

Mental Health Waiver Program Participant Eligibility Requirements

Participants must meet all of the requirements of Section 1, and one of the requirements of Section 2

Section 1 (all of the following five requirements)

- f* An adult, 22 years of age or older;
- f* Who is Medicaid-eligible;
- f* Meets Medicaid State Plan criteria for nursing home level of care;
- f* Voluntarily chooses to participate in the waiver;
- f* Has a diagnosis of serious mental illness as defined by State of Connecticut PASRR policy;

Section 2 (one of the following three requirements)

- f* Is currently a resident of a nursing facility;
- f* Is a participant in Money Follows the Person (MFP);
- f* Has a psychiatric history, impairment, and service needs as evidenced by the following:

Has history of:

- Two or more inpatient psychiatric hospitalizations in the past two years; or
- A single inpatient psychiatric hospitalization lasting 30 consecutive days or more in the past two years; or
- Three crisis episodes in the past year requiring face-to-face assessment, but not necessarily requiring inpatient hospitalization;

Is currently experiencing 2 or more of the following circumstances due to serious mental illness:

- Has been recommended to take, or currently uses prescribed medication to control psychiatric symptoms;
- Is unable to work in a full-time competitive employment situation;
- Requires ongoing supervision and support to maintain a community living arrangement;
- Is homeless, or at risk for homelessness;
- Has had, or will predictably have, repeated episodes of decompensation, such as increased symptoms of psychosis; self-injury; suicidal/homicidal ideation; or psychiatric hospitalization.

Has level of risk to self or others that a licensed mental health professional has determined can be managed safely in the community.

Have the following core services needs, if living in the community:

- One-on-one rehabilitative activities in the home or in other community settings to assist in managing psychiatric, substance use, or medical problems, and in meeting requirements of everyday independent living; and
- Support Coordination to assist in developing and implementing a Recovery Plan that ensures psychiatric and/or medical needs are met.

If you have questions about Participant Eligibility please call: Cheryl Janes at (860) 262-6956, or email Cheryl.janes@ct.gov