

## Explanation of **Mental retardation services and supports**

The following information includes a brief description of mental retardation services and supports provided by the Texas Department of Aging and Disability Services (DADS). Some of them have an interest list because they do not have openings available. If someone wants a particular service or support, it is recommended that they add their name to the interest list as soon as possible. If someone is now receiving a particular service or support, his or her name can be added to the interest list for other services and supports.

Information about these services and supports can also be found at:

[www.dads.state.tx.us/services/dads\\_help/mental\\_retardation/index.html](http://www.dads.state.tx.us/services/dads_help/mental_retardation/index.html)

If you would like more information about services and supports, such as a listing of providers in your area, please contact your local mental retardation authority (MRA). You can find the MRA in your area on the Web site listed above.

### **Services and supports provided through DADS**

The following description of services and supports is organized by funding (e.g., general revenue, or state funded, and Medicaid) and by program type. It includes services and supports that range from community-based services and supports that allow people to remain in their own or their family's homes, to residential services in which they live in a structured setting with 24-hour supervision.

#### ***General Revenue (GR) funded services***

GR-funded services are primarily intended to help people remain in their own or their family's homes. These services are provided by or through an MRA. With the exception of "determination of eligibility for mental retardation services and supports," in order to receive GR funded services, a person who resides in the MRA's service area must:

- have mental retardation, which is based on:
  - measure of the person's IQ;
  - a determination of the person's adaptive behavior level (ABL); and
  - evidence of the disability that originated before the person's 18th birthday;
- have a pervasive developmental disorder, such as autism;
- be a nursing facility resident who is eligible for specialized services for mental retardation or a related condition pursuant to §1919(e)(7) of the Social Security Act; or
- be a child eligible for early childhood intervention services.

Determination of eligibility for mental retardation services and supports: A determination of mental retardation (DMR) is an assessment (or endorsement of an assessment) conducted in accordance with state law and DADS rules to determine if a person has mental retardation or is a member of the DADS mental retardation priority population. The assessment uses standardized tests to determine a person's IQ and ABL and is conducted by a qualified professional. An assessment (or endorsement) typically includes an interview with the person, the person's legally authorized representative (LAR), or, if the person doesn't have an LAR, others who are actively involved with the person. This service also may be requested as part of a formal petition for guardianship.

Service coordination: Service coordination helps people access medical, social, educational, and other appropriate services and supports that will help them achieve an acceptable quality of life and community participation. Service coordination is provided by an MRA staff person who is typically referred to as a service coordinator.

Community support: Community supports are individualized activities that are consistent with the person-directed plan and provided in the person's home and at community locations, such as libraries and stores. Supports include:

- habilitation and support activities that foster improvement of, or facilitate, the person's ability to perform daily living activities;
- activities for the person's family that help preserve the family unit and prevent or limit out-of-home placement of the person;
- transportation for the person between home and his or her community employment site or day habilitation site; and
- transportation to facilitate the person's employment opportunities and participation in community activities.

Respite: Respite is either planned or emergency short-term relief provided to the person's unpaid caregiver when the caregiver is temporarily unavailable. Respite is provided by trained staff in the person's home or another location. If enrolled in other services, the person continues to receive those services as needed during the respite period.

Employment assistance: Employment assistance helps people locate paid, individualized, competitive employment in the community, and includes:

- helping the person identify employment preferences, job skills, and work requirements and conditions; and
- prospective employers offering employment compatible with the person's identified preferences, skills, and work requirements and conditions.

Supported employment: Supported employment is provided to a person who has paid, individualized, competitive employment in the community (i.e., a setting that includes

non-disabled workers) to help him or her sustain that employment. It includes individualized support services consistent with the person-directed plan, as well as supervision and training.

Nursing: Nursing is provided to people who require treatment and monitoring of health care procedures that are:

- prescribed by a physician or medical practitioner; or
- required by standards of professional practice or state law to be performed by licensed nursing personnel.

Behavioral supports: Behavioral supports are specialized interventions by professionals to help people increase adaptive behaviors and to replace or modify maladaptive behaviors that prevent or interfere with their inclusion in home and family life or community life. Supports include:

- assessing and analyzing assessment findings so that an appropriate behavior support plan can be designed;
- developing an individualized behavior support plan consistent with the outcomes identified in the person-directed plan;
- training and consulting with family members or other providers and, as appropriate, to the person; and
- monitoring and evaluating the success of the behavioral support plan and modifying it as necessary.

