

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT202651    APRIL 7, 2026

## **FSSA clarifies home modifications for H&W, TBI and PathWays waiver providers**

The Indiana Family and Social Services Administration (FSSA) Office of Medicaid Policy and Planning (OMPP) and Bureau of Disabilities Services (BDS) would like to clarify the requirements for providers completing home modifications under the Medicaid Home- and Community-Based Services (HCBS) Health and Wellness (H&W), Traumatic Brain Injury (TBI) and Indiana PathWays for Aging (PathWays) waivers to align with the Community Integration and Habilitation (CIH) and Family Supports (FS) waivers.



Home modifications are physical adaptations to a home that are necessary to ensure the health, welfare and safety of the individual. Waiver funding covers only basic modifications determined to be medically necessary for the waiver individual and is not available for items that exceed basic medical need. Requests to upgrade products or to use materials exceeding the individual's basic needs will not be approved.

Due to the state's responsibility to ensure each modification is the most cost effective to meet the individual's basic needs for accessibility within the home, it is **not** acceptable to submit bids attempting to combine waiver funding for basic modifications with private funding to cover the higher costs of the desired upgrades.

If an individual or family requests an upgrade, such as tile floor when basic vinyl is the lowest cost product to meet the need, then the individual or family must assume financial responsibility for the entire modification. Basic modifications covered under the home modification benefit will match existing architecture and aesthetics as much as possible.

### **Home modification grievances**

If there are any complaints, issues or discrepancies, members need to notify the following:

- For H&W and TBI waivers – The BDS must be notified within 48 hours at [BDS.Help@fssa.in.gov](mailto:BDS.Help@fssa.in.gov). The BDS must approve any alterations to a bid prior to implementation.
- For PathWays waiver – The managed care entity (MCE) must be notified either through the grievance and appeal process or through the member's assigned service coordinator.

If the state or MCE determines the provider is at fault for poor and/or incorrect work during the home modification, the provider shall replace or repair any product or installation at no cost to the state or individual.

**QUESTIONS**

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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