
CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

COVERED SERVICES

Support Waiver services are designed to enhance the recipient's independence through involvement with employment and other community activities. All services must be based on need documented in the approved Plan of Care (POC), and provided within the state of Louisiana. The services that are available include: Supported Employment, Day Habilitation, Prevocational, Respite, Habilitation, Personal Emergency Response System (PERS) and Support Coordination. The services are described in detail below.

Supported Employment

Supported Employment (SE) is intensive, ongoing supports and services necessary for a recipient to achieve the desired outcome of employment in a community setting where the majority of the persons employed do not have disabilities. Recipients utilizing SE services may need long-term supports for the life of their employment due to the nature of their disability and where natural supports would not meet their needs.

SE services are available for Individual, Self-Employment or Microenterprise, or Group Employment in the following areas:

- Job assessment, discovery and development; and
- Initial job support and job retention.

Job assessment, discovery and development is the process of:

- Identifying specific career interests of a recipient;
- Identifying appropriate community employment options that match information gained from a recipient's assessment, profile and/or plan;
- Ensuring the identified position will meet the occupational, physical and financial requirements of the recipient; and
- Assisting the recipient and employer in achieving a successful job match, placement, and sustaining employment.

Job Assessment

Job assessment is the evaluation of a recipient's skills and interests, and consists of one or more of the following activities:

- Vocational assessments to determine a person's career interests
- Job analysis
- Community-based situational assessments

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

- Facility-based situational assessments
- Recipient profile
- Placement plan
- Assisting with personal care in activities of daily living

NOTE: Work activity training and work hardening skills training are prevocational services.

Job assessment will not be authorized for services that prepare a recipient for paid or unpaid employment in the community. This includes teaching concepts such as compliance, attendance, task completion, problem-solving and safety that are associated with performing compensated work, as well as, activities aimed at a generalized outcome.

Documentation Requirements

To receive post-authorization for job assessment, one or more of the following documents must be submitted to the recipient's support coordinator for approval:

- Completed vocational assessment
- Completed job analysis
- Notes from community-based/facility-based situational assessments
- Recipient profile
- Placement plan

Approval of job assessment documents submitted will be based on the following information:

- The objectives and time lines outlined in the Individualized Service Plan (ISP) were met timely;
- Basic requirements of the job are identified in the document. These requirements must include, but are not limited to:
 - Identification of specific career interest(s)
 - Maximum hours per week and times of day recipient will consider working
 - Minimum rate of pay recipient will accept
 - Benefits recipient receives that might impact earnings, in particular SSI and/or Social Security Disability Insurance (SSDI) benefits
 - Areas of town, city or parish(s) recipient will consider working
 - Transportation currently available to recipient
 - Current work strengths/skills that will help recipient obtain job of his/her choosing
 - Current barriers to recipient obtaining job of his/her choosing; and

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

- The staff ratio needed to support the recipient, group employment is the career outcome.

Job Discovery and Development

Job discovery and development consists of one or more of the following activities:

- Marketing agency services to employers that match the recipient's interest in order to establish business relationships that could result in job opportunities for the recipient
- Assisting the recipient to make use of all available job services through one-stop career centers
- Contacting specific employers whose business matches the recipient's career interests, or who are advertising for open positions through newspaper advertisements, websites, or word of mouth
- Assisting the recipient in creating a resume
- Assisting the recipient in preparing for a job interview
- Transporting the recipient to a job interview
- Accompanying the recipient to a job interview if requested to do so
- Referring recipient to work incentives, planning and assistance representatives when necessary, or as requested
- Reconfiguring an existing position to fit the employer and recipient's needs, also known as job restructuring
- Consulting and/or negotiating as needed and/or requested with employer on rate of pay, benefits, and employment contracts
- Restructuring a work site to maximize a recipient's ability to perform the job, also known as job accommodations
- Training to enable a recipient to independently travel from his/her home to place of employment
- Providing employee education and training as requested by employer on disability issues
- Providing employers with information on benefits available when hiring a person with a developmental disability such as on the job training (OJT) or Work Opportunities Tax Credit (WOTC)
- Assisting with personal care activities of daily living.

The following activities in addition to the activities listed above may be included for self-employment/microenterprise:

- Coordinating access to grants and other resources needed to begin and/or sustain the enterprise

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

- Identifying equipment and supplies needed
- Facilitating consultation with groups able to offer guidance such as Louisiana Economic Development and the Small Business Administration
- Assisting with creation of a business plan
- Facilitating interactions with required legal entities such as necessary business licensing agencies, fire marshals and building inspectors; and
- Assisting with hiring, training and retaining appropriate employees.

