Rule No. 560-X-35-.02 Description of Services

Home and Community-Based Services (HCBS) under the Home and Community-Based Waiver for Persons with Intellectual Disabilities (ID Waiver) are defined as Title XIX Medicaid-funded services provided to individuals with intellectual disabilities who, without these services, would require services in an intermediate care facility for individuals with intellectual disabilities (ICF/IID). These HCBS under the ID Waiver services will provide health, social, and related support needed to ensure optimal functioning of an-individuals with an-intellectual disabilitiesy within a community setting. The aAdministering aAgency may provide or subcontract for any services provided in this HCBS under the ID wWaiver. To qualify for Medicaid reimbursement, each individual service HCBS must be necessary to prevent institutionalization of the waiver recipient. Each provider of services HCBS must have a signed provider contract, meet provider qualifications and comply with all applicable state and federal laws and regulations. Services that are reimbursable through Medicaid's EPSDT Program shall not be reimbursed as HCBS under the ID wWaiver services. The following are specific services HCBS available under the ID Waiveras part of Home and Community Based services are:

(1) Residential Habilitation Training Services

- (a) Residential <u>hH</u>abilitation <u>tTraining Services</u> provides intensive habilitation training including training in personal, social, community living, and basic life skills.
- (b) Staff may provide assistance/training in daily living activities such as shopping for food, meal planning and preparation, housekeeping, personal grooming, and cleanliness.
- (c) <u>Residential Habilitation Training Services</u> This service includes social and adaptive skill building activities such as expressive therapy, the prescribed use of art, music, drama, and/or movement to modify ineffective learning patterns, and/or influence changes in behavior recreation/leisure instruction, teaching the skills necessary for independent pursuit of leisure time/recreation activities.
- (d) The cost to transport <u>waiver recipientsindividuals</u> to activities such as day programs, social events, or community activities when public transportation and/or transportation services covered under the State Plan are not available, accessible or desirable due to the functional limitations of the <u>waiver</u> recipient will be included in the rate paid to providers for this service.
- (e) Residential Habilitation Training <u>sS</u>ervices may be delivered/supervised by a Qualified Intellectual Disabilities Professional (QIDP) in accordance with the <u>individual'swaiver</u> recipient's approved plan of care.
- (f) Residential Habilitation Training <u>sServices</u> can also be delivered by a Habilitation Aide. The <u>Habilitation aAide</u> will work under supervision and direction of a <u>QIDP</u> <u>Qualified Intellectual Disabilities Professional</u>.
- (g) A Habilitation Aide will be required to be certified by the provider agency as having completed a course of instruction provided or approved by the <u>Alabama Department of Mental Health (ADMH)</u>. Retraining will be conducted as needed, <u>but</u> at least annually.
- (2) <u>In-Home</u> Residential Habilitation <u>Training Services</u> <u>Other Living Arrangement</u> (OLA)
- (a) <u>In-Home</u> Residential <u>hH</u>abilitation <u>tTraining Services in other living</u> <u>arrangements is a are services in which <u>waiver</u> recipients reside in integrated living arrangements such as their own apartments or homes. <u>In-Home Residential Habilitation Training Services</u></u>

These services shall be delivered in the context of routine day-to-day living rather than in isolated "training programs" that dictate the <u>individual-waiver recipient</u> transfers what is learned to more relevant applications. Habilitation may range from a situation where a staff member resides on the premises to those situations with staff monitoring of <u>waiver recipients elients</u> served at periodic intervals. The basic concept of this service is that learning to be independent is best accomplished for some <u>waiver recipients individuals</u> by living independently.

- (b) The staff may provide assistance/training in daily living activities such as shopping for food, meal planning and preparation, housekeeping, personal grooming and cleanliness.
- (c) <u>In-Home Residential Habilitation Training Services</u> This service includes social and adaptive skill building activities such as expressive therapy, the prescribed use of art, music, drama, or movement to modify ineffective learning patterns, and/or influence changes in behavior, recreation/leisure instruction, teaching the skills necessary for independent pursuit of leisure time/recreation activities.
- (d) <u>In-Home</u> Residential <u>hH</u>abilitation <u>tTraining sServices for <u>waiver recipients</u> individuals in other living arrangements may be delivered/supervised by a QIDP in accordance with the <u>waiver recipient's individual's approved</u> plan of care.</u>
- (e) <u>In-Home</u> Residential <u>hH</u>abilitation <u>*Training Services</u> can also be delivered by a Habilitation Aide. The <u>Habilitation aAide</u> will work under supervision and direction of a QIDP.
- (f) A Habilitation Aide will be required to be certified by the provider agency as having completed a course of instruction provided or approved by the <u>ADMH.Department of Mental Health.</u> Retraining will be conducted as needed, but at least annually.
- (g) The cost to transport <u>waiver recipientsindividuals</u> to activities such as day programs, social events or community activities when public transportation and/or transportation services covered under the State Plan are not available, accessible or desirable due to the functional limitations of the <u>waiver recipientelient</u> will be included in the rate paid to providers for this service.

