

**A GUIDE TO GEORGIA'S SERVICES  
FOR PERSONS  
WITH MENTAL RETARDATION AND  
DEVELOPMENTAL DISABILITIES**

Georgia Department of Human Resources  
Division of Mental Health, Developmental Disabilities and Addictive Diseases  
2 Peachtree Street, NW  
Room 22.470  
Atlanta, Georgia 30303

## **I. How do I locate public services for people with mental retardation in Georgia?**

The regional office representing Georgia's Division of Mental Health, Developmental Disabilities and Addictive Diseases that includes your county of residence is your first contact point.

Regional offices representing the Division of Mental Health, Developmental Disabilities and Addictive Diseases (MHDDAD) plan, coordinate and contract all publicly-supported hospital and community services, and evaluate and monitor those community programs and services. The addresses and phone numbers for each regional MHDDAD office are located at the back of this booklet. You may also contact the Division of Mental Health, Developmental Disabilities and Addictive Diseases Office of Developmental Disabilities @ **404-463-8037**. If you have a personal computer, Internet information is available at [www.dhr.state.ga.us](http://www.dhr.state.ga.us); first click on of Division of Mental Health, Developmental Disabilities and Addictive Diseases, then click on the regional office representing your county.

## **II. Who is eligible for services?**

**A.** To be eligible for state-supported developmental disability services, you must have a diagnosis of mental retardation or a developmental disability and meet the criteria for "*most in need*." People who are "*most in need*" of services are those with social, emotional, developmental, or physical disabilities resulting from mental retardation/developmental disabilities who without state-supported services, would have significant difficulty or be unable to successfully live day to day. In addition, family support services are available for people with autism and certain other developmental disabilities.

**B.** Most of Georgia's public developmental disability services are supported by Medicaid waiver funds. To receive Medicaid waiver services, you must:

- Be Medicaid eligible;
- Have mental retardation since birth or before age 18 or another developmental disability since birth or before age 22, which requires services similar to those needed by people with mental retardation;
- Live in an institution for people with mental retardation or developmental disabilities; or
- Be at risk for going into an institution for people with mental retardation (ICF-MR) if you are not able to get the services you need in the community.

## **III. Will I have to pay for services I receive?**

Your income and ability to pay determine the cost to you for state-supported services. As part of determining eligibility for state-supported developmental disability (DD) services, your ability to pay will be evaluated. If you are eligible for DD services under the waiver, the Mental Retardation waiver pays for most community-based DD services.

Any payment for services will be discussed with you before you receive services.

#### **IV. How can I apply for Medicaid?**

If you have a disability, you or your representative can apply for Supplemental Security Income (SSI) by contacting your local Social Security office. You may call 1-800-772-1213 to find your closest Social Security office.

If you are approved for SSI, you will automatically be eligible for Medicaid.

#### **V. What if I receive regular Social Security or receive more benefits than allowed under the MRWP Medicaid waiver?**

You may be eligible for “Medical Assistance Only” (MAO) if your monthly income is higher than the amount a person can receive and be eligible for regular Medicaid, but not high enough for you to pay all of the expenses that would be required for your care.

To apply for Medical Assistance Only, contact your county Department of Family and Children Services (DFCS) after your Intake and Evaluation Team have screened you for eligibility for Medicaid waiver services. You will need to show DFCS that you are eligible for MR waiver services. This can be accomplished by bringing a completed “Level of Care” with you to your DFCS appointment. This form will be supplied to you after you are seen by the Intake and Evaluation Team.

You may contact DFCS public information at 404-657-7660. If you have a personal computer, internet information is available at [www.dhr.state.ga.us](http://www.dhr.state.ga.us); first click on Family and Children Services, then “E-mail us,” and select “Eligibility: Medicaid, Food Stamps, and/or Temporary.”

#### **VI. What services are provided in Georgia?**

Georgia offers a variety of services to people with mental retardation or developmental disabilities who are eligible for services. Some services are available through state dollars only, while others are available through Medicaid waiver dollars only. Your specific needs will determine which services are most appropriate for you.