NOTE: Funds for self-employment may not be used to defray any expenses associated with setting up or operating a business.

Documentation Requirements

The following documentation reflecting the recipient's choice of occupation as documented on the ISP must be submitted to the recipient's support coordinator for approval. **These elements can be listed or contained in a narrative report:**

- All objectives and timelines related to job discovery and development outlined in the ISP were met timely. If changes were made, the revised ISP and new signature page with dates must be attached;
- Dates, times, names and addresses of companies contacted and method of contact (e.g. in-person, by phone, letter, e-mail or through employer's website);
- Job restructuring activities, including meetings specific to an identified position in a community business including date, time, and names and job titles of community business staff in attendance. If meeting(s) occurred, meeting minutes must be submitted;
- Community business education and/or trainings specific to an identified job in a community business, including date, time, names and job titles of community business staff in attendance, and content of education and/or training session(s);
- Job accommodation, travel training, and any other employment related activities specific to an identified job in a community business;
- Amount of time spent in discovery and development per day; and
- Confidentiality release forms in the recipient's native language, if applicable, that he/she approved contacts, meetings, education or training to occur in his/her absence.

The recipient may **or** may not be present during job discovery and development activities. If the recipient is not present, a signed and dated confidentiality release form must be completed.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

Staffing Ratios for Job Assessment, Discovery and Development**Job Assessment**

The recipient **must be** present in order to receive individual, self-employment/microenterprise or group employment **job assessment services**. Job assessments must be done on a one staff to one recipient ratio. For group employment, rates for job assessment are **paid per recipient, not per group**.

Job Discovery and Development

Individual and group employment job discovery and development may be billed on a one staff to multiple recipient ratios. The staff ratio needed to support the recipient must be documented on the POC.

When individual job discovery and development is billed on one staff to multiple recipient ratios, post authorization documentation must show individual outcomes. For example, if an employer bills for two recipients on the same day for the same time period, post authorization documentation must show that job development efforts were made for each individual according to his/her identified specific career interests. If more than one recipient's identified career interest is childcare then billing could reflect a visit to one childcare facility on behalf of both recipients. However, if one recipient's identified career interest is childcare and the other recipient wishes to work in a medical setting, documentation must show visits to the specific type of business for each recipient.

Service Limits for Job Assessment, Discovery and Development

Activities will be authorized for a maximum of **120 standard units in a service year** for individual job assessment, discovery and development, and 20 standard units in a service year for group employment job assessment, discovery and development.

A standard unit of service is six or more hours per day in job assessment, discovery, and development.

Utilization of job assessment units will be counted towards the total available units for job assessment, discovery and development for a service year. Therefore, if 120 (individual job/self-employment/microenterprise) or 20 (group employment) standard units are utilized in a service year, job discovery and development could not begin until the next service year. If all available units in job assessment, discovery and development are used only for job assessment for a recipient in one service year, only job discovery and development activities and not job assessment will be authorized for the next service year.

CHAPTER 43: SUPPORTS WAIVER**SECTION 43.4: COVERED SERVICES****PAGE(S) 28**

Authorization of Services

To receive prior-authorization for Job Assessment, Discovery and Development services, the portion of the ISP covering these services must be submitted to the recipient's support coordinator with measurable goals, objectives and time lines that address these services. The ISP must be signed and dated by the recipient, his/her responsible representatives and support team members indicating agreement with the goals, objectives and time lines. **The Job Assessment, Job Discovery, Job Development form must be completed** (see Appendix D).

Specific documentation that shows evidence that the goals, objectives and time lines on the ISP related to those activities have been met must be submitted to the recipient's support coordinator for post-authorization. If an objective or time line cannot be met timely, the provider must facilitate changes prior to the end date of the objectives and timelines on the ISP and obtain team members' dated signatures indicating agreement with the changes. Partial completion of job assessment, discovery and/or development of ISP objectives and timelines will **not** qualify for post authorization and payment.

Initial Job Support and Retention

Initial Job Support is provided to the recipient on or off the job site by provider staff. It may be intensive, intermittent, short-term and/or ongoing.

