



agency for persons with disabilities
State of Florida

Agency for Persons with Disabilities

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Presentation Objectives

- Review the Referral / Application process for APD services
- Review the Eligibility Determination Requirements for:
 - APD services
 - iBudget Waiver services
- Review the process to apply for Crisis enrollment on the Medicaid Waiver



Referral and Application

- Referrals may be accepted:
 - Directly from an individual seeking assistance
 - An individual's legal representative
 - Other sources such as family, friends, agencies, other professionals
- Acceptance subject to applicant's consent (or their legal representative)



Referral and Application

- Referrals may be made:
 - In person
 - In writing
 - By telephone
 - By Facsimile
 - APD website
 - Court Order
- APD Regional staff follow up to confirm interest



Referral and Application

- Regional staff provide the following brochures/information to the applicant:
 - APD Application for Services
 - The Bill of Rights
 - Family Care Council
 - Serving Floridians with DD
 - Guide to Administrative Hearing
 - HIPAA Notice of Privacy Practice
 - Consent to Obtain or Release Confidential Information
 - Self-Advocacy



Referral and Application

- The APD Application for Services is online at: <http://apdcares.org/customers/application/>
- It is available in English, Spanish and Haitian Creole
- Divided in sections for applicant/legal representative and the Regional staff
- The Initial Contact Letter requests that you return the application within 60 days



APD Eligibility (Chapter. 393, F.S.)

To be eligible for APD services, a person must have one or more of the following diagnoses:

- ❖ Intellectual disability
- ❖ Cerebral palsy
- ❖ Autism
- ❖ Spina bifida
- ❖ Prader-Willi syndrome
- ❖ Down syndrome
- ❖ Phelan-McDermid syndrome
- ❖ Children between 3 and 5 at a high risk of one of the above





Continuation

- ❖ Manifests before the age of 18
- ❖ Constitutes a substantial handicap that can reasonably be expected to continue indefinitely
- ❖ At least 3 years of age
- ❖ A resident of and domiciled in the state of Florida



Intellectual Disability

- Establishing eligibility for “Intellectual disability”:
 - The following tests of adaptive functioning are presumptively accepted:
 - Vineland Adaptive Behavior Scales,
 - AAMR Adaptive Behavior Scale,
 - Adaptive Behavior Assessment System (ABAS),
 - Adaptive Behavior Evaluation Scale (ABES).
 - Scales of Independent Behavior-Revised



Intellectual Disability

- Establishing eligibility for “Intellectual disability”:
 - The performance measures for this category must be validated by the professional judgment of a psychologist who is experienced in working with people with intellectual disability, who has specific training and validation in the assessment instrument that is used, and who is one of the following:
 - A Florida-licensed psychologist,
 - A Florida-licensed school psychologist,
 - A certified school psychologist



Cerebral Palsy

- Diagnosis for “Cerebral Palsy” must be confirmed by written documentation from one or more of the following:
 - A medical doctor,
 - A doctor of osteopathy, or
 - Medical records documenting a diagnosis of cerebral palsy before the age of 18.



Autism

- A diagnosis of autism may only be made by one or more of the following who has specific training and experience in making such a diagnosis:
 - A Florida-licensed psychiatrist,
 - A Florida-licensed psychologist,
 - A board-certified pediatric neurologist who is qualified by training and experience to make a diagnosis of autism,
 - A board-certified developmental pediatrician, or
 - Collateral information received from another state may be accepted if the evaluator is licensed through the same credentials required for licensure in Florida.



Autism

- For eligibility purposes, the person must have a condition which is:
 - Pervasive – meaning that it is always present and without interruption
 - Neurologically based – meaning that it was not the result of physical impairment
 - Developmental disability – with an onset in infancy or childhood, prior to age 18
 - Extended duration – which is expected to continue indefinitely
 - Severe learning disorders - affecting both verbal and nonverbal communication and severe behavior disorders



Spina Bifida

- Diagnosis for spina bifida is confirmed by written documentation from one or more of the following:
 - A medical doctor;
 - A doctor of osteopathy; or,
 - Medical records that document a diagnosis of spina bifida cystica or myelomeningocele before the age of 18.



