Federally Approved Changes to the Community and Employment Supports (CES) Waiver
Brief overview

The Community and Employment Supports (CES) waiver is a program that allows children and adults to remain in their homes and communities rather than living in an institution.

Clients on this program have a diagnosis of Autism, Cerebral Palsy, Seizure Disorder/Epilepsy, Down Syndrome, Spina Bifida, or an Intellectual Disability established by significant intellectual limitations that exist concurrently with deficits in adaptive behavior that are manifested before the age of 22.

Currently the waiver serves approximately 5,400 children and adults and the most utilized service is Supportive Living which allows a direct support professional to assist clients in their homes and communities.

The waiver cost approximately $300 million annually with the federal share currently at 71.62% and the state share currently at 28.38%.

DHS projects that once all new slots are filled by the end of year 3, the total approximate annual cost will be $442 million.
Added new waiver slots

DDS added sufficient new waiver slots over the next three years to serve the 3,204 clients who were on the waiting list as of December 2021.

The slots are not a one-to-one match due to annual attrition.

DDS is adding 200 additional slots for children in foster care.
Changes to Services to clients

- Increased supportive living capacity from 4 to 8 to address trends in institutionalization we are seeing due to the pandemic and workforce shortage
- Allows providers to bill for Supportive Living while a client is in the hospital through expansion of health maintenance activities
- Allows family members to be paid staff when employed by Provider
  - A family member, who is the legal guardian or parent, can be paid direct care staff to an adult or child on the waiver if they meet the requirements.
Technical changes, clarifications, and corrections

- Clarified responsibilities for provider certification between DHS and the PASSEs
- Clarified internal roles within DHS for the eligibility approval process
- Clarified the meaning of “administration” of medication
- Changed terminology to be consistent throughout the waiver
- Clarified which clinicians may provide tasks under Consultation services
- Corrected requirements for Care Coordinator qualifications
Eliminated duplication and unnecessary restrictions

- Eliminated experience requirements for direct support professionals and replaced them with training requirements that mirror what we have allowed during the COVID-19 pandemic
- Improved language about Supported Employment by replacing prescriptive language with examples
- Removed Crisis Intervention because it is a service already available under the PASSE program to all members
- Removed language that overly restricts who can receive Respite Services and where
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