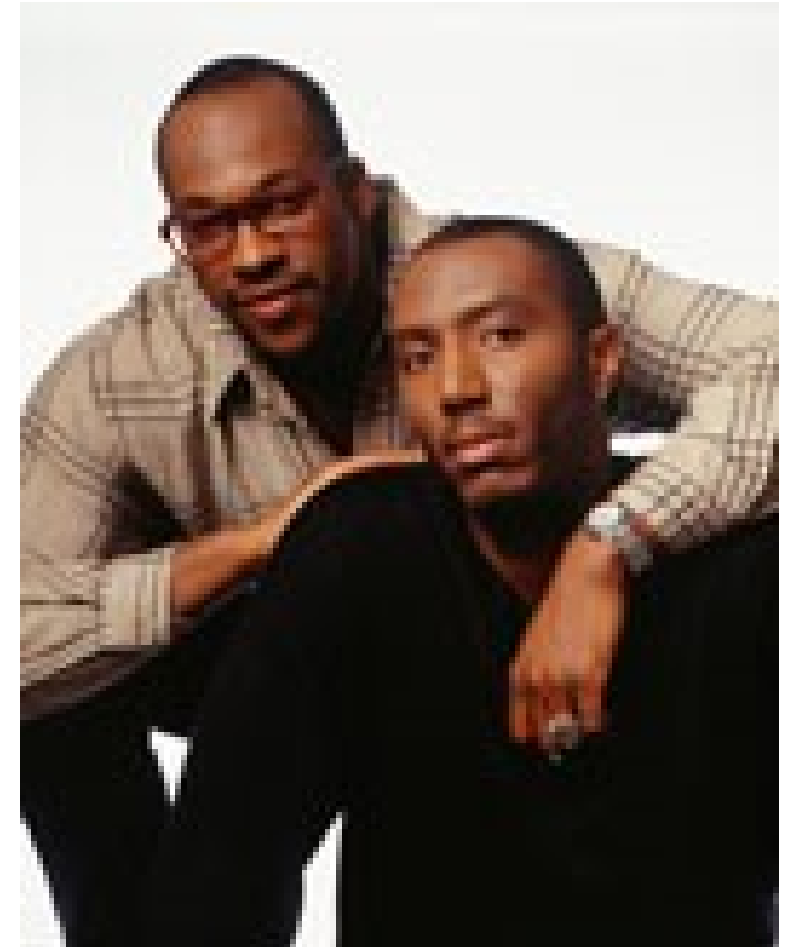
- Reviews completed **rate worksheets** to assure it aligns with the person's preferences and assessed needs as written in the CSP and CSSP
- Completes a [Notice of Action](#), and sends to the person if there is a service reduction, denial, or termination
- Determines new rates, updates the CSSP, authorizes the person's chosen services, send the completed CSSP to the person, legal representative, and any designated providers/supports
- **If there is a new 245D** service provider, then the provider hosts a 45-day meeting where person shares their experience of the service / support plan and if they think it is meeting their goals
 - Case manager verifies it is scheduled and attends
 - Provider schedules with the person and team

Phase 5: Monitoring Support Needs and Services

Monitoring Support Needs and Services to ensure delivery

1. Ongoing conversation/Semi-annual meeting (a minimum of two face-to-face contacts are required per 12 month period) and completion of the [LTSS improvement tool](#)
2. Complete of LTSS improvement tool either in person or via phone. This is typically completed at the mid service year point (semi-annual meeting)
3. Annual Meeting (Prior to reassessment Case Manager sends the MnCHOICES Reassessment Communication form [DHS 6791E-PDF to the assessor](#))

- Encourage and empower the person to make informed choices
- Promote health, safety, wellbeing and independence
- Support and respect the person's right to take risks.
- Support the person in working out any issues with providers.



DD Waiver Services

24-hour emergency assistance
Adult day services
Adult day services bath
Assistive technology
Caregiver living expenses
Case management/service coordination
Case management aide
Chore services
Consumer Directed Community Supports
Crisis respite
Day training and habilitation
Employment Development, Exploration,
Support
Environmental accessibility adaptations

Extended personal care assistance
Family adult day services
Family training and counseling
Home-delivered meals
Homemaker
Housing access coordination
Night supervision
Personal support
Residential habilitation
Respite
Specialist services
Supported employment services
Transitional services
Transportation

Residential habilitation requirement

Residential habilitation

- In-home family support
- Supported living services (SLS)

OR

Unpaid Caregiver provides residential habilitation and have either of these services authorized

- Respite
- Homemaker



Residential habilitation requirement, continued

- People on the DD Waiver must receive waiver case management and a residential habilitation service
- When a person starts the DD Waiver, the lead agency may authorize a support plan that does not include a residential habilitation service for a maximum of 90 calendar days

DD Waiver start without residential habilitation

- The case manager must:
 - Document in the support plan what residential habilitation service will be in place within the 90-day timeframe
 - Document in MMIS Service Authorization the reason a residential habilitation service was not authorized
 - Contact the DSD Resource Center for help approving the service authorization (see CBSM – DSD Resource Center)
 - Authorize a residential habilitation service within 90 days of a person starting the DD Waiver (see CBSM – Habilitation services – residential).

