



Frequently Asked Questions: Texas Medicaid Waivers

Q: What are Medicaid Waivers?

A: Waivers are federally funded programs that allow states to provide long-term home and community-based services to people with disabilities or who have special health care needs.

Q: What Waiver Programs Does Texas Offer?

A: Waiver programs differ by state and are specifically designed to meet the needs of an individual. Texas offers seven different waiver programs. This includes:

1. Community Living Assistance and Support Services (CLASS)

- Offers home and community supports to children and adults with similar conditions.

2. Deaf Blind with Multiple Disabilities (DBMD)

- Offers services to children and adults who are deaf-blind or have a similar condition and who have another disability.

3. Home and Community-Based Services (HCS)

- For children and adults with an intellectual disability (ID) or a similar condition who live with their families, independently, or in small group homes consisting of no more than 4 people.

4. Medically Dependent Children Program (MDCP)

- Provides services to individuals who are medically fragile as an alternative to receiving services in a nursing facility. Individuals must be 20 years of age or younger.

5. STAR+PLUS Home and Community-Based Services (HCBS)

- Offers services to adults over the age of 21 with the intent of keeping them within their community and not in a nursing home facility.

6. Texas Home Living (TxHmL)

- Provides services to children and adults with an intellectual disability (ID) or a similar condition who live in their own home or their family's home.

7. Youth Empowerment Services (YES)

- Offers services to children under the age of 19 who require psychiatric inpatient care or whose parents would turn to state custody for care.

Q: What Services Can I Access with a Waiver?

A: Each type of waiver can provide a range of services dependent on the needs of the individual. Services can/may include: nutritional counseling; case management; behavioral health services; day habilitation; supported living; community integration; personal care services; respite care; transportation; occupational therapy; physical therapy; and speech therapy. *This list is not exhaustive and individuals should speak with a specialist for further consultation of services.

Q: Why Are They Called Waivers?

A: The term “waiver” refers to Medicaid requirements being “waived,” allowing individuals and families to access services without having to exhaust their income to do so.

Q: How are Waivers Managed in Texas?

A: All waivers are managed by the [Health and Human Services Commission \(HHSC\)](#) and the [Department of State Health Services \(DSHS\)](#).

Q: How Do I Access a Waiver for Myself or My Child?

A: Waiver recipients must be added to the specific waiver “interest list”. Once added, they will wait until an available waiver slot is open before being considered for eligibility.

- Individuals and families seeking CLASS, DBMD, and MDCP waivers should contact 1-877-438-5658 to learn more about the desired waiver and to be added to the interest list.
- Individuals and families seeking YES waiver should contact your Local Mental Health Authority. Visit the DSHS website to locate in your area.
- Individuals and families seeking HCS and TxHmL waivers should contact the Local Intellectual and Developmental Disability Authority (LIDDA). <https://apps.hhs.texas.gov/contact/search.cfm/>

Q: Do I Have to Choose One Waiver?

A: No. Individuals can be added to as many waiver interest lists as possible and are encouraged to do so as soon as there is a diagnosed disability or special health care need. Individuals can also be added to interest lists without a diagnosis if there is reason to believe they will require special health care needs or have a long-term disability.

TIPS:

- Ask for email confirmation or mailed letters once added to an interest list.

- Keep your address and phone number updated to ensure your status remains active on interest lists.
- Call to update or confirm your contact information at least once per year.

Q: What Happens When My Child Moves to the “Top” of the Interest List?

A: A service coordinator, case manager, or nurse will contact you to schedule a home visit and discuss eligibility and next steps.

Q: What are the Eligibility Requirements in Texas?

A: All individuals must meet the following criteria:

- a. Must be a current resident in the state of Texas
- b. Must have a Social Security Number (SSN) or apply for one.
- c. Must be a citizen of the United States or qualify for alien status.

Financial Eligibility: This is determined by the applicant’s household income in comparison to the federal poverty level (FPL).

Q: Where Can I Gather Additional Information about Texas Medicaid Waivers?

A: Additional resources and information can be found here:

- **Comprehensive chart that compares each waiver program:**
<https://www.hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/resources/ltss-waivers.pdf>
- **Texas Department of State Health Services (DSHS):** <https://www.dshs.texas.gov/>
- **Texas Health and Human Services (HHS):** <https://www.hhs.texas.gov/> or call 1-855-937-2372 to speak with a trained professional.

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