Initial job support and retention consists of one or more of the following activities:

- Provision of support at a job site by provider staff that ensures the recipient can maintain and meet the expectations of the employer;
- Assisting with personal care activities of daily living in the employment setting by provider staff;
- Face-to-face support off the job site by provider staff that is necessary for the recipient to maintain gainful employment. Examples of this kind of contact include, but are not limited to:
 - A recipient needing travel re-training to the work site due to changes in transportation;
 - A recipient needing assistance in setting up an alarm clock system at home in order to be at work on time; The recipient wishing to discuss a problem that involves personal issues that could affect his/her ability to retain the job at a place other than the work site;

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

- The recipient needing assistance with completing documentation required by the employer or by an agency providing benefits that are affected by work income, such as SSI.
- Communications with the recipient by telephone, e-mail or fax that is necessary for the recipient to maintain gainful employment.
- Meetings with the community employer without the recipient present are limited to five days per service year; which are counted as part of the total maximum number of standard units available. Examples of when such a meeting might occur include, but are not limited to:
 - Explanation and/or demonstration of significant change in job duties which the employer feels may require re-training for the recipient to remain successfully employed; or
 - Discussion of a behavioral issue that may adversely impact the recipient's ability to remain successfully employed.

If the recipient is not present at a meeting with the community employer, the provider will be expected to have the following documentation available upon request of the support coordinator, OCDD/WSS or HSS staff:

- Date, time, names of persons in attendance at meeting;
- Location and method of meeting (i.e. face-to-face with employer, by phone, or internet/videoconference);
- Reason for meeting without recipient and results of meeting; and
- Written documentation through applicable confidentiality release forms in the recipient's native language that the recipient approved contacts and/or meetings to occur in his/her absence.
- Transportation to or from a community business site by provider staff in a staff or provider-owned vehicle. However, the provider must produce documentation upon request of the support coordinator or OCDD, WSS or HSS staff that all other possible sources of transportation, including those incurring a charge or without charge, have been exhausted.

NOTE: Under no circumstances can a provider charge a recipient, his/her responsible representative(s), family members or other support team members a separate transportation fee.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

In addition to the list above, these activities can be considered initial job support and retention activities for self-employment/microenterprise:

- Assisting the recipient in acquisition of skills necessary for operation of the business including clerical, payroll, tax functions, and inventory tracking system;
- Assisting with interviewing, hiring or terminating employees;
- Assisting with communications with vendors and customers; and
- Assisting with all functions of business operations.

Initial job support and retention will be authorized for an individual job a recipient holds in a provider-owned facility when:

- The recipient is paid the same wage as a regular employee of that provider, but at least minimum wage;
- There is a job description for the position that would be utilized by the provider for a person without a disability; and
- The recipient is paid all benefits, including holidays, absentee and vacation time that other employees without disabilities would receive in a comparable position.

Initial job support and retention may be authorized for group employment in a provider-owned or leased facility when:

- The building in which business is conducted is in a separate physical location from the rest of the provider facility.
- Members of the public are the primary customers who utilize the services of the business.

Examples of this include but are not limited to laundry/ironing services, restaurants and retail shops.

Initial job support and retention will only be authorized for individual job, self-employment/microenterprise or group employment for which the recipient is paid in accordance with the United States Fair Labor Standards Act of 1985 as amended.

Restrictions with Other Services

Recipients receiving Supported Employment services may also receive Day Habilitation or Prevocational Services, but these services cannot be billed for the same service day.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

Service Limits

Individual job, microenterprise/self-employment or group employment initial job support and retention activities may be authorized for **240 standard units in a service year**. Rates are paid per recipient, not per group. **A standard unit of service is one hour or more per day.**

Post authorization for initial job support and retention for units above 240 standard units per POC year will be granted when the support coordinator receives and approves documentation generated by the community business or host company where the recipient(s) performs job duties. Post authorization for excess units will occur after 240 standard units have been utilized.

When a recipient(s) perform job duties at more than one community business or host company, there must be documentation from each employer. Acceptable documentation for post authorization from community businesses or host companies for units in excess of 240 units per POC year are the following:

- Recipient payroll records; or
- Statement signed by the employer or host company that the recipient(s) is required to work in excess of 240 days per calendar year; or
- A formal agreement or contract signed by the employer and provider that outline the recipient's and provider's responsibility to be present in excess of 240 days per POC year to accomplish a job task; and
- Progress notes or other documentation from the provider that show initial job support and retention activities occurred for one or more hours per day in excess of 240 standard units in the POC year.
- A written or oral statement from the provider will not be accepted for approval of post authorization for units in excess of 240 standard units per POC year.

