June 30, 2016

The Department of Human Services is changing the way it manages its wait list for Home and Community-Based Services (HCBS) funded by the Older Americans’ Act effective July 1, 2016. The change will help consumers better understand the likelihood that they will receive a requested service within the next year, based on their level of need.

Frequently Asked Questions:

How is the new policy different?

The Department is focusing on the Older American’s Act criteria for targeting individuals most in need. This includes those who are frail, living alone, living in a rural area, living at or below the poverty level, minority individuals and those who are at risk of institutionalization.

Anyone age 60 or older may contact their local Area Agency on Aging (AAA) to request services funded by the Older Americans’ Act. The AAA completes an assessment to determine the level of assistance needed and to determine the individual’s financial need.

As part of the change in policy, the Department has also added a tier system to help applicants understand how likely they are to receive services in the next year.

- Individuals placed on a “Tier 1” waiting list are at a high level of need and are most likely receive the requested service within the next 12 months. A local AAA staff member will contact the individual within six months to see if their condition has changed.
- Individuals placed on a “Tier 2” waiting list have been assessed and determined to have a lower level of need than a person with a “Tier 1” assessment. These individuals will not be contacted by the local AAA, but will be encouraged to request services again if there is a change in their condition.
Why is the Department changing the policy?

The policy change is a result of customer satisfaction surveys and a focus group that expressed dissatisfaction with the previous process for managing the HCBS waiting list. Quality assurance surveys also revealed concerns with the increasing number of individuals added to the list but who would not receive a service, and the time spent calling individuals every six months who, due to a lower level of need, were unlikely to receive services. The Department determined it would be more beneficial to those requesting services to spend time discussing alternative solutions to their needs and to provide a more realistic expectation for those seeking placement on the waiting list. Prior to implementing the policy, the Department vetted the policy change with key stakeholders, including AAA staff, and ensured their approval before moving forward.

Why can't someone's name be added to the list so they can “move up on the list?” They may not need the service now but might be in a crisis later and would benefit from having their name on the list.

The Department manages the waiting list in a manner that assures those with the highest level of need are given priority. Time spent on the waiting list does not guarantee getting the service. An individual’s placement on the waiting list is determined by the need for a specific service.

What if someone doesn't want to wait for the service? What can he/she do?

There is always the option to pay for the service rather than receive it free or at a reduced cost. If someone is able and willing to pay for a service, it can be provided right away. An Options Counselor will provide information for both free and reduced services and paid services during the call.

I have additional questions. Who should I contact?

Those with additional questions about the changes to the HCBS wait list policy should contact Cheryl Harris, Access to Services Manager for the Department’s Division of Aging Services. Cheryl can be reached by email at Cheryl.harris@dhs.ga.gov.