(3) Day Habilitation Services

- (a) Day Habilitation <u>Services areis</u> assistance with acquisition, retention, or improvement in self-help, socialization and adaptive skills which takes place in a non-residential setting, separate from the home or facility in which the <u>waiver</u> recipient resides.
- (b) The provider for Day Habilitation <u>Services</u> can be reimbursed based on eight levels of services.
- (c) <u>Day Habilitation</u> Services shall normally be furnished four or more hours per day on a regularly scheduled basis, for one or more days per week, unless provided as an adjunct to other day activities included in the <u>waiver</u> recipient's <u>approved</u> plan of care. Day Habilitation <u>sServices</u> shall focus on enabling the <u>waiver recipientindividual</u> to attain his or her maximum functional level, and shall be coordinated with any physical, occupational, or speech therapies listed in the <u>waiver recipient</u>'s <u>approved</u> plan of care.
- (d) Transportation cost associated with transporting <u>waiver recipientsindividuals</u> to places such as day programs, social events or community activities when public transportation and/or transportation covered under the State Plan is not available, accessible or desirable due to the functional limitations of the <u>waiver</u> recipient will be included in the rate paid to providers for this service. Day Habilitation <u>sS</u>ervice workers may transport consumers in their own vehicles

as an incidental component of this service. Providers of <u>dD</u>ay <u>hH</u>abilitation <u>Services</u> must be certified by the <u>ADMH.Department of Mental Health.</u>

(4) Prevocational Services

- (a) Prevocational <u>sServices</u> are not available to <u>waiver</u> recipients for eligible benefits under a program funded under Section 110 of the Rehabilitation Act of 1973 or Section 602 (16) and (17) of the Education of the Handicapped Act.
- 1. Prevocational <u>sS</u>ervices are aimed at preparing an individual for paid or unpaid employment, but are not job task oriented.
- 2. Prevocational <u>sS</u>ervices include teaching such concepts as compliance, attendance, task completion, problem solving and safety.
- 3. Prevocational <u>sS</u>ervices are provided to <u>waiver recipientspersons</u> not expected to be able to join the general work force or participate in a transitional sheltered workshop within one year (excluding supported employment programs).
- 4. When compensated, <u>waiver recipients individuals</u> are paid at a rate of less than 50 percent of the minimum wage.

(5) Supported Employment Services

- (a) There are <u>threetwo</u> variations of Supported Employment <u>Services</u>: 1) <u>Individual Assessment/Discovery</u> 2) Small Group and 23) Individual.
- 1. Individual Assessment/Discovery is a one-time, time-limited, targeted service designed to help a waiver recipient who wishes to pursue individualized, integrated employment or self-employment. Discovery may involve a comprehensive analysis of the waiver recipient's history; interviews with family, friends and support staff; observing the waiver recipient performing work skills; and career research in order to determine the waiver recipient's career interests, talents, skills, support needs and choice; and the writing of a Personal Profile Frames which will begin with the development of an employment plan.
- 2. -Employment Small Group often consists of groups of <u>waiver</u> recipientsindividuals being supported in enclave or mobile work crew activities. Employment Small Group are services and training activities provided in regular business, industry, and community settings for groups of two to eight workers with disabilities.
- 3. Employment Individual includes two distinct services: Job Developer and Job Coach, Employment Individual services are the ongoing supports to waiver recipientsparticipants who, because of their disabilities, need intensive on-going support to obtain and maintain an individual job in competitive or customized employment, or self-employment, in an integrated work setting in the general workforce for which a waiver recipientan individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. Employment Individual includes two distinct services: Job Developer and Job Coach.
- (i) The Job Developer duties include, but are not limited to, marketing the Supported Employment Service and the waiver recipient's skills; negotiating hours or location to meet the abilities of the waiver recipient; and job placement.
- (ii) The Job Coach enters once placement has been arranged. The Job Coach duties include, but are not limited to, assisting with training of waiver recipients in supported work to perform specific jobs consistent with their abilities; teaching waiver recipients