Staffing Ratios

Individual job, self-employment and microenterprise initial job support and retention must be provided with a one staff to one recipient ratio.

Group employment initial job support and retention must have one of the following staff to recipient ratios in order to receive payment:

- One-staff to one recipient. This option is only available if the staff providing one-to-one support is in addition to a crew supervisor and is in attendance for the entire shift;
- One staff to two recipients;

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

- One staff to three to four recipients; or
- One staff to five to eight recipients.

The maximum ratio for group employment is one staff to eight recipients.

Additional Provider Responsibilities

Prior to receiving SE services, the recipient must apply for, and exhaust any similar services available through Louisiana Rehabilitation Services (LRS) or the Individuals with Disabilities Education Act (IDEA) if the recipient is still attending high school. Services will be considered unavailable if a recipient applies, is eligible and qualifies for LRS services but is put on a waiting list. However, if there is no waiting list, the recipient must utilize LRS services prior to receiving initial job support and retention through the waiver, regardless of the amount of time it takes for the recipient to begin receiving job assessment, discovery and development services through LRS.

There must be documentation in the recipient's file that these services are not available from programs funded under the Rehabilitation Act of 1973, the IDEA or Medicaid State Plan.

Place of Service

Supported employment is conducted in a variety of settings, in particular at work sites in which persons without disabilities are employed. When services are provided at a work site in which persons without disabilities are employees, payment will be made only for the adaptations, supervision, and training required by recipients receiving waiver services as a result of their disabilities, and will not include payment for the supervisory activities rendered as a normal part of the business setting.

Transportation

Transportation is included in supported employment, but whenever possible, family, neighbors, friends, co-workers or community resources that can provide transportation without charge should be utilized. **Under no circumstances can a provider charge a recipient, his/her responsible representative(s), family members or other support team members a separate transportation fee.**

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

Provider Qualifications

Providers of Supported Employment services must meet the following requirements:

- Possess a certificate of compliance from Louisiana Rehabilitation Services as a community rehabilitation provider and maintain this certificate
- Meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services.

OR

- Be licensed as an Adult Day Care provider by the Department of Health and Hospitals (DHH);
- At least one vocational supervisor receives 15 hours of vocational training annually;
- Meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services.

Day Habilitation

Day habilitation is services that provide recipients with assistance in developing social and adaptive skills necessary to enable them to participate as independently as possible in the community.

Day Habilitation services allows for peer interaction, meaningful and age-appropriate activities, community and social integration, which provide enrichment and promote wellness.

Day habilitation includes the assistance and/or training in the performance of tasks related to acquiring, maintaining, or improving skills including but not limited to: personal grooming, housekeeping, laundry, cooking, shopping, and money management.

Day Habilitation services:

- Shall be coordinated with any physical, occupational, or speech therapies or employment listed in the recipient's approved POC.
- May serve to reinforce skills or lessons taught in school, therapy, or other settings.
- Shall be provided in a setting separate from the recipient's private residence and focus on enabling the recipient to attain or maintain his or her maximum functional level.
- Shall be used to increase the recipient's self-sufficiency in their home and community.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

- Shall include activities of his or her choice in the community such as trips to museums, parks, libraries, sporting events and other activities that non-disabled peers enjoy.

Some examples of Day Habilitation services include, but are not limited to, the following:

- A recipient receives assistance and prompting with personal hygiene, dressing, grooming, eating, toileting, ambulation or transfers, other personal care and behavioral support needs, and any medical task which can be delegated. However, personal care assistance may not comprise the entirety of this service.
- A recipient participates in a community inclusion activity designed to enhance his/her social skills.
- A recipient receives training in basic nutrition and cooking skills at a community center.
- A recipient is provided with aerobic aquatics in an inclusive setting to maintain his/her range of motion.
- A recipient learns how to make choices and order from a fast food restaurant.
- A recipient is taught how to observe basic personal safety skills.
- A recipient does volunteer work in the community alongside peers without disabilities to improve social skills and establish connections.
- A recipient and, as appropriate, his/her family receive information and counseling on benefits planning and assistance in the process.
- A recipient participates in inclusive sports activities in their community.
- A recipient participates in town hall meetings and other community meetings to gather a better understanding of his community.
- A recipient receives a basic understanding of his right to vote and how to vote.
- A recipient receives information on current events.

