### LOUISIANA MEDICAID PROGRAM

ISSUED: 01/13/25 REPLACED: 03/11/24

**CHAPTER 7: COMMUNITY CHOICES WAIVER** 

SECTION: TABLE OF CONTENTS PAGE(S) 6

#### COMMUNITY CHOICES WAIVER

#### TABLE OF CONTENTS

<u>SUBJECT</u> <u>SECTION</u>

OVERVIEW SECTION 7.0

COVERED SERVICES SECTION 7.1

**Support Coordination** 

Transition Intensive Support Coordination

**Service Exclusions** 

Service Limitations

**Transition Services** 

Service Exclusions

Service Limitations

Environmental Accessibility Adaptations

Service Exclusions

Service Limitations

Personal Assistance Services

Supervision or Assistance with Activities of Daily Living (ADL)

Supervision or Assistance with Instrumental Activities of Daily Living (IADL)

**Protective Supervision** 

Supervision or Assistance with Health-Related Tasks

Supervision or Assistance while Escorting/Accompanying with Community Tasks

Extension of Therapy Services

Shared Personal Assistance Services (PAS)

A.M. /P.M. Delivery Method

Service Exclusions

Service Limitations

Adult Day Health Care (ADHC) Services

Service Exclusions

Service Limitations

Caregiver Temporary Support Services

Service Exclusions

Service Limitations

## LOUISIANA MEDICAID PROGRAM

ISSUED: 01/13/25 REPLACED: 03/11/24

### **CHAPTER 7: COMMUNITY CHOICES WAIVER**

SECTION: TABLE OF CONTENTS PAGE(S) 6

Monitored In-Home Caregiving Services

Service Exclusions

Service Limitations

Assistive Devices and Medical Supplies

Personal Emergency Response Systems (PERS)

Telecare

**Activity and Sensor Monitoring** 

Health Status Monitoring

Medication Dispensing and Monitoring

Service Exclusions

**Service Limitations** 

Home Delivered Meals

Service Exclusions

Service Limitations

Medically Tailored Meals (MTMs)

**Nutritional Counseling** 

Service Limitations

Nursing

**Service Exclusions** 

Service Limitations

Skilled Maintenance Therapy (Physical, Occupational, and Speech/Language)

Physical Therapy

Occupational Therapy

Speech/Language Therapy

Service Exclusions

**Service Limitations** 

Housing Transition or Crisis Intervention Services and Housing Stabilization Services

Housing Transition or Crisis Intervention Services

Housing Stabilization Services

Service Exclusions

Service Limitations

**Assistive Technology** 

Service Exclusions

Service Limitations

Financial Management Services

Hospice and Waiver Services

Waiver Services Payable While in a Nursing Facility

LOUISIANA MEDICAID PROGRAM ISSUED: 01/13/25

**REPLACED:** 03/11/24

**CHAPTER 7: COMMUNITY CHOICES WAIVER** 

SECTION: TABLE OF CONTENTS PAGE(S) 6

SELF-DIRECTION OPTION

**SECTION 7.2** 

Termination of the Self-Direction Option

**BENEFICIARY REQUIREMENTS** 

**SECTION 7.3** 

CCW Request for Services Registry Priority Groups for Waiver Offers Expedited Waiver Opportunities Admission Denial or Discharge Criteria

BENEFICIARY RIGHTS AND RESPONSIBILITIES

**SECTION 7.4** 

Freedom of Choice - Program

Freedom of Choice - Agencies/Providers

Adequacy of Care

Participation in Care

Voluntary Participation

Quality of Care

Civil Rights

Notification of Changes

Grievances/Complaints

Fair Hearings

Rights and Responsibilities Form

### SERVICE ACCESS AND AUTHORIZATION

**SECTION 7.5** 

**Provider Selection** 

**Prior Authorization** 

**Support Coordination** 

Transition Intensive Support Coordination

**Transition Services** 

Environmental Accessibility Adaptation

Personal Assistance Services

Adult Day Health Care

Caregiver Temporary Support Services

Monitored In-Home Caregiving Services

Assistive Devices and Medical Supplies

Page 3 of 6

**Table of Contents** 

## LOUISIANA MEDICAID PROGRAM

ISSUED: 01/13/25 REPLACED: 03/11/24

**CHAPTER 7: COMMUNITY CHOICES WAIVER** 

SECTION: TABLE OF CONTENTS PAGE(S) 6

Home Delivered Meals

Medically Tailored Meals (MTMs) and Nutritional Counseling

**Nursing Services** 

Skilled Maintenance Therapy Services (Physical Therapy, Occupational Therapy, Speech/Language Therapy)

