



DIVISION OF DEVELOPMENTAL DISABILITIES  
Olympia, Washington

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TITLE: FAMILY SUPPORT EMERGENCIES AND PROGRAM TRANSFERS POLICY 4.06

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Authority: RCW 71A.12.040  
WAC 388-825-200 through 388-825-256

**PURPOSE**

This policy clarifies the current procedures for granting exceptions to policy (ETPs) for individuals using Family Support services and for individuals transferring between programs.

**SCOPE**

This policy applies to all Field Services offices and outstations.

**POLICY**

- A. Requests for ETPs to Exceed Short-Term Intervention Amount
1. Review the situation to see if the person qualifies for serious need. If the person does not qualify, review the following factors:
    - a. Is the requested service or item related to the individual's disability?
    - b. Is the item or service one that is used by a typically developing child?
    - c. Is the item or service part of an active therapeutic program?
    - d. Is funding available to cover the cost?
  2. The Regional Administrator must review and approve all ETP requests.

**B. Emergency Requests**

The Regional Administrator or designee must review and approve or deny all emergency requests. This includes, but is not limited to:

1. Emergency requests from individuals on the Family Support waiting list who are not currently getting any Family Support services. Persons living with their family who are not receiving Family Support services may be considered for emergency funding; and
2. Emergency requests for an increase in service from individuals who are current Family Support recipients. Requests exceeding serious need or service need level lids are covered below in Sections D and E.

**C. Requests to Exceed Community Guide Hours**

A request to exceed the designated amount for Community Guide services in any year is an ETP. The Regional Administrator or designee must review and base his/her decision on:

1. The circumstances of the family; and
2. The amount of available funding.

**D. Requests to Exceed Serious Need Maximum Levels**

Requests to exceed the maximum amount for serious need require approval by the Division Director. The Regional Administrator must review and submit such requests to the Division Director for approval or denial.

**E. Requests to Exceed the Service Need Level Lids**

ETP requests to exceed the lid require approve by the Division Director. The Regional Administrator must review and submit such requests to the Division Director for approval or denial. All ETPs must be reviewed annually.

**F. Requests for Family Support From Individuals Who Have Been Receiving But Are Not Currently Eligible for Medicaid Personal Care (MPC)**

If the individual was receiving Traditional Family Support services and was later transferred to MPC and subsequently lost eligibility for MPC, proceed as follows:

1. Consider the individual immediately eligible for ongoing Family Support services. No ETP is necessary;
2. Complete a Family Support form (DSHS form 10-249) and establish the service need level;
3. Establish a Family Support authorization either at the level the individual was receiving from MPC or at the maximum for the individual's service need level, whichever is less; and
4. Consider requesting waiver services.

G. Requests from Individuals Whose Family Support Services Have Been Interrupted

If the individual was receiving Family Support and subsequently stopped using the service, but now needs the service again, Family Support Opportunity may be authorized if the reason for stopping the service was because the individual went into the Voluntary Placement Program, Children's Administration Placement, or Adult Residential Services.

H. Requests From Individuals Who Previously Received Private Duty Nursing, Medically Intensive Home Care Program (MIHCP), or Who Currently Require Continuous Licensed Nursing Services

1. Individuals who are no longer medically eligible for services through the MIHCP, and who have requested Family Support services to be able to remain in their family home, may be added to the Family Support Opportunity program.
2. Individuals who have been receiving Family Support services, and whose medical care needs change to needing licensed nursing care, may be addressed as follows:
  - a. If the person is on Traditional Family Support program, reassess to determine the appropriate service need level.
  - b. Authorize the assessed amount of funding based on service need level.
  - c. If the individual is on Family Support Opportunity, submit a request for serious need funding.
  - d. The Medically Intensive Home Care Program (MIHCP) covers all private duty nursing hours when the child is in that program.

I. Family Support Services Termination

Family Support services must be terminated when:

1. Residential support is authorized for the person; or
2. The person moves into a residential placement and no longer lives with a family member; or
3. The person goes into the Voluntary Placement Program.

**EXCEPTIONS**

No exceptions to this policy may be authorized without the prior written approval of the Division Director.

**SUPERSESSION**

DDD Policy 4.06  
Issued September 16, 2000

DDD Policy 4.06  
Issued April 13, 2000

DDD Policy 4.06  
Issued September 22, 1995

Approved:  /s/ Linda Rolfe  
Director, Division of Developmental Disabilities

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