- associated work skills, responsibilities and behaviors not related to the specific job being performed; and providing continued ongoing support to waiver recipient's in supported work.
- (b).1. Supported <u>eE</u>mployment <u>Services are is</u> conducted in a variety of settings, particularly work sites in which persons without disabilities are employed.
- (c).2. Supported <u>eE</u>mployment <u>Services</u> also includes activities needed to sustain paid employment by waiver <u>recipients</u> elients, including supervision and training.
- (d).3. When <u>sSupported eEmployment sServices</u> are provided at a work site in which persons with disabilities are employed, payment will be made only for the adaptations, supervision and training required by waiver recipients as a result of their disabilities, and will not include payment for the supervisory activities rendered as a normal part of the business settings.
- (e).4. Supported <u>eE</u>mployment <u>sS</u>ervices are not available to <u>waiver</u> recipients eligible for benefits under a program funded by either Section 110 of the Rehabilitation Act of 1973, or Section 602 (16) and (17) of the Education of the Handicapped Act.
- (f).5. Transportation will be provided between the <u>waiver recipient's individual's</u> place of residence and the site of the habilitation services or between habilitation sites (in cases where the <u>waiver recipient individual</u> receives <u>Re</u>habilitation <u>Training sS</u>ervices in more than one place) as a component part of habilitation services. The cost of this transportation is included in the rate paid to providers of the appropriate type of habilitation services.
 - (6) Occupational Therapy Services.
- (a) Occupational <u>*T</u>herapy <u>sS</u>ervices include the evaluation of <u>a waiver recipientan</u> <u>individual</u> to determine level of functioning by applying diagnostic and prognostic tasks and guiding and treating <u>waiver recipients</u> <u>individuals</u> in the prescribed therapy to secure and/or obtain necessary function.
- (b) Therapists may also provide consultation and training to staff or caregivers (such as <u>a waiver</u> recipient's family and/or foster family).
- (c) Services must be prescribed by a physician and provided on an individual basis. The need for service must be documented in the case record. Services must be listed on the <u>waiver recipient's approved plan of care plan</u>, provided and billed in 15 minute increments. Occupational <u>*Therapy Services is are</u> covered under the State Plan for eligible <u>waiver recipients</u> as a result of an EPSDT screening. Therefore, this service is limited to <u>waiver recipients</u> age 21 and over. Group therapy will not be reimbursed.
- (d) Occupational Therapy can be directed by individual participants or family but must adhere to all the traditional service rules.
 - (7) Speech and Language Therapy <u>Services</u>
- (a) Speech and <u>L</u>anguage <u>Therapy <u>S</u>ervices include screening and evaluation of waiver recipients individuals with speech and hearing impairments.</u>
- 1. Comprehensive <u>sS</u>peech and <u>lL</u>anguage <u>Services aretherapy is</u> prescribed when indicated by screening results.
- (b) <u>Speech and Language Therapy Services</u> <u>This service</u> provides treatment for <u>waiver recipients individuals</u> who require speech improvement and speech education. These are specialized programs designed for developing each <u>waiver recipient's individual's</u> communication skills in comprehension, including speech, reading, auditory training, and skills in expression.

- (c) Therapists may also provide training to staff and caregivers (such as a <u>waiver</u> recipient's family and/or foster family).
- (d)_Speech and Language Therapy can be directed by individual participants or family but must adhere to all the traditional service rules.

(8) Physical Therapy <u>Services</u>

- (a) Physical <u>tTherapy Services</u> includes services, which assist in the determination of <u>a waiver recipient's an individual's</u> level of functioning by applying diagnostic and prognostic tasks and providing treatment training programs.
- 1. <u>Physical Therapy Services</u> <u>Such services</u> preserve and improve abilities for independent function, such as range of motion, strength, tolerance, coordination, and activities of daily living.
- 2. <u>Physical Therapy Services This service</u> also helps with progressive disabilities through means such as the use of orthotic prosthetic appliances, assistive and adaptive devices, positioning, behavior adaptations and sensory stimulation.
- (b) Physical Therapists may also provide consultation and training to staff or caregivers (such as <u>a waiver</u> recipient's family and/or foster family).
- (c) Physical Therapy can be directed by individual participants or family but must adhere to all the traditional service rules.

(9) Positive Behavior Support Services

- (a) Positive Behavior Support sServices provides systematic functional behavior analysis, behavior support plan (BSP) development, consultation, environmental manipulation and training to implement the BSP for waiver recipients individuals whose maladaptive behaviors are significantly disrupting their progress in habilitation, self-direction or community integrations, whose health is at risk, and/or who may otherwise require movement to a more restrictive environment. Positive Behavior Support Services may include consultation provided to families, other caretakers, and habilitation services providers. Positive Behavior Therapy shall place primary emphasis on the development of desirable adaptive behavior rather than merely the elimination or suppression of undesirable behavior.
- (b) A <u>BSPbehavior support plan</u> may only be used after positive behavioral approaches have been tried, and its continued use must be reviewed and re-justified in the case record every thirty (30) days. The unit of service is 15 minutes.
- (c) The Positive Behavior Support waiver sService has three service provider levels: two professional levels and one technical level, each with its own procedure code and rate of payment. The Positive Behavior Support waiver sService is comprised of two general eategories of service tasks. These are (1) development of a BSP and (2) implementation of a BSP. In addition, this waiver service has three service levels: two professional and one technical, each with its own procedure code and rate of payment. The service levels are distinguished by the supervision requirements and qualifications of the service provider, and by supervision requirements. Both professional and technical level service providers may perform tasks within both service categories, adhering to supervision requirements that are described under provider qualifications.
- 1. (d) Level 1 professional providers are required to have advanced degrees, specialization, and The two professional service provider levels are distinguished by the

qualifications of the therapist. Both require advanced degrees and specialization, but the top level also requires board certification in behavior analysis.

