

SEPTEMBER 2026

KMAP GENERAL BULLETIN 26153

UPDATED: New Waiver Program – Community Support

Effective on or after October 1, 2026, the Kansas Medical Assistance Program (KMAP) will implement the Community Support Waiver (CSW) program. The CSW program is designed to serve individuals with intellectual and/or developmental disabilities (I/DD) who:

- Meet institutional level of care criteria, but
- Require fewer supports than those provided through the comprehensive I/DD waiver, and
- Can have their needs met within a legislatively established annual cost cap of \$20,000

The CSW is founded on person-centered principles that support participant choice, self-determination, and community inclusion. Through the person-centered planning process, participants are empowered to identify and select the services and supports that best meet their individual needs, preferences, and goals. Participation in the Community Support Waiver is voluntary and based upon informed individual choice.

To enroll in the Community Support Waiver, an individual must meet I/DD program eligibility requirements, satisfy institutional Level of Care criteria through the state-approved MFEI-I/DD assessment process, and meet all applicable Kansas Medicaid financial eligibility requirements. Eligibility for waiver enrollment is subject to KDADS approval and available waiver capacity.

Eligible participants may receive one or more of the following Community Support Waiver services, as identified through assessment and documented in the participant's approved Person-Centered Service Plan (PCSP):

- Assistive Services
- Behavior Therapy
- Benefits Planning
- Career Exploration and Planning
- Family/Caregiver Support and Training
- Home and Environmental Modification Services (HEMS)
- Home Telehealth
- Individual Employment Support (IES) Services
- Individual-Directed Goods and Services
- Life Skills Services
- Medication Reminder Services
- Non-Medical Transportation (NMT)

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- Occupational Therapy
- Personal Care Services
- Personal Emergency Response Services
- Physical Therapy
- Remote Support
- Respite Care
- Specialized Medical Equipment Services (SMES)
- Speech and Language Therapy
- Vehicle Modification Services (VMS)
- Financial Management Services (FMS)*

All HCBS Community Support waiver services require prior authorization through the Plan of Care (POC) process.

*When applicable to self-directed service delivery, refer to the HCBS Financial Management Services (FMS) Provider Manual for criteria and information.

For more information about the program, services, and provider resources, visit KS CSW Program.

Provider Enrollment

Providers of Community Support Waiver services must be enrolled with the Kansas Medical Assistance Program (KMAP) and obtain the necessary enrollment approvals before delivering CSW services.

- Refer to the published KMAP bulletin [26131 - New Provider Specialties for Community Support Waiver Program](#) for the provider enrollment requirements.
- The detailed list of required attachments including the attestation requirements can be found on KMAP Public Page under PT 55 on the Enrollment Applications tab at [Provider Publications](#).
- The Universal Attestation Form can be found on KMAP Public Page under [Publications/Forms](#).

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KDADS Approved Trainings for CSW Service Providers

As part of the enrollment process, providers will be required to sign an attestation confirming completion of all applicable training requirements for the services in which they are enrolling. Providers must retain documentation of completed training and be prepared to provide supporting documentation to a Managed Care Organization (MCO) upon request.

For detailed information on KDADS-approved and recommended training requirements, including applicable provider types and service-specific training expectations, please refer to the KMAP bulletin [26150 – CSW KDADS-Approved Trainings for Service Providers](#).

For detailed information regarding Community Support Waiver (CSW) program administration, providers should refer to the [KMAP Community Support Waiver \(CSW\) Provider Manual](#), including guidance related to:

- Eligibility, enrollment, and service authorizations
- Functional assessments and reassessments
- Waiver enrollment
- Crisis and exception processes
- Transition to the CSW Program
- HCBS access requirements
- Person-Centered Planning (PCSP)
- Administrative and compliance requirements
- Electronic Visit Verification (EVV)
- Benefits and Limitations
- Other waiver-specific policies and procedures

Note: The effective date of the policy is October 1, 2026. The implementation of State policy by the KanCare Managed Care Organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The **KanCare Open Claims Resolution Log** on the KMAP [Bulletins](#) page documents the MCO system status for policy implementation and any associated reprocessing completion dates once the policy is implemented.

For changes resulting from this bulletin, view the new HCBS *Community Support Waiver Provider Manual*.

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