Place of Service

Day habilitation is provided in a setting separate from the recipient's private residence. Activities and environments are structured and designed to foster the acquisition of skills, appropriate behavior, greater independence, and personal choice which will increase the recipient's self-sufficiency and maximize his/her use of the community.

Community inclusion activities occur in any community setting alongside peers without disabilities and may be educational and/or recreational in nature and cover a wide range of opportunities to allow the recipient to be a part of the community and allow the recipient to contribute to his or her community.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

Volunteer activities must follow the guidelines of the United States Fair Labor Standards Act of 1985 as amended and occur in a business or organization where people without disabilities typically volunteer. These activities may be done individually or in a group.

NOTE: Volunteer activities cannot occur in a provider-owned business or facility.

Facility-based activities that occur in a provider owned facility, are recreational, educational or clinical in nature and cover a wide range of opportunities. Facility-based activities include but are not limited to sensory motor development, social, communication and behavioral skills, crafts, computers, gardening, self-advocacy, music and art appreciation.

Restrictions with Other Services

Recipients receiving Day Habilitation services may also receive Prevocational or SE services, but these services cannot be billed in the same service day.

Work activity training and work hardening skills training are prevocational services. Day habilitation will not be authorized for services that prepare a recipient for paid or unpaid employment in the community. This includes teaching concepts such as compliance, attendance, task completion, problem-solving and safety that are associated with performing compensated work, as well as, activities aimed at a generalized outcome.

Vocational related services begin when the recipient arrives at the training site and the training activities begin.

Staffing Ratios

Day habilitation activities may occur with one of the following staff ratios:

- One staff to one recipient;
- One staff to two to four recipients; or
- One staff to five to eight recipients.

The maximum ratio for day habilitation is one staff to eight recipients.

Transportation

All transportation costs are included in the reimbursement for Day Habilitation services. If a recipient needs transportation, the provider must provide, arrange or pay for appropriate transport to and from a central location convenient for the recipient agreed upon by the team. The need for transportation and the location must be documented on the ISP. Recipient must be present to

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

receive this service. Under no circumstances can a provider charge a recipient, his/her responsible representative(s), family members or other support team members a separate transportation fee.

Service Limits

Day habilitation must be scheduled on the service plan for one or more days per week and may be prior authorized for 240 up to a maximum of 254 standard units of service in a POC year. **A standard unit of service is five or more hours per day.**

Day habilitation may be prior authorized for a maximum of 254 units in a POC year if the support coordinator determines through the assessment process and information from the support team that the recipient has a need for more than 240 standard units per POC year. PA will be granted based on information including, but not limited to:

- Behavior plans that specify supports in excess of 240 days per POC year;
- Goals on the POC that require in excess of 240 standard units for the service year;
- Requests from the recipient, family, support team members or providers for units in excess of 240 without programmatic justification that the recipient will benefit from excess units will not qualify for PA.
- The fact that a provider agency is open for more than 240 days per calendar year will not qualify for PA of units in excess of 240 standard units per POC year.

Post authorization will be granted for a maximum of 254 standard units in a POC year when the support coordinator receives and approves attendance records from the provider showing the number of days the recipient received services.

Authorization of Services

In order to receive prior authorization when Day Habilitation and Habilitation services are chosen in conjunction with one another, the provider must submit specific educational strategies and time lines for each service that will be used to achieve the goals and time lines as outlined on the POC and on the ISP. This documentation must be submitted to the support coordinator within five working days after receiving the completed POC. This process must occur regardless of whether the same provider is chosen by the recipient for both services, or different providers are chosen for each service.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

The support coordinator will:

- Facilitate development of a POC that specifies but does not duplicate the training, supports and staff ratio, and time lines for Day Habilitation and Habilitation services;
- Cross reference the POC and the provider(s) ISP to ensure that no duplication of services will occur;
- Approve PA; and
- Forward the approved provider(s) ISP to the OCDD/WSS Regional Office the same or next business day after completing the cross checks.

Provider Qualifications

Day habilitation providers must meet the following requirements:

- Be licensed as an Adult Day Care provider by the DHH;
- Meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services.

Prevocational Services

Prevocational services prepare a recipient for paid or unpaid employment in the community and include teaching concepts such as compliance, attendance, task completion, problem solving and safety that are associated with performing compensated work.

Prevocational services are not job task oriented but instead are aimed at a generalized result and are directed to habilitative rather than explicit employment objectives. These services are provided to persons not expected to join the general work force within one year of service initiation.

