Virginia Department of Behavioral Health and Developmental Services



# **Funding Guidelines**

These annual guidelines are developed in collaboration with the IFSP State Council and published in accordance with regulation, Operation of the Individual and Family Support Program [12VAC35-230].

Version Date: 09/12/2024.

### **Contents**

l.	Program Description	. 2
II.	Program Eligibility Requirements	. 2
III.	Prioritized Funding Categories	. 3
IV.	Covered and Non-Covered Services and Supports	. 4
V.	Application for Funding	. 7
VI.	Application Review Criteria	. 7
VII.	Funding Award Process	. 8
VIII.	Requests for Reconsideration	. 8
IX.	Post-Funding Review	. 9
Χ.	Termination of Funding	. 9

If you have questions or need additional assistance, please contact My Life, My Community operators at (844) 603-9248.

# **Program Description**

#### 12VAC35-230-20

Funding through the Virginia Department of Behavioral Health and Developmental Services' ("department") Individual and Family Support Program ("IFSP") assists individuals on a waiting list for a Virginia Medicaid Home and Community-Based Services (HCBS) Developmental Disability Waiver ("DD Waiver Waiting List") and their families with accessing resources, supports, and services. The program supports the continued residence of individuals with developmental disabilities in their own homes or in the family home of the individual.

# **Program Eligibility Requirements**

#### 12VAC35-230-35

To be eligible, applicants must meet all of the following criteria when funds are requested:

- 1. Applicants must be on the Virginia DD Waiver Waiting List, and
- 2. Applicants must be living in their own homes or in a family home.

Applications may be submitted either by the individual who is on the DD Waiver Waiting List or a custodial family member applying on behalf of the individual(s) on the DD Waiver Waiting List. A "custodial family member" is a family member who has primary authority to make all major decisions affecting the individual and with whom the individual primarily resides.<sup>1</sup>

Individuals on the DD Waiver Waiting List who also receive assistance through other programs like the Commonwealth Coordinated Care Waiver (CCC Plus) or the Early and Periodic Screening Diagnosis and Treatment Program (EPSDT) may apply for funds if the request is for items that are not available through this or a similar program. IFSP encourages all applicants to maximize assistance by accessing other supports and resources where appropriate.

<sup>&</sup>lt;sup>1</sup> As defined in 12VAC35-230-10, Operation of the Individual and Family Support Program.

#### III. **Prioritized Funding Categories**

#### 12VAC35-230-45

The amount each applicant may request is based upon the applicable prioritized funding category for the applicant.

the program shall approve awards up to approximately \$2.5 million in direct assistance to individuals on the DD Waiver Waiting List.

### **Prioritized Funding Categories**

### Priority 1:

Total Funds Available: Approximately 50% of funds will be awarded to applicants with Priority 1 status on the DD Waiver Waiting List.

Maximum Per Recipient: \$1000.

**Application Period**: Open for one month.

#### **Determination Process:**

- 1. Funds will be awarded to applicants with the highest Critical Needs Summary scores (most at risk of institutionalization) as recorded in the Waiver Management System (WaMS) at the time of application submission, until funds are exhausted.
- 2. After all Priority 1 funds are allocated, any Priority 1 applicants who remain unfunded shall be included in the random selection process for the remaining funds in the group with Priority 2 and 3 applicants.

Remaining funds: Any funds remaining after all Priority 1 applicants are approved shall be added to the Priority 2 and 3 funding allocation.

#### Priorities 2 and 3 (combined) and any remaining unfunded Priority 1:

Total Funds Available: Approximately 50% of funds will be awarded to applicants with Priority 2 and 3 status on the DD Waiver Waiting List.

Maximum Per Recipient: \$500.

**Application Period:** Open for one month.

#### **Determination Process:**

- 1. All Priority 2 and 3 applicants and all remaining unfunded Priority 1 applicants shall be in the same group for random selection.
- 2. Funds shall be awarded to applicants in a random, unprioritized manner until all available funds are distributed, with the exception that new applicants and applicants who were denied in the previous year's funding cycle will be prioritized.