- 2. Level 2 professional providers are required to have advanced degrees and specialization with three years of experience working with waiver recipients. Professional providers at Level 2 who do not have a Doctorate degree require supervision by a Level 1 professional provider.
- 3. Level 3 technical providers are required to be either a QIDP or a Board Certified Assistant Behavior Analyst (BCABA). Level 3 technical providers require supervision by either a Level 1 professional provider or a Level 2 professional Doctoral provider.
- (d) Positive Behavior Support Services tasks include the development of a BSP and implementation of the BSP in accordance with functional behavior analyses.
- (e) Providers of <u>Positive Behavior Support sServices</u> must maintain a service log that documents specific days on which services are delivered. Group therapy will not be reimbursed.
- (f) The maximum units of <u>Positive Behavior Support sServices</u> per year of both professional and technician level units combined cannot exceed 1200 and the maximum units of service of professional level cannot exceed 800.
- (g) Positive Behavior Support <u>Services</u> can be directed by <u>waiver recipients</u> <u>individual</u> participants or family but must adhere to all the traditional service rules.

(10) Companion Services

- (a) Companion <u>sServices</u> are non-medical supervision and socialization, provided to a functionally impaired adult. Companions may assist the <u>waiver recipientindividual</u> with such tasks as meal preparation, and shopping, but may not perform these activities as discrete services.
- 1. The provision of <u>eC</u>ompanion <u>sS</u>ervices does not entail hands-on medical care.
- 2. Companions may perform light housekeeping tasks which are incidental to the care and supervision of the <u>waiver</u> recipient.
- 3. <u>Companion Services are This service is</u> provided in accordance with a therapeutic goal in the <u>waiver recipient's approved</u> plan of care and is not merely diversional in nature.
- 4. <u>Companion Services</u> This service must be necessary to prevent institutionalization of the <u>waiver</u> recipient.
- (b) Companion Services can be directed by <u>waiver recipients</u>individual participants or family but must adhere to all the traditional service rules.

(11) Respite Care Services

- (a) Respite <u>eCare Services are is</u> given to <u>waiver recipientsindividuals</u> unable to care for themselves on a short<u>-</u>term basis because of the absence or need for relief of those persons normally providing the care. Respite care may be provided in the <u>waiver</u> recipient's home, place of residence, or a facility approved by the State which is not a private residence.
- (b) Respite <u>eC</u>are <u>Services</u> may be provided up to a maximum of 1080 hours or 45 days per waiver year.
 - (c) Respite Care Services This service cannot be provided by a family member.

- (d) Out-of-home respite care may be provided in a certified group home or ICF/IID. In addition, if the <u>waiver</u> recipient is less than 21 years of age, out-of-home respite care may be provided in a JCAHO Accredited Hospital or Residential Treatment Facility (RTF). While a <u>waiver</u> recipient is receiving out-of-home respite, no additional Medicaid reimbursement will be made for other services in the institution.
- (e) Medicaid reimbursement shall not be claimed for the cost of room and board except when provided as part of respite care furnished in a facility approved by the State that is not a private residence.

(12) Personal Care Services

- (a) Personal eCare sServices are services provided to assist residents with activities of daily living such as eating, bathing, dressing, personal hygiene and activities of daily living. Personal Care Services may include assistance with preparation of meals, but not the cost of the meals themselves. When specified in the waiver recipient's approved plan of care, this Personal Care sServices may also include such housekeeping chores as bed-making, dusting and vacuuming, which are essential to the health and welfare of the waiver recipient. Personal eCare Services are is not available to residents of a group home or other residential setting.
- (b) Personal Care Services can also include supporting a waiver recipient at an integrated worksite where the waiver recipient is paid a competitive wage. Personal Care Services at an integrated worksite must be billed under a separate code to distinguish it from other Personal Care Services. Personal care attendants may transport consumers in their own (the attendant's) vehicles as an incidental component of the personal care service. In order for this component to be reimbursed, the personal care attendant must support the consumer's need to access the community and not merely to provide transportation. The Personal Care Transportation service will provide transportation in the community to shop, attend recreational and civic events, go to work, and participate in *People First* and other community building activities. Additional payment will be made for mileage and the provider's cost of an insurance waiver to cover any harm that might befall the consumer as a result of being transported.
- (c) No payment will be paid for Personal Care Services furnished by a member of the immediate family (i.e., parents, spouses, children) living in the home or who have a legal obligation to provide Personal Care Services. Siblings who do not reside in the home with the waiver recipient can be paid to provide Personal Care Services to the waiver recipient. The attendant must have a valid Alabama driver's license and his/her own insurance coverage as required by State law. The provider agency shall assure the attendant has a good driving record and is in-serviced on safety procedures when transporting a consumer.
- (d) Personal Care Services may be self-directed to allow waiver recipients and their families to recruit, hire, train, supervise, and if necessary to discharge, their own personal care workers. Personal Care Transportation shall not replace transportation that is already reimbursable under day or residential habilitation nor the Medicaid non-emergency medical transportation program. The planning team must also assure the most cost effective means of transportation which would include public transportation where available. Transportation by a personal care attendant is not intended to replace generic transportation nor to be used merely for convenience.