Prevocational services may include, but are not limited to:

- A recipient receives assistance and prompting in the development of employment-related skills. This may include assistance with personal hygiene, dressing, grooming, eating, toileting, ambulation or transfers, and behavioral support needs and any medical task, which can be delegated. However, personal care assistance may not comprise the entirety of this service.
- A recipient is employed at a commensurate wage at a provider facility for a set or variable number of hours.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

- A recipient observes an employee of an area business to obtain information to make an informed choice regarding vocational interest.
- A recipient is taught to use work related equipment.
- A recipient is taught to observe work-related personal safety skills.
- A recipient is assisted in planning appropriate meals for lunch while at work.
- A recipient learns basic personal finance skills.
- A recipient and his/her family, as appropriate, receive information and counseling on benefits planning and assistance in the process.

In the event recipients are compensated, pay must be in accordance with the United States Fair Labor Standards Act of 1985 as amended. If recipients are paid in excess of 50% of minimum wage, the provider must:

- Conduct productivity time studies on the recipient every six months;
- Do six month formal reviews of the recipient's ISP to determine the appropriateness of continued prevocational services as opposed to supported employment; and
- Provide the support coordinator with documentation of both the productivity time studies and ISP reviews at the recipient's annual POC meeting.

Place of Service

Prevocational services are provided in a supervised facility-based setting operated through the provider agency where more than 25% of the recipients are individuals with a developmental disability.

Staffing Ratios

Prevocational activities may occur with one of the following staff ratios:

- One staff to one recipient;
- One staff to two to four recipients; or
- One staff to five to eight recipients;

The maximum ratio for prevocational services is one staff to eight recipients.

Transportation

All transportation costs are included in the reimbursement for Prevocational services. Transportation needed by the recipient must be documented on the POC. The recipient must be

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

present to receive this service. If the recipient needs transportation, the provider must physically provide, arrange, or pay for appropriate transport to and from a central location convenient for the recipient agreed upon by the team. This location shall be documented in the service plan.

NOTE: Under no circumstances can a provider charge a recipient, his/her responsible representative(s), family members or other support team members a separate transportation fee.

Restrictions with Other Services

Recipients receiving Prevocational services may also receive Day Habilitation or Supported Employment services, but these services cannot be billed in the same service day.

There must be documentation in the recipient's file that this service is not available from programs funded under Section 110 of the Rehabilitation Act of 1973 or Sections 602 (16) or (17) of the Individuals with Disabilities Education Act (230 U.S.C. 1401) (16 and 71) and those covered under the State Plan.

Service Limits

Prevocational services must be scheduled on the service plan for one or more days per week and may be prior authorized for 240 up to a maximum of 254 standard units of service in a POC year. **A standard unit of service is five or more hours per day.**

Prevocational services may be prior authorized for a maximum of 254 units in a POC year if the support coordinator determines through the assessment process and information from the support team that the recipient has a need for more than 240 standard units per POC year.

PA will be granted based on information including, but not limited to:

- Behavior plans that specify supports in excess of 240 days per POC year;
- Goals on the POC that require in excess of 240 standard units for the service year;

PA will **NOT** be granted based on information including, but not limited to:

- Requests from the recipient, family, support team members or providers for units in excess of 240 without programmatic justification that the recipient will benefit from excess units. .

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

- The fact that a provider agency is open for more than 240 days per calendar year will not qualify for PA of units in excess of 240 standard units per POC year.

Post authorization will be granted for a maximum of 254 standard units in a POC year when the support coordinator receives and approves attendance records from the provider showing the number of days the recipient received services.

Choice of this service and staff ratio needed to support the recipient must be documented on the POC.

Provider Qualifications

Providers of Prevocational services must meet the following requirements:

- Possess a certificate of compliance from Louisiana Rehabilitation Services as a Community Rehabilitation Provider and maintain this certificate;
 - Meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services;
- OR**
- Be licensed as an Adult Day Care provider by the DHH;
 - At least one vocational supervisor receive 15 hours of vocational training annually; and
 - Meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services.

Respite

Respite is a service provided on a short-term basis to a recipient unable to care for him/herself because of the absence of or need for relief of those unpaid caregivers/persons normally providing care for the recipient. Services may be provided in the recipient's home or private residence, the direct service worker's home, or in a licensed respite care facility determined appropriate by the recipient or responsible party.