Specialized therapies: Specialized therapies are:

- assessment and treatment by licensed or certified professionals for social work services, counseling services, occupational therapy, physical therapy, speech and language therapy, audiology services, dietary services, and behavioral health services other than those provided by a local mental health authority pursuant to its contract with the Texas Department of State Health Services (DSHS); and
- training and consulting with family members or other providers.

Vocational training: Vocational training is a day training service provided to people in industrial enclaves, work crews, sheltered workshops, or affirmative industry settings to help them get a job.

Day habilitation: Day habilitation is assistance with acquiring, retaining, or improving self help, socialization, and adaptive skills necessary to live successfully in the community and to participate in home and community life. Individualized activities are consistent with achieving the outcomes identified in the person-directed plan and are designed to reinforce therapeutic outcomes targeted by other service components, school, or other providers. Day habilitation is normally provided in a group setting (not in the person's residence) on a regular basis

and includes personal assistance for those who cannot manage their personal care needs during day habilitation and assistance with medications and performing tasks delegated by a registered nurse in accordance with state law.

In-Home Family Support – Mental Retardation (IHFS-MR): IHFS-MR disburses money to eligible people and families to pay for services or items that meet needs necessitated by a person's mental disability or co-occurring physical disability and that allows the person to maintain or improve his or her ability to live in the community. Annual assistance of up to \$2,500 can be used to pay for specialized equipment, home modifications, health services, personal attendant services, training, and respite.

### ***Medicaid ICF/MR Program***

Intermediate Care Facilities for Persons with Mental Retardation (ICF/MR) Program: An ICF/MR, which may be operated by a private or public entity, provides residential and habilitative services, medical services, skills training, and adjunctive therapies with 24-hour supervision and coordination of the individual program plan. These residential facilities range from six beds to several hundred beds for people who have mental retardation or a condition related to mental retardation (related condition).

The two categories of ICF/MR are:

- State Mental Retardation Facility – Texas has 13 campus-based ICF/MR facilities (state schools or state centers) that each serve approximately 100 to 600 people. Facility staff focus on providing intensive and specialized residential services for residents with severe or profound mental retardation and those with mental retardation who are medically fragile or who have behavioral problems. Although the ICF/MR Program criteria includes people with only a related condition, state law limits admissions to state mental retardation facilities to people with mental retardation.
- Community-based ICF/MR – These are community-based residences for people who have:
  - mental retardation;
  - an IQ of 75 or below with a related condition that began before the person turned 22; or
  - a related condition with moderate to extreme behavioral and medical problems.

The owner/operator of each community-based ICF/MR may determine additional specific admission criteria for their facility and may maintain their own interest list. A person may select a particular ICF/MR; however, the ICF/MR must have a vacancy and the ICF/MR provider must approve the admission. Community ICFs/MR vary in size as follows:

- small community ICF/MR – serves up to eight people;
- medium community ICF/MR – serves between nine and 13 people; and
- large community ICF/MR – serves 14 or more people.

Information about vacancies at ICFs/MR can be found at:  
[www.dads.state.tx.us/providers/ICFMR/search/index.cfm](http://www.dads.state.tx.us/providers/ICFMR/search/index.cfm)

### ***Medicaid waiver programs***

Medicaid home and community-based waiver programs provide services and supports to people with mental retardation who live in their own or their family's home or in another home-like setting in the community. They are called waivers because certain ICF/MR requirements are waived.

In most situations, anyone who is eligible for the ICF/MR Program is also eligible for one of the waiver programs. An important and distinguishing feature of funding provided in the waiver programs is that the funding moves with the person to any part of the state. For example, if someone in a waiver program in Houston moves to El Paso, he or she can continue to participate in the waiver program there. A person also can change providers within the same city or area of the state.

Public or private entities may provide waiver program services and supports. DADS certifies all waiver providers initially and then reviews them at least annually to ensure they continue to meet the program certification principles.

