

MI-Choice Waiver Program

One program run by Michigan Medicaid is the MI Choice Waiver Program. It began in 1992 as the Home and Community Based Services for the Elderly and Disabled (HCBS/ED) waiver program. We now know it as the MI Choice Waiver Program, or simply, "the waiver."

Through this program, eligible adults who meet income and asset criteria can receive Medicaid-covered services like those provided by nursing homes, but can stay in their own home or another residential setting. The waiver became available in all Michigan counties October 1, 1998. Each participant can receive the basic services Michigan Medicaid covers, and one or more of the following services unique to the waiver:

- Community transition services
- Community living supports
- Nursing services (preventative nursing)
- Respite services
- Adult day health (adult day care)
- Environmental modifications
- Non-medical transportation
- Medical supplies and equipment not covered under the Medicaid State Plan
- Chore services
- Personal emergency response systems
- Private duty nursing
- Counseling
- Home delivered meals
- Training in a variety of independent living skills
- Supports coordination
- Fiscal intermediary
- Goods and services

Waiver agents assist eligible adults with the above services. One of the newly-approved services is enrollment in a CDSME program.

How It Works:

- The waiver agent determines that a client will benefit from a CDSME program.
- The waiver agent contacts the agency that is hosting the program.
- The agency that is hosting the program and the waiver agent will have an agreement that states:
 - Data collection requirements
 - Payment amount for each session attended

- Other wraparound services that the client may need
 - Who will get the payment for providing the program
- The client then attends the workshop with the additional supports and services that are necessary.

The most common CDSME programs have been given a code number to use for the waiver clients. There are also several 'catch-all' categories for the less common programs. As long as the program meets the Title IIID criteria, it is eligible for waiver payment. To figure out how much each session costs you, there is a sample budget sheet, along with a blank budget sheet. Also, you will find a list of the waiver codes.

MICHIGAN

Home and Community Based Waiver as a Sustainable Funding Source for CDSME

Cost Codes:

6501	Chronic Disease Self-Management Program
6502	Diabetes Self-Management Program
6503	Chronic Pain Self-Management
6504	Arthritis Self-Management
6505	Better Choices, Better Health (Chronic Disease Self-Management Program)
6506	Matter of Balance
6507	Healthy Moves
6508	Physical Activity Programs
6509	Creating Confident Caregivers
6510	T-Care