Respite services may be preplanned on the POC. However, if a recipient anticipates needing respite in the POC year, but does not know when this will occur; he/she and his/her responsible party should receive a FOC list of respite providers and interview these providers. In this manner, the recipient and his/her responsible party(ies) and the provider chosen will be familiar with each other. When a situation occurs during the POC year in which respite will be needed, a revision to the POC will be done by the support coordinator; and the recipient will be able to access the service in a timely manner.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

Restrictions with Other Services

Recipients receiving respite may use this service in conjunction with other SW services as long as services are not provided during the same period in a day.

Service Limits

The need for respite must be documented in the POC. Respite shall not exceed 428 standard units of service in a plan year. A standard unit of service is 15 minutes (1/4 hour).

Provider Qualifications

Respite service providers must meet the following requirements:

- Be licensed as a respite care service provider and/or a personal care attendant service provider by the DHH;
- Meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services.

Habilitation

Habilitation services are designed to assist recipients in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and/or in community settings.

These services are educational in nature and focus on achieving a goal utilizing specific teaching strategies. Goals may cover a wide range of opportunities including but not limited to learning how to clean house, do laundry, wash dishes, grocery shop, bank, cook meals, shop for clothing and personal items, become involved in community recreational and leisure activities, do personal yard work, and utilize transportation to access community resources.

Habilitation services include but are not limited to the following:

- A recipient receives assistance in learning how to maintain their home including, washing dishes, laundry, vacuuming, mopping and other household tasks.
- A recipient acquires skills needed to cook/prepare nutritional meals in their home.
- A recipient receives assistance in learning how to grocery shop in the community as well as other community activities such as going to the bank, library and other places in the community.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

- A recipient learns travel training to community sites other than work sites.
- A recipient receives assistance and prompting with personal hygiene, dressing, grooming, eating, toileting, ambulation or transfers, other personal care and behavioral support needs, and any medical task which can be delegated. However, personal care assistance may not comprise the entirety of this service.
- A recipient participates in a community inclusion activity designed to enhance his/her social skills.
- A recipient learns how to make choices and order from a fast food restaurant.
- A recipient is taught how to observe basic personal safety skills.

Habilitation services may be provided at any time of day or night on any day of the week as needed by the recipient to achieve a specified goal.

Recipients in Habilitation services are reasonably expected to independently achieve the goal(s) identified on their service plan within measurable time lines, as evidenced by information from their standardized assessment, personal outcome interviews and information from their support team members.

Place of Service

Habilitation services are provided in the home or community with the recipient's place of residence as the primary setting, and include the necessary transportation.

Staffing Ratio

Habilitation services may **only** be provided on a one staff to one recipient ratio.

Restrictions with Other Services

Recipients receiving habilitation may use this service in conjunction with other Supports Waiver services as long as services are not provided during the same time period in a day.

Travel training to places in the community, where the recipient's life activities take place, is considered a service. However, travel training to the recipient's Supported Employment, Day Habilitation, or Prevocational sites is **not** considered a Habilitation service.

Authorization of Services

To receive PA when Day Habilitation and Habilitation services are chosen in conjunction with one another, the provider must submit specific educational strategies and time lines for each

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

service that will be used to achieve the goals and time lines as outlined on the POC. This documentation must be submitted to the support coordinator within five working days after receiving the completed POC. This process must occur regardless of whether the same provider is chosen by the recipient for both services or different providers are chosen for each service.

Day habilitation ISP recreational goals, strategies and time lines should not be submitted. If the day habilitation ISP contains only recreational goals, the habilitation portion of the ISP is the only document that needs to be submitted to the support coordinator.

The support coordinator will:

- Facilitate development of a POC that specifies but does not duplicate the training, supports and staff ratio, and time lines for Day Habilitation and Habilitation services;
- Cross reference the POC and the provider(s) ISP(s) to ensure that no duplication of services will occur;
- Approve prior authorization; and
- Forward the approved provider(s)' ISP(s) to the OCDD/WSS Regional Office the same or next business day after completing the cross checks.

Service Limits

Habilitation shall not exceed 285 standard units of service in a plan year. A standard unit of service is 15 minutes (¼ hour).