The two waiver programs that serve people with mental retardation for which the MRA assists persons to enroll are:

- Home and Community-based Services (HCS) Program: The HCS Program provides services to people with mental retardation who live with their family, in their own home, in a foster/companion care setting, or in a residence with no more than four people who also receive services. The HCS Program provides services to meet the person's needs so the person can maintain himself or herself in the community and have opportunities to participate as a citizen to the maximum extent possible. Services consist of case management, adaptive aids, minor home modifications, counseling and therapies, dental treatment, nursing, residential assistance, respite, day habilitation, and supported employment. Persons living in a foster/companion care setting or an HCS residence pay for their own room and board with either their monthly Supplemental Security Income (SSI) check or other personal resources. There is a limit to the yearly cost of services provided through the HCS Program. Additional information about the HCS Program can be found at: [www.dads.state.tx.us/providers/HCS/index.cfm](http://www.dads.state.tx.us/providers/HCS/index.cfm).
- Texas Home Living (TxHmL) Program: The TxHmL Program provides essential services and supports so that people with mental retardation can continue to live with their families or in their own homes. TxHmL services are intended to supplement, not replace, the services and supports they may receive from other programs, such as the Texas Health Steps Program, or from natural supports such as family, neighbors, or community organizations. Services consist of community support, nursing, adaptive aids, minor home modifications,

specialized therapies, behavioral support, dental treatment, respite, day habilitation, employment assistance, and supported employment. Service coordination is provided by the MRA. TxHmL Program services are limited to a yearly cost of \$10,288 per participant. Additional information about the TxHmL Program can be found at:  
[www.dads.state.tx.us/providers/TxHmL/index.cfm](http://www.dads.state.tx.us/providers/TxHmL/index.cfm)

People whose names are on the interest list for the HCS Program may be offered an opportunity to enroll in the TxHmL Program. If the person enrolls in TxHmL, his or her name will remain on the interest list for the HCS Program.

If someone is offered an opportunity to enroll in either the HCS or TxHmL Program, the MRA will provide information about enrollment timelines.

The following table is a description of the ICF/MR Program, the HCS Program, and the TxHmL Program that may be useful in understanding the differences and similarities between the programs:

<b>Program Element</b>	<b>ICF/MR Program</b>	<b>HCS Program</b>	<b>TxHmL Program</b>
Who's eligible?	<ul style="list-style-type: none"> <li>• Person must be Medicaid eligible*</li> <li>• Person must have mental retardation or a related condition*</li> </ul>	<ul style="list-style-type: none"> <li>• Person must be Medicaid eligible*</li> <li>• Person must have mental retardation or an IQ of 75 or below with a related condition*</li> </ul>	<ul style="list-style-type: none"> <li>• Person must be Medicaid eligible*</li> <li>• Person must have mental retardation or an IQ of 75 or below with a related condition*</li> </ul>
How is a provider selected?	Person may select a particular ICF/MR; however, the ICF/MR must have a vacancy and the ICF/MR provider must approve the admission	Person may select any provider that serves the area where they live or intend to live. If the person moves to another area in Texas, they may select any provider that serves the area where they have relocated. The waiver program provider is required to serve any eligible person who selects it.**	
What's paid for?	Rates pay for the cost of all services as well as room and board and basic personal care items***	Rates pay for all services, but do not pay the cost of room and board or any personal care items, which must be paid by the person***	
Where must the person live?  Who else would live there?	<ul style="list-style-type: none"> <li>• Person must live in the ICF/MR</li> <li>• The number of people served by an ICF/MR can range from six to several hundred</li> </ul>	Person must live: <ul style="list-style-type: none"> <li>• in own home;</li> <li>• in family's home;</li> <li>• in a foster/companion care setting; or</li> <li>• in a program residence that has no more than four residents</li> </ul>	Person must live: <ul style="list-style-type: none"> <li>• in own home; or</li> <li>• in family's home</li> </ul>
When would staff be available?	Program provides staff 24 hours per day	Staff availability depends on person's needs and the service option chosen	Staff availability depends on person's needs and total cost of services

\* Specific eligibility criteria are described in 40 TAC Chapter 9, Subchapter E governing ICF/MR Programs — Contracting; 40 TAC Chapter 9, Subchapter D governing HCS; and 40 TAC Chapter 9, Subchapter N governing TxHmL.

\*\* Providers who are operating at their contracted capacity level are not required to accept additional persons.

