Waiver Eligibility
Recipients must meet all of the following criteria:

- Be an eligible client of DDA per RCW 71A.10.020(5).
- Have a disability according to criteria established in the Social Security Act.
- Apply for long-term care services/Medicaid and have verified income that does not exceed 300% of the SSI federal benefit standard.
  - For children who receive waiver services, parents’ income and resources are not considered.
- Have resources less than $2,000 or have any additional resources above $2,000 in a protected special needs trust such as an Endowment Trust Fund or an ABLE account.
- Meets the level of care provided in an Intermediate Care Facility for Individuals with Intellectual Disabilities as determined by the DDA assessment.
- Person-centered service plan shows how health, safety, and habilitation needs can be safely met in their family home with a monthly waiver service and/or monthly monitoring.
- Agree to accept home and community-based services rather than receive services in an ICF/IID.
- CIIBS participants must also:
  - Be age 8 through 17 for initial enrollment.
  - Be determined in their CARE assessment to be at high or severe risk for out-of-home placement due to challenging behaviors.
  - Live with family member who agrees to participate in the CIIBS program.
  - Live with family member who agrees to participate in the CIIBS program.

Access to a Waiver
A request to enroll, or switch to an alternate waiver can be done at any time. Ask a case resource manager. If a CRM is not available, leave a message on the local No-Paid Service line listed under Regional Offices or submit the request on-line at www.dshs.wa.gov/dda/service-and-information-request. Each waiver is limited to the number of people served. DDA has the authority to limit enrollment based on the availability of funding for new waiver participants.

Meeting service criteria for the waiver does not guarantee access to waiver services.

Administrative Hearing Rights
Everyone has the right to an administrative hearing with the following decisions regardless of program or service:

- DDA eligibility is denied, terminated or DDA has unreasonably delayed acting on an application; or
- Type or amount of service authorized to receive; or
- Denial, reduction, or termination of services; or
- Denial of choice of service provider; or
- If moved to a different residential setting, not of one’s choice; or
- DDA refusal to abide by request not to send notices to any other person; or
- Disenrollment from a waiver program; or
- Denial of request to receive ICF/IID services instead of waiver services; or
- DDA decides that the services available on current waiver can meet health and welfare needs and a person disagrees; or
- A person is assessed to not need ICF/IID level of care; or
- One has been assessed to not meet CIIBS eligibility.

Visit us online at:
dshs.wa.gov/dda/service-and-information-request
Find an office at: https://www.dshs.wa.gov/dda/find-dda-office
Call us:

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<thead>
<tr>
<th>Counties</th>
<th>Phone and Email</th>
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<tr>
<td>Chelan, Douglas, Ferry, Grant, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens</td>
<td>(800) 319-7116 <a href="mailto:R1ServiceRequestA@dshs.wa.gov">R1ServiceRequestA@dshs.wa.gov</a></td>
</tr>
<tr>
<td>Adams, Asotin, Benton, Columbia, Franklin, Garfield, Kittitas, Klickitat, Walla Walla, Whitman, Yakima</td>
<td>(866) 715-3646 <a href="mailto:R1ServiceRequestB@dshs.wa.gov">R1ServiceRequestB@dshs.wa.gov</a></td>
</tr>
<tr>
<td>Island, San Juan, Skagit, Snohomish, Whatcom</td>
<td>(800) 567-5582 <a href="mailto:R2ServiceRequestA@dshs.wa.gov">R2ServiceRequestA@dshs.wa.gov</a></td>
</tr>
<tr>
<td>King</td>
<td>(800) 974-4428 <a href="mailto:R2ServiceRequestB@dshs.wa.gov">R2ServiceRequestB@dshs.wa.gov</a></td>
</tr>
<tr>
<td>Kitsap, Pierce</td>
<td>(800) 735-6740 <a href="mailto:R3ServiceRequestA@dshs.wa.gov">R3ServiceRequestA@dshs.wa.gov</a></td>
</tr>
<tr>
<td>Clallam, Clark, Cowichan, Grays Harbor, Jefferson, Lewis, Mason, Pacific, Skamania, Thurston, Wahkiakum</td>
<td>(888) 707-1202 <a href="mailto:R3ServiceRequestB@dshs.wa.gov">R3ServiceRequestB@dshs.wa.gov</a></td>
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People needing support with hearing or communication can call the Washington Telecommunication Relay Service by dialing 7-1-1 or 1-800-651-688 (TTY).