DD Waiver start without residential habilitation, continued

- If the lead agency does not authorize a residential habilitation service during the 90-day timeframe, the person must exit the waiver until he/she becomes eligible and the lead agency can authorize additional waiver services.

Mid-year change of residential habilitation services

- People currently on the DD Waiver must receive waiver case management and a residential habilitation service
- The lead agency may authorize waiver case management without a residential habilitation service for a maximum of 60 calendar days.
 - During this timeframe, the case manager must check in with the person at least monthly (e.g., phone calls or in-person visits)
- If the lead agency does not authorize a residential habilitation service during the 60-day timeframe, the person must exit the waiver until he/she becomes eligible and the lead agency can authorize a residential habilitation service

Residential habilitation exception to 60 days

If the reason for not authorizing a residential habilitation service within 60 days is that the person is transitioning between:

- Providers
- Services
- Settings

Residential habilitation exception to 60 days, continued

- DHS allows an additional 60 days to authorize a residential habilitation service. During this timeframe, the case manager must check in with the person at least monthly (e.g., phone calls or in-person visits).
- If the lead agency does not authorize a residential habilitation service during the additional 60 days (120 days total), the person must exit the waiver until he/she becomes eligible and the lead agency can authorize a residential habilitation service.



Questions



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Resources and Tools

Where to Find: Assessment & Eligibility Resources

- [CBSM Rule 185/DD Case Management Eligibility](#)
- DD [Diagnosis Determination](#)
- [ICF/DD level of care](#) CBSM
- [Developmental Disabilities \(DD\) Waiver](#) CBSM
- [Waiver Case Management](#) CBSM
- [MnCHOICES on County Link](#)

Where to Find: DHS Forms

- [DD Forms list](#)
- Related Conditions Checklist/Instructions [DHS-3848 \(PDF\)](#)
- [Community Support Plan with the Coordinated Services and Supports Plan, DHS-6791B \(PDF\)](#)
- [MnCHOICES Coordinated Services and Supports Plan Signature Sheet, DHS-6791D \(PDF\)](#)
- [Data Privacy Practices, DHS-4839E \(PDF\)](#) or agency form

Where to Find: DHS Forms, continued

- [Minnesota Health Care Programs, DHS-3182 \(PDF\)](#)
- [Your Appeal Rights, DHS-1941 \(PDF\)](#)
- [Notice of Action – Assessments and Reassessments, DHS-2828A \(PDF\)](#)
- [Notice of Action – Service Plan, DHS-2828B \(PDF\)](#)
- [Notice of Action: Instructional Guidance](#)

Where to Find: Guidance Documents

- [DD Screening Codebook](#)
- [DD Screening Scenarios](#)
- [Screening Document Fields](#)
- [MnCHOICES DD Screening Document Guidance](#)
- [DD/RC Process Guidelines with MnCHOICES](#)
- [DD Waiver waiting list guide](#)
- [Choice to Waive CBSM Page](#)

Where to Find: DD Program & Service Information

- [MN's Community-based Services Manual \(CBSM\)](#)
- [Semi-independent living services \(SILS\)](#)
- [Family Support Grant \(FSG\)](#)
- [Consumer Support Grant \(CSG\)](#)
- [ICF/DD CBSM](#)

Where to Find: Resource Management Guidance

- CBSM [DD Allocations & Resources](#)
- CBSM [Waiver Management System \(WMS\)](#) – includes new user video modules
- CBSM [How to transfer resources in WMS for CFR Changes](#)

Where to Find: Legal References

- [MN Rule 9525.0004 - 9525.0036](#)
- [MN Statute 256B.092 Services for Persons with Developmental Disabilities](#)
- Waiver requirements for level of care: Code of Federal Regulations 42, [Section 441.301](#)
- [HCBS Final Rule YouTube Video](#)

Where to Find: DHS Websites

- [Person-Centered Practices](#)
- [Disability Benefits 101](#)
- [Disability Hub MN](#)
- www.MNHelp.info
- [I Know Me!](#)

Where to Find: Conflict Resolution Resources

Team conflict resolution resources:

- [Formal person-centered planning](#)
- [Arc of Minnesota](#)
- [Volunteers of America](#)
- [Responsibility Doughnut](#)
- [4+1](#)
- [Working/Not Working](#)

Where to Find: Planning a move & employment resources

Planning a move resources

- [DHS My Move Plan Summary](#)
- [Person-centered, Informed Choice and Transition Protocol](#)
- [Tech 4 home](#)
- [Home delivered meals](#)

Employment

- [MN DHS employment first website](#)

Where to Find: Other tools, information and support

Resource Shortage support:

- [One Page Profile](#)
- [Matching](#)
- [CDCS](#)

Guardianship or Supported Decision Making questions:

- [WINGS Minnesota](#)
- [MAGiC](#)

Still have Questions?

- **DD Screening Document/MMIS Help-** [DSD Resource Center CBSM Page](#)
- **MnCHOICES** application or policy questions are submitted by mentors on [MnCHOICES Help Desk Contact Form DHS-6979](#)
- **DWRS** – Rates questions are submitted by mentors on [Rates Mentor Inquiry Form](#)
- **Submit other questions** to your RRS at dsd.rrs@state.mn.us

Thank you!

DSD.RRS@state.mn.us