- 1. Personal care attendants may transport waiver recipients in their own (the attendant's) vehicles as an incidental component of the personal care service. In order for this component to be reimbursed, the personal care attendant must support the waiver recipient's need to access the community and not merely to provide transportation. The Personal Care Transportation service will provide transportation in the community to shop, attend recreational and civic events, go to work, and participate in *People First* and other community building activities. Additional payment will be made for mileage and the provider's cost of an insurance waiver to cover any harm that might befall the waiver recipient as a result of being transported.
- 2. The attendant must have a valid Alabama driver's license and his/her own insurance coverage as required by State law. The provider agency shall assure the attendant has a good driving record and is in-serviced on safety procedures when transporting a waiver recipient. Personal care can also include supporting a person at an integrated worksite where the individual is paid a competitive wage. This service must be billed under a separate code to distinguish it from other personal care activities.
- 3. Personal Care Transportation shall not replace transportation that is already reimbursable under Day or Residential Habilitation Services. Personal Care Transportation is not intended to replace generic transportation nor to be used merely for convenience.
- (f) Personal care may be self-directed to allow participants and their families to recruit, hire, train, supervise, and if necessary to discharge, their own personal care workers.

(13) Environmental Accessibility Adaptations Services

- (a) Environmental <u>aA</u>ccessibility <u>aA</u>daptations <u>Services</u> are those physical adaptations to the home, required by the <u>waiver</u> recipients' <u>approved</u> plan of care, which are necessary to ensure the health, welfare and safety of the <u>waiver recipient individual</u>, or which enable the <u>waiver recipientindividual</u> to function with greater independence in the home and without which, the <u>waiver</u> recipient would require institutionalization.
- adaptations which are necessary to accommodate the medical equipment and supplies necessary for the welfare of the waiver recipient and may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems, which are necessary to accommodate the medical equipment and supplies necessary for the welfare of the recipient, Environmental Accessibility Adaptation Services but shall exclude those adaptations or improvements to the home which are of general utility and are not of direct medical or remedial benefit to the waiver recipientelient, such as carpeting, roof repair, central air conditioning, adding square footage to the home, etc. Adaptations that add square footage to the home are also excluded from this Medicaid reimbursed benefit. All Environmental Accessibility Adaptation sServices shall be provided in accordance with applicable State or local building codes.
- (b) Environmental Accessibility Adaptions <u>Services</u> may be directed by <u>waiver</u> <u>recipients individual participants</u> or family but must adhere to all the traditional service rules.

(14) Specialized Medical Supplies Services

(a) <u>Specialized Medical sSupplies Services provide supplies that</u> are necessary to maintain the <u>waiver</u> recipient's health, safety, and welfare and to prevent further deterioration of

a condition such as decubitus ulcers. These supplies do not include common over-the-counter personal care items such as toothpaste, mouthwash, soap, shampoo, Q-tips, deodorant, etc.

- (b) <u>Specialized These mMedical sSupplies Services</u> will only be provided when authorized by the <u>waiver</u> recipient's physician and shall meet applicable standards of manufacturer, design and installation. Providers of <u>Specialized Medical Supplies this sServices</u> will be those who have a signed provider agreement with Medicaid and the <u>ADMH.Department of Mental Health.</u> <u>Specialized Medical supplies are limited to a maximum of \$1,800.00 per waiver recipient per year. The operating agency must maintain documentation of items purchased for the <u>waiver recipient</u>.</u>
- (c) Specialized Medical Supplies <u>Services</u> may be directed by <u>waiver recipients</u> individual participants or family but must adhere to all the traditional service rules.

(15) Skilled Nursing Services

- (a) Skilled nNursing sServices are services listed in the waiver recipient's approved plan of care which are within the scope of the Alabama Nurse Practice Act and are provided by a registered professional nurse, or licensed practical or vocational nurse under the supervision of a registered nurse, licensed to practice in the State. Skilled Nursing Service consists of nursing procedures that meet the waiver recipient's person's health needs as ordered by a physician. Skilled Nursing Services will be billed by the hour. There is no restriction on the place of Skilled Nursing sServices.
- (b) <u>Skilled Nursing Services This service</u> may also be self-directed when provided to a <u>waiver recipient</u> participant or family, which is self-directing <u>pPersonal eCare sServices</u>. <u>Personal Care Services</u> includes training and supervision related to medical care and/or assistance with ordinarily self-administered medications to be provided by the personal care worker.