- Support Coordination – a required case management service for all individual recipients of MHDDAD funded services that connect people to the services that they need.
- Consumer and Family Education – provides instruction, classes and workshops on mental retardation/developmental disabilities.
- Counseling and Training – helps people learn social skills and appropriate behavior.
- Day Programs - help people develop social, leisure, work-related and daily living skills. These programs include: Day Supports, Day Habilitation and Supported Employment.

- Personal and Natural Supports - provide training and in-home assistance to help people with mental retardation/developmental disabilities continue to live with their families or on their own.
- Family Support – a broad range of goods and services such as respite, personal living benefits, behavioral supports and specialized clothing or equipment, designed to assist families in supporting a loved one with disabilities who is living in the home.
- Nursing Assessment and Services – identifies physical and psychological health needs. Provides health care as required.
- Physician Assessment and Care – identifies medical and psychological needs and issues. Provides medical care as required.
- Respite Care - offers temporary care during an emergency or when the family or caretaker needs a break.
- Residential Programs - provide supervised living arrangements in community homes and apartments.
- Specialized Medical Supplies and Equipment – covers items such as food supplements, special clothing, communication devices, and equipment such as wheelchairs.

## **VII. What steps do I need to take to apply for state-supported or Medicaid waiver MR services?**

**A.** The regional Intake and Evaluation agency/office that includes your county of residence is your first contact point. Ask them to mail you an application or to tell you where you may pick one up. An application may also be found on some Intake and Evaluation agencies' websites. If websites are available, they are noted on the regional contact list at the back of this booklet.

Fill out the application and return it to the Intake and Evaluation agency. You can deliver it in person or send it by mail or fax—whichever is most convenient.

When your application is received, it will be stamped with a date.

- B.** When you come in for the screening appointment, please bring the following items:
- Copies of any previous evaluations completed by your doctor, a psychologist, the school(s) you (the person needing services) have attended, and any other documents containing information about your skills and abilities that have been done by any other person or agency;
  - Addresses for your doctor, psychologist, school, and any other evaluating person or agency;
  - Copies of your Medicaid, Medicare and/or insurance information;

- Copies of your (the person needing services) most recent income information such as last year's tax return, a recent pay stub, or your Social Security benefit information. If the person needing services is under age 18, information about family income will also be required.

C. You (and your representative, if appropriate) will be notified IN WRITING about the preliminary eligibility determination within seven working days after your screening appointment. At that time, one of the following things will occur:

- You will be notified that you are not eligible, based on preliminary determination of eligibility (*see appeal process below*) or
- You will be notified that you are eligible for services needed, based on preliminary determination of eligibility, and that funding is currently available *or*
- You will be notified that you are eligible, based on preliminary determination of eligibility, however funding for services needed is not available at this time.

D. If you are notified that you are eligible, however funding for services needed is not available at this time in order to provide you some or all of the services that you need, you will be placed on a planning list that the regional MHDDAD office maintains. Your regional MHDDAD office representative will discuss this further with you and will let you know if any part of the services that you need can immediately be made available to you.

When funds become available, individuals on the planning list are provided services based on the urgency of their needs.

## **VIII. What if I disagree with any part of the decision about whether I am eligible for DD services?**

You have the right to appeal if you are not satisfied with any part of the eligibility decision.

A. Where do I send my appeal?

**1. If you are NOT Medicaid eligible,** your appeal about whether you are eligible for MR/DD services should be directed to the regional office for the Division of MHDDAD.

Contact your regional MHDDAD office to ask for a copy of the appeal process.

You must submit your appeal to the regional office representing the Division of MHDDAD IN WRITING within 30 working days of the date on the letter telling you about the decision. If you are unable to submit your appeal in writing, contact the regional MHDDAD office. They will assign a staff person to assist you in submitting your appeal.

**2. If you are Medicaid eligible,** your appeal should be directed to the Division of Medical Assistance AND to the Division of MHDDAD. You must submit your concerns IN WRITING within 10 working days of the date of the letter telling you about the eligibility decision.

