CHAPTER 14: CHILDREN'S CHOICE TABLE OF CONTENTS

PAGE(S) 5

02/24/14 01/26/12

CHILDREN'S CHOICE

TABLE OF CONTENTS

SUBJECT	SECTIONS
OVERVIEW	14.0
COVERED SERVICES	14.1
Support Coordination Family Support Services Center-Based Respite Care Environmental Accessibility Adaptations Specialized Medical Equipment and Supplies Family Training Professional Services Providers Applied Behavioral Analysis-Based Therapy Aquatic Therapy Aquatic Therapy Music Therapy Sensory Integration Hippotherapy/Therapeutic Horseback Riding Hippotherapy Therapeutic Horseback Riding Housing Stabilization Transition and Housing Stabilization Services Housing Stabilization Transition Services Housing Stabilization Services Crisis and Non-Crisis Provisions Crisis Provision Process for Determining Qualification for Crisis Designati Provisions of a Crisis Designation Non-Crisis Provision Determining Non-Crisis Designation Process for Non-Crisis Designation	on
Determining Non-Crisis Designation Process for Non-Crisis/Other Good Cause Designation	

LOUISIANA MEDICAID PROGRAMISSUED:
REPLACED:CHAPTER 14:CHILDREN'S CHOICETABLE OF CONTENTS

RECIPIENT REQUIREMENTS

Developmental Disabilities Request for Services Registry Medical Certification Eligibility Requirements Application Process Level of Care Choice of Service, Support Coordination and Direct Service Providers Support Coordination Direct Service Providers Admission Denial or Discharge Criteria

RIGHTS AND RESPONSIBILITIES

Freedom of Choice of Program Notification of Changes Participation in Care Freedom of Choice of Support Coordination and Service Providers Voluntary Participation Compliance with Civil Rights Quality of Care Grievances/Fair Hearings Rights and Responsibilities of Families

SERVICE ACCESS AND AUTHORIZATION

Provider Selection Prior Authorization Post Authorization Changing Direct Service Providers Prior Authorization for New Service Providers Changing Support Coordination Agencies Changes in Authorized Services

PROVIDER REQUIREMENTS

Support Coordination Provider Requirements Direct Service Provider Requirements Professional Services Provider Requirements Provider Responsibilities Support Coordination Providers 02/24/14 01/26/12

PAGE(S) 5

14.2

14.3

14.4

14.5

LOUISIANA MEDICAID PROGRAM **ISSUED:** 02/24/14 **REPLACED:** 01/26/12 **CHAPTER 14: CHILDREN'S CHOICE TABLE OF CONTENTS** PAGE(S) 5**Direct Service Providers Back-up** Planning **Emergency Evacuation Planning STAFFING REQUIREMENTS** 14.6 Support Coordination Requirements **Direct Service Provider Requirements RECORD KEEPING** 14.7 **Components of Record Keeping** Confidentiality and Protection of Records Review by State and Federal Agencies **Retention of Records** Administrative and Personnel Files **Recipient Records** Organization of Records, Record Entries and Corrections **Components of Recipient Records** Service Documentation Service Logs Progress Notes **Progress Summary** Discharge Summary for Transfers and Closures Individualized Documentation Schedule of Required Documentation REIMBURSEMENT 14.8 **PROGRAM MONITORING** 14.9 **On-Site Reviews** Administrative Review Interviews Personnel Record Review **Recipient Record Review Provider Staff Interviews Monitoring Report** Corrective Action Report Informal Dispute Resolution (Optional)

KEFLACED:	01/20/12
CHAPTER 14: CHILDREN'S CHOICE	
TABLE OF CONTENTS	PAGE(S) 5
Fraud and Abuse	
Quality Management	
INCIDENTS, ACCIDENTS AND COMPLAINTS	14.10
Internal Complaint Policy	
Complaint Disclosure Statement	
Definition of Related Terms Regarding Incidents and Complaints	
SUPPORT COORDINATION	14.11
Core Elements	
Intake	
Intake Procedures	
Assessment	
Assessment Process	
Time Frame for Initial Assessment	
Ongoing Assessment Procedures	
Plan of Care Development and Implementation	
Required Procedures	
Required Components	
Building and Implementing Supports	
Required Time Frames	
Changes in the Plan of Care	
Initiating a Change in the Plan of Care	
Documentation Follow Up (Monitoring	
Follow-Up/Monitoring Reassessment	
Six-month Reassessment	
Annual Reassessment	
Transition/Closure	
Closure Criteria	
Procedures for Transition/Closure	
Transition at Age 19	
Changing Support Coordination Agencies	
Other Support Coordination Responsibilities	
Coordination of Family Support and Personal Care Services	
Assistance with Self-Direction Option	
Reporting of Incidents, Accidents and Complaints	

LOUISIANA MEDICAID PROGRAM

	REPLACED:	01/26/12
CHAPTER 14: CHILDREN'S CHOICE		
TABLE OF CONTENTS		PAGE(S) 5
SELF-DIRECTION OPTION		14.12
Termination of the Self-Direction Service Option Voluntary Termination Involuntary Termination		
DEVELOPMENTAL DISABILITY LAW		APPENDIX A
GLOSSARY		APPENDIX B
CONTACT INFORMATION		APPENDIX C
FORMS		APPENDIX D
BILLING CODES		APPENDIX E
CLAIMS FILING		APPENDIX F

ISSUED:

02/24/14