Prader-Willi syndrome

- Diagnosis for Prader-Willi syndrome is confirmed by written documentation from one or more of the following:
 - A medical doctor;
 - A doctor of osteopathy; or,
 - Medical records that document a diagnosis of Prader-Willi syndrome before the age of 18.



Down syndrome

s. 393.063(15), F.S.

- “Down syndrome” means a disorder caused by the presence of an extra chromosome 21.



Phelan-McDermid syndrome

- Evidence under this category requires documentation from a physician which provides the diagnosis of Phelan-McDermid syndrome as derived from genetic testing



High Risk

s. 393.063(23), F.S.

- “High-risk child” means, for the purposes of this chapter, a child from 3 to 5 years of age with one or more of the following characteristics: (a) A developmental delay in cognition, language, or physical development.
- (b) A child surviving a catastrophic infectious or traumatic illness known to be associated with developmental delay, when funds are specifically appropriated.
- (c) A child with a parent or guardian with developmental disabilities who requires assistance in meeting the child’s developmental needs.
- (d) A child who has a physical or genetic anomaly associated with developmental disability.



What if there are conflicting test results?

- Ensure tests being reviewed are valid in accordance with rules
- Region may obtain independent assessment per Chapter 393, F.S. at no cost to the family



APD vs. Waiver eligibility

- Not all APD eligible clients meet the level of care criteria for an ICF/IID or the Waiver
- Requirements from Waiver Eligibility Worksheet are as follows:



Waiver Eligibility

- ❖ APD Medicaid Waiver services are only available (after being placed on the waiting list) to individuals who meet the following criteria:
- ❖ Without waiver services, the person would otherwise require the level of care furnished by a:
 - Hospital
 - Nursing home
 - Intermediate Care Facility for People with Intellectual Disabilities



Eligibility Determination

- ❖ Agency staff review applicants for eligibility within:
 - 45 days after date of application for children under 6 years of age, and
 - 60 days after a signed application is turned in for 6 years of age and over
 - 90 days when additional information is needed



- Applying for Crisis Medicaid Waiver Enrollment
 - Once an individual is determined to be eligible for APD services, he/she is placed on the APD Waitlist.
 - If immediate services are needed due to a crisis situation, the family can apply for crisis enrollment on the Medicaid Waiver.
 - To apply for Crisis Medicaid Waiver Enrollment the following is required:
 - A crisis letter explaining the need for crisis enrollment
 - Proof that he meets one or more of the crisis criteria listed below



Crisis Criteria

(Sections 65G-1.046 and 65G-1.047, F.A.C.)

- Crisis criteria is met when an applicant has been determined by the Agency to have a developmental disability, as defined in Section 393.063(9), F.S., meets the waiver eligibility requirements listed in the current Handbook, and meets the crisis status criteria based on one of the following three categories:



Crisis Criteria (continued)

- Homelessness: The applicant is currently homeless, living in a homeless shelter, or living with relatives in an unsafe environment;
- Danger to Self or Others: The applicant exhibits behaviors that, without provision of immediate waiver services, may create a life-threatening situation for the applicant or others, or that may result in bodily harm to the applicant or others requiring emergency medical care from a physician;
- Caregiver Unable to Give Care: The applicant's current caregiver is in extreme duress and is no longer able to provide for the applicant's health and safety because of illness, injury, or advanced age.



Crisis Waiver Enrollment

- The Regional Crisis Review Committee meets every Thursday to review crisis applications
- In order to be enrolled on the Waiver, the person must first be enrolled in the Medicaid program
- If the person is already enrolled in the Medicaid program, and they meet crisis criteria, the process goes quickly



Crisis Waiver Enrollment (Con't)

- Once accepted for the Med Waiver, a child who applies to Medicaid is considered to be a family of one
- The parent/family chooses a Waiver Support Coordinator
- Waiver Support Coordinators are independent contractors with APD



Questions and Answers





Thank You!

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