Housing Transition or Crisis Intervention Services and Housing Stabilization Services

**Assistive Technology** 

Financial Management Services

Post Authorization

**Changing Providers** 

Prior Authorization for New Providers

Changing Support Coordination Agencies

Prior Authorization for New Support Coordination Agencies

# PROVIDER REQUIREMENTS

SECTION 7.6

Licensure and Specific Provider Requirements

Provider Responsibilities

Support Coordination Agencies

Environmental Accessibility Adaptation (EAA) Providers

**EAA Assessor** 

**EAA Providers** 

Personal Assistance Service Providers

Back-Up Staffing Plan

**Emergency Plan** 

**ADHC Providers** 

Caregiver Temporary Support Services Providers

Monitored In-Home Caregiving (MIHC) Services Providers

Assistive Devices and Medical Supply Services Providers

Home Delivered Meal Providers

**Nursing Providers** 

Skilled Maintenance Therapy Providers

Housing Transition or Crisis Intervention Service Providers and Housing Stabilization Service Providers

Assistive Technology Service Providers

Financial Management Services Providers

**Provider Changes** 

Page 4 of 6

**Table of Contents** 

LOUISIANA MEDICAID PROGRAM ISSUED:

**REPLACED:** 03/11/24

**CHAPTER 7: COMMUNITY CHOICES WAIVER** 

SECTION: TABLE OF CONTENTS PAGE(S) 6

### RECORD KEEPING

**SECTION 7.7** 

01/13/25

Components of Record Keeping

Retention of Records

Confidentiality and Protection of Records

Review by State and Federal Agencies

Beneficiary Records

Records at the Beneficiary's Home

Organization of Records, Record Entries and Corrections

Service Logs

Transfers and Closures

### REIMBURSEMENT

**SECTION 7.8** 

**Support Coordination** 

**Transition Intensive Support Coordination** 

**Transition Services** 

Environmental Accessibility Adaptation (EAA)

Personal Assistance Services (PAS)

Adult Day Health Care (ADHC)

Caregiver Temporary Support Services (CTSS)

Monitored In-Home Caregiving (MIHC)

Assistive Devices and Medical Supplies (AD/MS)

Home Delivered Meals

Medically Tailored Meals (MTMs) and Nutritional Counseling

**Nursing Services** 

Skilled Maintenance Therapy

Housing Transition or Crisis Intervention Services and Housing Stabilization

Services

Assistive Technology

Financial Management Services

Span Date Billing

## PROGRAM OVERSIGHT AND REVIEW

**SECTION 7.9** 

Health Standards Section Reviews
On-Site Reviews
Administrative Review
Personnel Record Review

Page 5 of 6

**Table of Contents** 

			03/11/24
LOUISIANA MEDICAID PROGRAM ISSUED: 01/13/25		DEDI ACED.	03/11/24
	LOUISIANA MEDICAID PROGRAM	<b>ISSUED:</b>	01/13/25

CHAPTER 7: COMMUNITY CHOICES WAIVER

SECTION: TABLE OF CONTENTS PAGE(S) 6

Interviews
Beneficiary Record Review
Report of Review Findings
Corrective Action Report
Informal Dispute Resolution (Optional)
Fraud and Abuse
Support Coordination Agency Monitoring

# INCIDENTS, ACCIDENTS AND COMPLAINTS SECTION 7.10

Incident/Accident Reports Critical Incident Reports Imminent Danger and Serious Harm Internal Complaint Policy

ORGANIZED HEALTH CARE DELIVERY SYSTEM	SECTION 7.11
CONTACT INFORMATION	APPENDIX A
FORMS/DOCUMENTS/LINKS	APPENDIX B
BILLING CODES/FEE SCHEDULE	APPENDIX C
CLAIMS RELATED INFORMATION	APPENDIX D
GLOSSARY	APPENDIX E
CONCURRENT SERVICES	APPENDIX F
DATABASE CHECKS	APPENDIX G