(16) Specialized Medical Equipment Services

- (a) Specialized mMedical eEquipment Services includes devices, controls, or appliances specified in the waiver recipient's approved plan of care, which enable waiver recipients to increase their ability to perform activities of daily living or to perceive, control or communicate with the environment in which they live. Specialized Medical Equipment Services Fincluded items that are those necessary for life support, and equipment necessary for the proper functioning of such items and durable and non-durable medical equipment not available under the Medicaid State Plan. Specialized Medical Equipment Items reimbursed with waiver funds shall be in addition to any medical equipment furnished under the State Plan and shall exclude those items that are not of direct medical or remedial benefits to the waiver recipient. Invoices for Specialized mMedical eEquipment must be maintained in the case record. Specialized Medical Equipment This service must be necessary to prevent institutionalization of the waiver recipient. All items shall meet applicable standards of manufacturer, design and installation. Costs are limited to \$5,000 per waiver recipient, per year.
- (b) Specialized <u>mM</u>edical <u>eE</u>quipment <u>Service</u> may be directed by <u>waiver</u> <u>recipientsindividual participants</u> or family but must adhere to all the traditional service rules.

(17) Community Specialist Services

(a) Community Specialist Services <u>are time-limited, task-specific services that</u> <u>may</u> include professional observation and assessment, <u>facilitation of the waiver recipient's</u>

Person Centered Plan development and continuance, individualized program design and implementation, training of the waiver recipients consumers and family members, consultation with caregivers and other agencies, and monitoring and evaluation of planning and service outcomes as needed to facilitate and implement the waiver recipient's Person Centered Plan. Community Specialist Services may also, at the choice of the waiver recipient or family, include advocating for the waiver recipient and assisting him or her in locating and accessing services and supports. The community specialist will serve as both a qualified planner and, at the waiver recipient's or family's request, a broker. The functions outlined for this service differs from case management in that these functions will incorporate person-centered planning, whereas case management does not.

- (b) The provider must meet QIDP qualifications and be free of any conflict of interest with other providers serving the <u>waiver recipient</u>consumer. A community specialist with expertise in person centered planning may also be selected by the <u>waiver recipient</u> consumer to facilitate the interdisciplinary planning tearm meeting.
- (c) Targeted case managers will continue to perform traditional duties of intake, completion of paperwork regarding eligibility, serving in the capacity of referral and resource locating, monitoring and assessment.
- (d) The planning team shall first ensure that provision of <u>Community Specialist</u> <u>Services this service</u> does not duplicate the provision of any other services, including Targeted Case Management <u>Services</u> provided outside the scope of the <u>ID wW</u> aiver.
- (e) The community specialist will frequently be involved for only a short time (30 to 60 days); in such an instance, the functions, will not overlap with case management. If the waiver recipienteonsumer or family chooses to have the community specialist remain involved for a longer period of time, it must be agreed upon by the team and extended on the waiver recipient's approved plan of care. The need to extend the service must be fully justified in writing by the case manager. the targeted case manager will visit the consumer every 180 days and call at 90-day intervals to ensure services are being delivered and satisfactory. Community Specialist Services are limited to a 90-day period per waiver recipient per ID Waiver year.
- (f) The community specialist will communicate with the case manager quarterly to remain abreast of the <u>waiver recipient's elient's</u> needs and condition.
- (g) A community specialist who facilitates the planning meeting for a <u>waiver</u> <u>recipientperson</u> shall not have any conflict of interest with any provider who may wish to serve the <u>waiver recipient.person</u>.
- (h) <u>Community Specialist Services</u> This service may be self-directed for <u>waiver recipients participants</u> who self-direct Personal Care <u>Services</u>. The community specialist will inform and consult, intervene, and trouble shoot any problems the <u>waiver recipient participant</u> may have with self-directing their services.
- (i) <u>Community Specialist Services are This service is</u> a cost-effective and necessary alternative to placement in an ICF-<u>/IID</u>. A unit of service is 15 minutes.

(18) Crisis Intervention Services

(a) Crisis intervention <u>Services</u> provides immediate therapeutic intervention, available to an <u>waiver recipientindividual</u> on a 24-hour basis, to address personal, social, and/or behavioral problems which otherwise are likely to threaten the health and safety of the <u>waiver recipientindividual</u> or of others and/or to result in the <u>waiver recipient's individual's</u> removal from his current living arrangement.