\*\*\* For a Medicare beneficiary in ICF/MR, HCS, or TxHmL, all prescription medications are provided through the Medicare Prescription Drug Program. Persons in the HCS or TxHmL Program are responsible for minimal co-payments.

## Person-Directed Planning

When someone is offered mental retardation services and supports, the MRA uses a person-directed planning process to develop an individualized plan of services and supports. This process empowers the person and his or her family to direct the development of a plan that meets the person's goals. The process:

- identifies existing supports and services necessary to achieve the person's goals;
- identifies natural supports available to the person and negotiates needed services and supports;
- is done with the support of a planning team that consists of people chosen by the person and family; and
- mirrors the way in which people without disabilities make plans.

Additional information about person-directed planning can be obtained from the MRA or at: [www.dads.state.tx.us/providers/mra/person\\_directed\\_planning.html](http://www.dads.state.tx.us/providers/mra/person_directed_planning.html)

## Selecting provider of services and supports

After you identify your preferred services and supports and it is determined that they are available, a provider must be selected. In most areas of the state, there is a choice of providers for the services and supports described in this document. It is important that you visit with different providers in order to gather information that will help you make a selection. The number of providers you choose to contact is your decision, but in most cases it is helpful to talk with more than one.

You may consider asking potential providers some of the following questions. Not all questions may be pertinent to your situation but they may help you formulate your own questions. You are encouraged to add or delete questions to fit your situation.

1. What is your agency's mission statement or philosophy? Why does your agency provide services and supports to people with mental retardation (MR) or developmental disabilities (DD)?
2. How long has your agency been a provider? What areas of the state does your agency serve?
3. Do you own or lease your residential home(s)? If you lease, is it a short-term or long-term lease?
4. How many people are receiving services and supports from your program? How many people can the program serve?
5. Do you have references?
6. Does your staff have experience in serving people with *[fill in the blank as appropriate, for example, MR, autism, mental illness]*?
7. How do you ensure that staff are trained and prepared?

8. Does your staff receive training in serving people with *[fill in the blank as appropriate, for example, MR, autism, mental illness]*? Can you provide records for staff training specific to *[fill in the blank as appropriate e.g., MR, autism, mental illness]*?
9. How often does staff turn over, especially direct care staff?
10. Do you require pre-employment screenings (e.g., drugs, criminal background, abuse and neglect)?
11. What types of emergencies or crises are staff trained to handle?
12. What is your staff-to-person ratio?
13. Do you have medical or dental staff on site or on call?
14. What type of licensure or credential is required for staff?
15. Describe ways in which you involve a person and family members in the development of the person's program plan. How are their preferences addressed if they differ from the goals of your agency?
16. What choices are provided with regard to day programming, vocational training, supported employment, etc.?
17. Describe how staff helps a person learn daily living skills.
18. What types of personal-use items are purchased by your agency? What types are not?
19. Do you develop formal plans to manage behavior problems? If so, do those plans have to be approved by a special committee or an outside professional (e.g., a psychiatrist)? If a special committee is used, does it include outside members, professionals, parents, and persons with MR or DD?
20. What are your policies regarding visitors and privacy?
21. Do persons choose their daily routines?
22. What leisure and recreational activities are available?
23. How does your program accommodate a non-ambulatory person?
24. Do you have staff fluent in other languages or other types of communication (e.g., sign language)? If not, is an interpreter available?
25. What type of transportation is available for persons? Is it reliable and readily available?
26. Is staff available to support a person's participation in community activities such as leisure activities, sports, and religious services?

27. How and where are persons who are ill cared for?
28. Is medical staff willing to practice with a person who is uncomfortable with medical or dental procedures?
29. Will the person be able to live near *[fill in the blank as appropriate e.g., current school, day program, place of employment, family]*?
30. How does your agency build community awareness and prepare neighborhoods about persons with MR or DD who may move into their neighborhood? How are neighborhood disputes handled?
31. How does a person or family member lodge a complaint?
32. Have allegations about abuse or neglect been made about your program? Have any been confirmed?

