

Independent Care Waiver Program

The Independent Care Waiver Program (ICWP) offers services that help a limited number of adult Medicaid members with physical disabilities live in their own homes or in the community instead of a hospital or nursing home. ICWP services are also available for persons with traumatic brain injuries (TBI). The program operates through the Georgia Department of Community Health under a Home- and Community-Based Waiver (1915c) granted by the Centers for Medicare & Medicaid Services (CMS).

Eligibility Criteria

The Independent Care Waiver is designed for eligible Medicaid members with severe physical disabilities who are between the ages of 21 and 64 when they apply and when services are started, and who meet the criteria below:

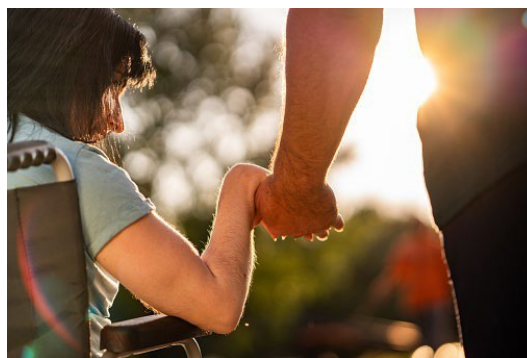
- Capable of managing their own services (individuals with a TBI do not have to meet this criteria).
- Have a severe physical impairment and/or TBI that substantially limits one or more activities of daily living and requires the assistance of another individual.
- Do not have a primary diagnosis of a mental disorder (intellectual disability/mental illness).
- Be medically stable but at risk of placement in a hospital or nursing facility if community-based support services are not available.
- Be safely placed in a home or community setting.

Other factors also help determine eligibility, including currently residing in a hospital or nursing facility, length of time on the waiting list, ability to live independently, and estimated cost of care (based on the projected care plan).

Individuals who are considering nursing home or other institutional care may be eligible for home- and community-based services as an alternative through Georgia's Medicaid waiver program.

To qualify for the waiver programs, individuals must meet the criteria for Medicaid payment in an institution and certain other criteria as outlined above.

Applicants are then offered the choice between community-based services or institutional care as long as the community services do not cost more than the institutional care.





How to Apply for ICWP

To apply for ICWP, contact Alliant Health Solutions at 888-669-7195. Alliant will complete a screening by asking potential members questions over the phone. If screening requirements are met, Alliant will have the potential member submit an application. After receiving the application, Alliant will schedule an in-person assessment. Based on the information provided, applicants may be eligible for ICWP and approved to receive services as funding becomes available.

Services Provided

The Transition Plan is intended to describe how the state will move toward and ultimately achieve compliance with the new HCBS Settings Rule. The state required all providers to conduct a self-assessment. Case managers helped the state validate the provider self-assessments. The state also invited members to complete their own assessment as well.

The assessment asked questions about individuals' experiences based on the quality characteristics of how CMS has defined home and community-based services such as:

- Does the individual have rental rights?
- Does the individual have privacy where he/she sleeps and a private space, such as where he/she sleeps, where the door can be locked? And where the individual, not the staff, has the key to the room?
- Did the individual have a choice of roommates?
- Does the individual have the freedom to furnish and decorate his/her residence to their liking?
- Does the individual have freedom and support to control his/her schedules and activities?
- Does the individual have the freedom to choose meals and have access to food any time?
- Does or may the individual entertain visitors at his/her choosing?