- (b) Crisis intervention <u>Services</u> may be provided in any setting in which the <u>waiver recipienteonsumer</u> resides or participates in a program. <u>Crisis Intervention Services The service</u> includes consultation with family members, providers, and other caretakers to design and implement individualized crisis treatment plans and provide additional direct services as needed to stabilize the situation.
- (c) Crisis <u>iIntervention Services</u> will respond intensively to resolve crisis situations and prevent the dislocation of the <u>waiver recipientperson</u> at risk such as individuals with intellectual disabilities who are occasionally at risk of being moved from their residences to institutional settings because of family's inability to cope with short term, intense crisis situations. <u>Crisis Intervention Services This service</u> is a cost-effective alternative to placement in an ICF-/IID.
- (d) Crisis <u>iIntervention sServices</u> are expected to be of brief duration (8 weeks, maximum). When <u>Crisis Intervention sServices</u> of a greater duration are required, the <u>waiver recipient individual</u> shall be transitioned to a more appropriate service program or setting.
- (e) Crisis <u>iIntervention sServices providers shall consist of a team under the direction and supervision of a QIDP. All team members shall have at least one year of work experience in serving individuals with intellectual disabilities and have a minimum of 40 hours training in crisis intervention techniques prior to providing Crisis Intervention Services. require two levels of staff, professional and technician.</u>
- (f) A unit of service is 15 minutes and must be provided by the waiver planning team, directed by a graduate psychologist or licensed social worker.
- (g) When the need for <u>Crisis Intervention Services</u> arises, the service will be added to the <u>waiver recipient's approved</u> plan of care. <u>For the person.</u>
- (h) A separate crisis intervention plan will be developed to define in detail the activities and supports that will be provided.
- (i) All eCrisis iIntervention sServices shall be approved by the regional community service office of the ADMH prior to the service being initiated.
- (j) Crisis <u>iIntervention sServices</u> will not count against the \$25,000 per <u>waiver</u> recipient per year cap in the <u>ID wW</u>aiver, since the need for the <u>Crisis Intervention sServices</u> cannot accurately be predicted and planned for ahead of time.
- (k) Specific e<u>C</u>risis <u>iI</u>ntervention <u>sS</u>ervice<u>s</u> components may include the following:
- 1. Analyzing the psychological, social and ecological components of extreme dysfunctional behavior or other factors contributing to the crisis;
- 2. Assessing which components are the most effective targets of intervention for the short-term amelioration of the crisis;
 - 3. Developing and writing an intervention plan;
- 4. Consulting and, in some cases, negotiating with those connected to the crisis in order to implement planned interventions, and following up to ensure positive outcomes from interventions or to make adjustments to interventions;
- 5. Providing intensive direct supervision when a <u>waiver recipient</u>consumer is physically aggressive or there is concern that the <u>waiver recipient</u>consumer may take actions that threaten the health and safety of self and others;
- 6. Assisting the <u>waiver recipienteonsumer</u> with self_-care when the primary caregiver is unable to do so because of the nature of the <u>waiver recipient'seonsumer's</u> crisis situations; and

7. Directly counseling or developing alternative positive experiences for <u>waiver recipients</u>consumers who experience severe anxiety and grief when changes occur with job, living arrangement, primary caregiver, death of loved one, etc.

(19) Benefits and Career Counseling <u>Services</u>

- (a) Benefits and Career Counseling Services comprise two distinct services: Benefits Reporting Assistance (BRA) and Benefits Counseling.
- <u>1.(a)</u> The <u>BRABenefits and Career Counseling service is designed to assist</u> waiver recipients and their families to understand general information on how SSI/SSDI benefits are affected by employment. Once the waiver recipient enters employment, the BRA will be available to answer questions, assist in the execution of the work incentive plan, and assist with the submission of income statement and/or Impairment Related Work Expenses to SSA as required to the extent needed as indicated by the waiver recipient.
- 2. The Benefits Counseling is a more intensive service provided by a Community Work Incentives Coordinator (CWIC) who will provide intensive individualized benefits counseling, benefits analysis, develop a work incentive plan and ongoing benefits planning for a waiver recipient changing jobs or for career advancement. The CWIC will work in conjunction with the BRA to develop trainings and webinars based on SSA information provided and may assist or provide trainings and education as needed is designed to assist people and family member(s) with respect to waiver services and employment. The Benefits and Career Counselor provides intensive work incentive counseling services to beneficiaries of SSI.
- (b) The Benefits Counselor must be a eCertified Work Incentives Counselor (CWIC) through a recognized training by the Social Security Administration for delivery of Career Counseling Services. This may include a level 5 security clearance from the Social Security Administration/Department of Homeland Security due to Personally Identifiable Information. The Counselor will receive beneficiary referrals from the primary Information and Referral Triage (CWIC) based on the beneficiary county of residence. Based on the identified needs, an array of benefits counseling and work incentive services will be developed, provided, and documented. These services may include but are not limited to: Intensive benefits counseling, Benefits Summary and Analysis, Work Incentive Plan, Ongoing Benefits Planning and documentation of those services.

(20) Community Experience Services

- (a) Community Experience has three distinct categories: Individual Group, and Self-Directed. Community Experience sServices are non-work related activities that are customized to the waiver recipient's individual(s) desires to access and experience community participation. Community Experience Services are is provided outside of the waiver recipient's person's residence and can be provided during the day, evening, or weekends. The intent of Community Experience Services this service is to engage in activities that will allow the waiver recipient person to either acquire new adaptive skills or support the waiver recipient person in utilizing adaptive skills in order to become actively involved in their community.
- (b) Community Experience <u>Services has two distinct category: Individual and Group Community Experience services.</u>
- 1. Community Experience Individual sServices are provided to a waiver recipientan individual participant, with a one-to-one staff to waiver recipientparticipant ratio

which is determined necessary through functional and health risk assessments prior to approval. Additionally, a behavioral assessment will need to support this specialized staffing if related to behavioral challenges prior to approval.