## Provider survey and certification information

Certification principles for HCS and TxHmL program providers can be found in DADS rules governing these programs at [www.sos.state.tx.us](http://www.sos.state.tx.us). Click on "Texas Register" icon. On the left side of the screen click on "Texas Administrative Code." In the box on the right side of the screen, click on "TAC Viewer." At the bottom of the screen, click on "Title 40 Social Services and Assistance." Click on "Part 1 Department of Aging and Disability Services." Click on "Chapter 9," then:

- for HCS provider certification principles, click on "Subchapter D," then click on §§9.172 through 9.179.
- for TxHmL provider certification principles, click on "Subchapter N," then click on §§9.578 through 9.580.

To request copies of survey documents, which include investigations of complaints, or agency literature such as directories, regulations, or publications, call 1-800-458-9858 and follow the voice prompts.

Every licensed ICF/MR is required to post in its facility its most recent survey report and a notice that survey and related reports are available for public inspection.

Information about ICF/MR licensing, certification, and enforcement can be found at:

[www.dads.state.tx.us/providers/ICFMR/index.cfm](http://www.dads.state.tx.us/providers/ICFMR/index.cfm)

Agencies that investigate abuse, neglect and exploitation in mental retardation programs can be found at:

[www.dfps.state.tx.us/Contact\\_Us/hotlines.asp](http://www.dfps.state.tx.us/Contact_Us/hotlines.asp)

[www.dads.state.tx.us/news\\_info/report\\_problems.html](http://www.dads.state.tx.us/news_info/report_problems.html)

## Other services and supports

Texas Department of Assistive and Rehabilitative Services (DARS): DARS helps people with mental or physical disabilities prepare for, find, and keep a job. People with physical or mental disabilities that result in a substantial impediment to employment are eligible for these services. Vocational rehabilitation services include supported employment, extended rehabilitation services, and transition planning. More information is available by calling 1(800) 628-5115 or at [www.dars.state.tx.us](http://www.dars.state.tx.us).

DARS also provides support to families with children up to 3 years of age with disabilities or developmental delays through Early Childhood Intervention Services. More information is available by calling 1(800) 250-2246 or at [www.dars.state.tx.us](http://www.dars.state.tx.us).

## For additional information

After reviewing this information, you may have questions or concerns. You are encouraged to visit with your MRA representative in person. You may find it useful to speak with people who are receiving services or their family members. Your MRA representative can help you do so. Additionally, there are organizations that provide advocacy and information to people with mental retardation and their family members. The following alphabetical listing is offered for your convenience:

<p><b>Advocacy, Incorporated</b> 7800 Shoal Creek Blvd., Suite 171-E Austin, TX 78757 (512) 454-4816      8 a.m.–5 p.m. 1-800-252-9108    12:30 p.m.–5 p.m. (M W F)                                  12:30 p.m.–8 p.m. (T Th)</p>	<p><b>Texas Center for Disabilities Studies</b> UT JJ Pickle Campus 10100 Burnet Rd., Bldg. CMS, #137 MC/L4000 Austin, TX 78758 1-800-828-7839 <a href="http://uap.edb.utexas.edu">http://uap.edb.utexas.edu</a></p>
<p><b>DADS Consumer Rights and Services</b> 1-800-458-9858</p>	<p><b>Texas Council for Developmental Disabilities</b> 6201 E. Oltorf, Suite 600 Austin, TX 78741-7509 1-800-262-0334 <a href="http://www.txddc.state.tx.us">www.txddc.state.tx.us</a></p>
<p><b>EveryChild, Inc.</b> 4107 Spicewood Springs Rd, Suite 216 Austin, TX 78759 (512) 342-8844 1-877-742-8844 <a href="http://www.everychildtexas.org">www.everychildtexas.org</a></p>	<p><b>The Arc of Texas (and Texas Advocates)</b> 8001 Centre Park Drive, Suite 100 Austin, TX 78754 1-800-252-9729 <a href="http://www.thearcoftexas.org">www.thearcoftexas.org</a></p>
<p><b>Parent Association for the Retarded of Texas, Inc. (PART)</b> P.O. Box 9733 Austin, TX 78766-9733 <a href="http://www.partoftx.org">www.partoftx.org</a></p>	<p><b>United Cerebral Palsy of Texas</b> 1016 La Posada, Suite 145 Austin, TX 78752 1-800-798-1492 <a href="http://www.ucptexas.org">www.ucptexas.org</a></p>