

# HIV/AIDS Waiver

<b>Service by setting</b>	<b>In home</b>	<b>In community</b>
Case Management	<b>X</b>	<b>X</b>
Personal Care I/II	<b>X</b>	<b>X</b>
Attendant Care	<b>X</b>	<b>X</b>
Companion Care	<b>X</b>	<b>X</b>
Private Duty Nursing	<b>X</b>	
Home Delivered Meals	<b>X</b>	
Home Accessibility Adaptations	<b>X</b>	
Specialized Medical Equipment & Supplies	<b>X</b>	