- <u>2.</u> Community Experience Group <u>sServices</u> are provided to groups of <u>waiver</u> <u>recipientsparticipants</u>, with a staff to <u>waiver recipientsparticipant</u> ratio of one to two or more, but no greater than four (4) <u>waiver recipientsparticipants</u>.
- (c) Community Experience Self-Directed service is for individuals who choose (and are approved) to self direct services and would otherwise need day supports and services (i.e. day habilitation) to obtain identified goals.

(21) Housing Stabilization Services

- (a) The Housing Stabilization Service enables waiver <u>recipients</u> to maintain their own housing as set forth in the <u>waiver recipient'sparticipant's</u> approved plan of care. (POC). <u>Housing Stabilization</u> Services must be provided in the home or a community setting. <u>Housing Stabilization Services The service</u> includes the following components:
- 1. Conducting a Housing Coordination and Stabilization Assessment identifying the <u>waiver recipient's participant's</u> preferences related to housing and needs for support to maintain housing, budgeting for housing/living expenses, obtaining/accessing sources of income necessary for rent, home management, establishing credit and understanding and meeting obligations of tenancy as defined in lease terms.
- 2. Assisting <u>waiver recipients</u> with finding and securing housing as needed. This may include arranging or providing transportation.
- 3. Assisting <u>waiver recipients</u> in securing supporting documents/records, completing/submitting applications, securing deposits, and locating furnishings.
- 4. Developing an individual housing stabilization plan based upon the Housing Coordination and Stabilization Assessment as part of the overall Person Centered Plan.
- 5. Participating in <u>waiver recipient's</u> Person-Centered <u>Pplan meetings</u> at redetermination and/or revision plan meetings as needed.
- 6. Providing supports and interventions per the <u>waiver recipient's</u> Person-Centered Plan (individualized housing stabilization portion).
- 7. Communication with the landlord and/or property manager regarding the waiver recipient's participant's disability (if authorized and appropriate), detailing accommodations needed, and addressing components of emergency procedures involving the landlord and/or property manager.
- 8. If at any time the <u>waiver recipient's participant's</u> housing is placed at risk (<u>i.e.,e.g.,</u> eviction, loss of roommate, or loss of income), Housing Stabilization Services will provide supports to retain housing or locate and secure new housing or sources of income to continue community based supports which includes locating new housing, sources of income. etc.

(22) Individual Directed Goods and Services

(a) Individual Directed Goods and Services are services, equipment or supplies not otherwise provided through this the ID wW aiver or through the Medicaid State Plan that address an identified need in the service plan and meet the following requirements: the item or service would decrease the need for other Medicaid services; and/or promote inclusion in the

community; and/or increase the <u>waiver recipient'sparticipant's</u> safety in the home environment; the item or service is not illegal or otherwise prohibited by Federal and State statutes and regulations, and the <u>waiver recipient'sparticipant</u> does not have the funds to purchase the item or service or the time or service is not available through another source.

(b) <u>Individual Directed Goods</u> and Services are required to meet the identified needs and outcomes in the <u>waiver recipient'sindividual's pPerson eCentered pPlan</u>, or the most cost effective to meeting the assessed need, assures health, safety, and welfare, and are directly beneficial to the <u>waiver recipientindividual</u> in achieving at leaste one of the following outcome: Improved cognitive, social, or behavioral functioning; maintain the <u>waiver recipient'sindividual's</u> ability to remain in the community; enhance inclusion and family involvement; develop or help maintain personal, social, or physical skills; decrease dependency on formal supports services, and increase independence.

(23) Supported Employment Emergency Transportation Services

- (a) Supported Employment Emergency Transportation Services is the provision of service to permit waiver recipients participants access transportation to and from their place of employment in the event that the support team is unable to facilitate transportation through other means arrangements quickly or there is a risk of the participant missing a day of scheduled work. The provision of this service Supported Employment Transportation Services must be necessary to support the waiver recipient person in work related travel and cannot be reimbursed for merely transportation.
- (b) Transportation must be provided by public carriers (i.e.e.g., charter bus or metro transit bus) or private carriers (i.e.e.g., \underline{T} taxicab). The recipient may use a commercial transportation agency.

(24) Personal Emergency Response System Services

- (a) Personal eEmergency response ssystem Services (PERS) is a service that provides a direct telephonic or other electronic communications link between someone living in the community waiver recipients and health professionals to secure immediate assistance in the event of a physical, emotional or environmental emergency. PERS may also include cellular telephone service used when a conventional PERS is less cost-effective or is not feasible. This service PERS may include installation, monthly fee (if applicable), upkeep and maintenance of devices or systems as appropriate.
- (b) The use of <u>PERS</u>these technologies requires assurance that safeguards are in place to protect privacy, provide informed consent, and that documented needs are addressed in the least restrictive manner. The <u>waiver recipient's pPerson eCentered pPlan</u> should identify options available to meet the need of the <u>waiver recipientindividual</u> in terms of preference while also ensuring health, safety, and welfare.
- (c) <u>PERSPersonal Emergency Response System can</u> be directed by <u>waiver</u> <u>recipientsindividual participants</u> or family but must adhere to all the traditional service rules.

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