The funding application schedule, including application deadlines, are posted on the My Life, My Community website at <a href="https://mylifemycommunityvirginia.org">https://mylifemycommunityvirginia.org</a>.

All applications must be submitted via the department's WaMS IFSP Funding

Application Portal located at <a href="https://www.dbhds.virginia.gov/ifsponline">https://www.dbhds.virginia.gov/ifsponline</a>.

Applications shall be reviewed by the department at the following intervals:

**Priority 1:** Upon close of the application period.

Priorities 2 and 3: After all Priority 1 applications are reviewed and determinations are made. No later than one month from the close of the application period.

#### **Covered and Non-Covered Services and Supports** IV.

#### 12VAC35-230-55

The following items and services are eligible for funding as allowable expenditures under the IFSP.

Please note: IFSP funds are one-time funds and are not guaranteed to be awarded in future years.

#### Safe Living

- Backup generator
- Furniture, including beds, sofa, chairs, tables, lamps, and dressers
- Adaptive furniture
- Mattresses and bedding
- Handrails and grab bars
- Home modifications to improve accessibility, including door widening, additional flooring, kitchen or bathroom remodels, and driveway and window installation
- Appliances
- Heating, cooling, and plumbing systems conversion, installation, and repairs
- General home repairs
- Location devices and GPS trackers, including Project Lifesaver and AngelSense, personal alarms, locator services, and associated trainings
- Respite
- Fencing
- Home security systems, including home alarms and cameras
- Wheelchair ramp and other ramps
- Stairlifts
- Legal fees, including fees to establish guardianship, power of attorney, microboards, trusts, etc.

#### **Community Integration**

- Companion services, peer support, and mentoring
- Childcare and afterschool care
- Community activities/recreation
- Conferences, family education, and trainings
- Day support programs
- Self-advocate education or training
- Summer camp
- Supported employment
- Therapeutic activities and copays
- Transportation services including Uber, Lyft, cabs, buses, etc.
- Sports activities and lessons, including tournaments
- Recreational and entertainment activities that support community integration
- Recreational activities, including art classes, music lessons, dance lessons, gym memberships, etc.
- Recreational equipment, including swings and playset equipment
- In-state vacations
- Passes for recreational activities
- Tuition
- Modifications to a vehicle, including wheelchair lifts
- Reimbursement for transportation costs including gas, tolls, etc.

### **Improved Health Outcomes**

- Attendant care
- Behavior therapy/applied behavioral analysis
- Communication and assistive technology, including computers, tablets, laptops, iPads, apps, mobile phones, mobile phone services, warranties and repairs, internet services, speech applications, and speech products
- Telecommunication services that enhance community access and involvement, including SIM cards, internet, mobile phone service, and applications that link individuals to community activities
- Assistive technology repair
- Dental care, procedures, and equipment
- Hearing care, procedures, and equipment
- Medical care copays
- Medication
- Equipment, including bikes, wheelchairs, strollers, car seats, and highchairs
- Sensory items, including toys

- Nutritional supports, including nutritional drinks like Boost, Ensure, formula, adult formula for feeding tubes, etc.
- Therapies, including occupational therapy, physical therapy, speech therapy, massage therapy, and chiropractic therapy
- Personal hygiene items, including incontinence supplies, skin ointments, wipes, specialized toothbrushes, and costs associated with professional grooming services such as haircuts, manicures, and pedicures
- Therapeutic horseback riding/hippotherapy
- Vision care, procedures, and equipment
- Durable medical equipment, including clothing and compression garments and apparel that simplifies self-dressing and offers solutions to meet a multitude of physical challenges. Eligible clothing items include the following:
  - Bibs and clothing protectors
  - Soft clothing for sensory sensitivity
  - Clothing with velcro, snaps, or zipping closures
  - Orthopedic shoes

#### IFSP Funds may NOT cover the following costs:

- Clothing not related to the applicant's disability<sup>2</sup>;
- Food (not related to special dietary needs associated with the disability or as part of a recreational experience);
- Installment payments for automobiles and auto insurance; and
- Any services or items not listed in these Guidelines or if covered by another entity.