Children's Intensive In-Home Behavioral Support Waiver
From the Developmental Disabilities Administration

Washington State Department of Social & Health Services
Transforming lives

DSHS 22-1753 (Rev. 11/20)
Waiver Overview
Department of Social and Health Services’ Developmental Disabilities Administration has five Home and Community-Based Service Medicaid waiver programs. Each waiver offers specific services to meet health and safety needs in the community. The Children’s Intensive In-Home Behavioral Support waiver offers a variety of services when not available through any other resources (private insurance, Medicaid, school, etc.).

Children’s Intensive In-Home Behavioral Support waiver supports youth at risk of out-of-home placement due to challenging behaviors. The CIIBS model involves wraparound planning and family-centered positive behavior support. The CIIBS waiver serves persons aged between 8 and 20.

If the assessed need for services exceeds the defined scope of services provided under the CIIBS waiver, DDA will make one or more of the following efforts to meet health and welfare needs:

- Assist participants to identify more available natural supports;
- Initiate an exception to rule to access available non-waiver services not included in the CIIBS waiver other than natural supports;
- Provide an application for an alternative waiver that includes the services needed;
- If none of the above options meet the health and welfare needs of the CIIBS waiver participant, DDA may terminate waiver eligibility. If terminated from a waiver, persons may still be eligible for other non-waiver DDA services or placement in an ICF/IID care facility.

Waiver Services
Use this brochure to plan for annual assessments. A case resource manager will explain services and requirements, and document the services selected in the person-centered service plan. Some services require prior review and approval. Ask the CRM what information is needed for prior approval. Services in four categories include:

- **Community services** – promote client participation and integration in the community
- **Professional services** – support services provided by contracted professionals
- **Caregiving services** – supports for participants and their caregivers
- **Goods and services** – equipment, supplies and specialized services for participants

Use check boxes to show the CRM which services are of interest:

**Community Services**
- Transportation – reimbursement to a provider for non-medical transportation required to access waiver services specified in a PCSP

**Professional Services**
- Stabilization services – services to assist and support during a behavioral health crisis. This includes specialized habilitation, staff/family consultation and crisis diversion bed services.
- Specialized habilitation – individualized support to learn or maintain a range of life skills.
- Positive behavior support and consultation – supports that address behavioral health needs. These include direct interventions to promote behaviors that improve quality of life and inclusion in the community. *No new enrollments after 10/1/2020*
- Risk assessment – evaluations of violent, stalking, sexually violent, or predatory behavior to determine the need for psychological, medical or therapeutic services.
- Staff/family consultation – professional consultation provided to family and direct service providers to better meet needs. Counseling available.

**Professional Services (continued)**
- Equine therapy – equine experience to promote emotional and physical growth to support a primary behavioral health plan.
- Music therapy – musical interventions to promote progress on individual goals that support a primary behavioral health plan.

**Caregiving Services**
- Respite – short-term relief to individuals living with and caring for clients.

**Goods and Services**
- Assistive technology – products and training used to improve or maintain functional abilities.
- Environmental adaptations – physical modification to the home, necessary for the participant to continue living in their family home.
- Specialized clothing – non-restrictive clothing adapted to the needs related to the disability.
- Specialized equipment and supplies – necessary equipment and items not available under Medicaid (Apple Care) including equipment and devices needed to implement therapeutic or positive behavioral support plan.
- Therapeutic adaptations – modifications to the home environment to reduce or eliminate sensory processing stressors.
- Vehicle Modifications – adaptations to a vehicle that accommodates needs and supports community integration.