If you are unable to submit your appeal in writing, contact the regional office representing the Division of MHDDAD. They will assign a staff person to assist you in submitting your concerns. Direct your concerns to both of these agencies:

Mental Retardation Program Specialist  
DCH Division of Medical Assistance  
Two Peachtree Street, NW, 37<sup>th</sup> Floor  
Atlanta, Georgia 30303

*And send a copy to:*

Medicaid Waiver Program Specialist  
DHR Division of MHDDAD,  
Two Peachtree Street, NW, 22nd Floor  
Atlanta, Georgia 30303

## **IX. If I am placed on the region's planning list, how will I know when I can receive the services I need?**

**A.** A representative from your regional Division of MHDDAD office will contact you at least every twelve months to update their information about your current situation. *You should contact the regional MHDDAD office any time your situation changes.*

A representative of the regional MHDDAD office will call or write you (and your representative, if appropriate) if services become available before your next scheduled contact.

**B.** What information is used to move me from the planning list into the services I need?

First, funds must be available to pay for the needed services. Then, your need for services will be carefully reviewed. A number of factors are considered, such as:

- Do you have a caretaker?
- Can your caretaker continue to provide care?
- Do you have any special health or behavior issues that urgently need attention?

Staff from your regional office representing the Division of MHDDAD will discuss this with you if you are placed on the planning list.

**C.** What if I have questions that are not answered here?

Contact the regional office representing the Division of MHDDAD with any additional questions that you have. The staff of the regional MHDDAD office will help you through this process, answer your questions and make sure your unique situation is understood.

## **X. Will I ever be discharged from MR waiver services?**

There are several very specific circumstances that could cause you to be discharged from MR waiver services. You would be notified in writing if you were to be discharged from the waiver. Several examples of the specific circumstances that could cause you to be discharged are listed below.

- It has been determined that services you were receiving are no longer needed.
- The source of funding for the services you have received has been changed
- You have moved from Georgia
- The level of care you require has changed.
- You have requested in writing that your services be terminated
- Your Medicaid eligibility has been discontinued

If one of these circumstances occurs and you disagree with this decision, you may request a fair hearing. You have thirty (30) days from the date of the letter to request a hearing in writing. Send your request to:

Department of Community Health  
Legal Services Section  
Division of Medical Assistance  
Two Peachtree Street, NW, 40th Floor  
Atlanta, Georgia 30303-3159

*And send a copy to:*

Medicaid Waiver Program Specialist  
DHR Division of MHDDAD,  
Two Peachtree Street, NW, 22nd Floor  
Atlanta, Georgia 30303

## **XI. Does the regional office representing the Division of MHDDAD provide services?**

The regional offices representing the Division of MHDDAD do not provide services. Services are provided by agencies under contract with the regional MHDDAD offices. At any time during the application process or while receiving services, if you have questions or concerns, call your regional MHDDAD office for help.

## **XII. What are my rights?**

As an applicant and a consumer of services, you have rights. Your rights include:

- Getting the care that you need
- Being treated with respect and dignity
- Having your health and safety protected
- Choosing how, when, where and by whom your services will be delivered
- Taking part in planning your own treatment
- Knowing the benefits and risks of your treatment
- Having continuity in the services you receive
- Being free of restraints or seclusion, except as a last resort for safety
- Being free of physical, sexual or verbal abuse
- Being free of neglect or exploitation
- Being able to grieve/appeal decisions concerning your care
- Exercising your rights without fear of harm

You are encouraged to ask questions about your services and your rights. You may talk with any staff member of the agency serving you. Or you may talk with someone outside the agency, such as staff of the regional MHDDAD office. Or if you prefer, you may call or write someone at the Office of Consumer Protection in Atlanta at 404-657-6737. The address is:

Office of Consumer Protection  
Division of Mental Health, Developmental Disabilities and Addictive Diseases  
Two Peachtree Street NW  
Suite 22:470  
Atlanta, Georgia 30303