<sup>&</sup>lt;sup>2</sup> This does not exclude accessible clothing items (e.g., adaptive clothing or footwear, weighted vests). These items are covered under the Improved Health Outcomes section of the list.

# V. Application for Funding

#### 12VAC35-230-65

The application can be found on the WaMS IFSP Funding Application Portal located at https://www.dbhds.virginia.gov/ifsponline.

IFSP funds may only be used to cover expenses incurred after the applicant receives the award approval notice.

All program funds will be issued by debit card. Applicants are expected to register the card immediately upon receipt. Failure to register the card may affect the applicant's eligibility for future funds.

By applying, the individual or custodial family member agrees to:

- 1. Maintain all receipts documenting items or services purchased with IFSP funds for three calendar years from the date of purchase and, upon request, provide the receipts to the department for auditing<sup>3</sup>;
- 2. Acknowledge that failure to comply with the program's policies may result in recovery of awarded funds and denial of future funding requests.

#### **Application Review Criteria** VI.

Upon receipt of a completed application and prior to issuance of funding, the department shall:

- 1. Verify that the individual is on the waiting list for a Medicaid Home and Community-Based Services (HCBS) DD Waiver;
- 2. Confirm that the requested items or services are eligible for funding; and
- 3. If applicable, confirm that the applicant complied with program requirements in previous years. Failure to provide all the requested application information shall result in an application denial.

<sup>&</sup>lt;sup>3</sup> IFSP stopped requiring receipts in 2020. However, applicants are still expected to maintain receipts documenting expenditures for eligible items and providing them as requested as part of a program audit.

# VII. Funding Award Process

#### 12VAC35-230-85

The department shall provide a written notice to the individual or custodial family member who submitted the application indicating whether the application was approved or denied.

### **Approvals**

Applications shall be approved according to criteria outlined in Sections I through VI of these guidelines.

#### **Denials**

Applications may be denied if the department determines that:

- The applicant does not meet the eligibility criteria.
- The requesting individual or custodial family member did not comply with IFSP policies or regulations for previous funding awards. This includes failure in prior years to register debit cards for awards or failure to provide receipts for funds previously received, when requested for review.
- After reviewing all applications, and following approval criteria outlined in the Prioritized Funding Categories Section III, the IFSP funding annual appropriation is expended.

An applicant in Priority 2 or Priority 3 (or remaining unfunded Priority 1) who received IFSP funding the year before may not receive funding again until all other eligible applicants in those priority categories have been awarded funding.

# VIII. Requests for Reconsideration

### 12VAC35-230-90

For applications denied for the reasons listed in Section VII, the department shall provide written notice via email stating the reason(s) for denial, and information on how to appeal the decision.

Requests for reconsideration must be submitted in writing using the directions provided in the written denial notice. Reconsiderations must be submitted no later than 30 days after receiving the denial notice. A determination shall be made within 30 days of receipt of the request and provided to the responsible party in writing. This decision will be final.

### **Review of Requests for Reconsideration Process:**

The department shall conduct a thorough review of (i) each application received for reconsideration and (ii) the determination process to identify potential errors that may have occurred. If an error is identified that indicates the applicant should have received a funding award, the request for reconsideration will be approved.

#### **Post-Funding Review** IX.

#### 12VAC35-230-100

Department staff may request documentation or verification that funds were used in accordance with the program guidelines to purchase only approved services or items as described in the application and approved by the department. By receiving IFSP funds, recipients agree to provide all information requested by the department for three years following the funding cycle in which the funds were awarded. Failure to provide information when requested may result in recovery of the awarded funds by the department or prohibition from receiving future funds.

### **Termination of Funding**

#### 12VAC35-230-110 120

Funding through the IFSP shall be terminated when the individual is enrolled in a Medicaid HCBS DD Waiver, if the individual is found to be no longer eligible to be on a waiting list for a Medicaid HCBS DD Waiver in accordance with <u>12VAC30-122-90</u> and all appeals are exhausted, or if awarded funds are used for purposes not approved by the department in its written notice. Any funds approved but not yet released to the awardee will be forfeited in such circumstances.

> If you need answers to questions related to IFSP, please visit the DBHDS My Life, My Community website at https://mylifemycommunityvirginia.org.