Provider Qualifications

Providers of Habilitation services shall meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services and one of the following two requirements:

- Be licensed as a respite care service provider and/or a personal care attendant service provider by the DHH;

OR

- Be a licensed occupational therapist in the State of Louisiana, or a licensed physical therapist in the State of Louisiana or certified through the National Council for Therapeutic recreation as a therapeutic recreational specialist and be an employee of an agency holding a personal care attendant and/or adult day care license through the DHH Health Standards Section.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

Housing Stabilization Transition Services

Housing stabilization transition services enable recipients who are transitioning into a permanent supportive housing unit, including those transitioning from institutions to secure their own housing. The service is provided while the recipient is in an institution and preparing to exit the institution using the waiver. The service includes the following components:

- Conducting a housing assessment that identifies the recipient's preferences related to housing (type and location of housing, living alone or living with someone else, accommodations needed, and other important preferences), and identifying the recipient's needs for support to maintain housing including:
 - Access to housing,
 - Meeting the terms of a lease,
 - Eviction prevention,
 - Budgeting for housing/living expenses,
 - Obtaining/accessing sources of income necessary for rent,
 - Home management,
 - Establishing credit, and
 - Understanding and meeting the obligations of tenancy as defined in the lease terms.
- Assisting the recipient to view and secure housing as needed. This may include:
 - Arranging or providing transportation,
 - Assisting in securing supporting documentation/records,
 - Assisting with the completing/submitting applications,
 - Assisting in securing deposits, and
 - Assisting with locating furnishings.
- Developing an individualized housing support plan based upon the housing assessment that:
 - Includes short- and long term measurable goals for each issue,
 - Establishes the recipient's approach to meeting the goal, and
 - Identifies where other provider(s) or services may be required to meet the goal,

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

- Participating in the development of the POC and incorporating elements of the housing support plan, and
- Exploring alternatives to housing if permanent supporting housing is unavailable to support completion of transition.

Standards

Housing stabilization transition services may be provided by permanent supportive housing agencies that are enrolled in Medicaid to provide this service, comply with DHH rules and regulations and be listed as a provider of choice on the Freedom of Choice (FOC) form.

Service Exclusions

No more than 165 units of combined **housing stabilization transition services** and **housing stabilization services (see definition)** can be used per POC year without written approval from the OCDD State Office.

Service Limitations

This service is only available upon referral from the support coordinator and is not duplicative of other waiver services, including support coordination. This service is only available to persons who are residing in or who are linked for the selection process of a State of Louisiana permanent supportive housing unit.

No more than 72 units of housing stabilization services can be used per POC year without approval from the OCDD State Office.

Reimbursement

Payment will not be authorized until the local governing entity gives final POC approval.

The OCDD State Office reviews and ensures that all requirements are met. If all requirements are met, the POC is approved and the payment is authorized. The permanent supportive housing provider (PSH) is notified of the release of the PA and can bill the Medicaid fiscal intermediary for services provided.

Housing stabilization transition services will be reimbursed at a prospective flat rate for each approved unit of service provided to the recipient. **A standard unit of service is equal to 15 minutes.**

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

Housing Stabilization Services

Housing stabilization services enable waiver recipients to maintain their own housing as set forth in the recipient's approved POC. Services must be provided in the home or a community setting. This service includes the following components:

- Conducting a housing assessment that identifies the recipient's preferences related to housing (type and location of housing, living alone or with someone else, accommodations needed, and other supportive preferences), and identifying the recipient's needs for support to maintain housing, including:
 - Access to housing,
 - Meeting the terms of a lease,
 - Eviction prevention,
 - Budgeting for housing/living expenses,
 - Obtaining/accessing sources of income necessary for rent,
 - Home management,
 - Establishing credit, and
 - Understanding and meeting the obligations of tenancy as defined in the lease terms.
- Participating in the development of the Plan of Care, incorporating elements of the housing support plan.
- Developing an individualized housing stabilization service provider plan based upon each assessment that:
 - Includes short- and long-term measurable goals for each issue,
 - Establishes the recipient's approach to meeting the goal, and
 - Identifies where other provider(s) or service may be required to meet the goal.
- Providing supports and interventions according to the individualized housing support plan. If additional supports or services are identified as needed outside the scope of housing stabilization service, the needs must be communicated to the support coordinator,

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES**PAGE(S) 28**

- Providing ongoing communication with the landlord or property manager regarding:
 - The recipient's disability,
 - Accommodations needed, and
 - Components of emergency procedures involving the landlord or property manager.
- Updating the housing support plan annually or as needed due to changes in the recipient's situation or status; and

If at any time the recipient's housing is placed at risk (eviction, loss of roommate or income), housing stabilization services will provide supports to retain housing or locate and secure housing to continue community-based supports, including locating new housing, sources of income, etc.

Standards

Housing stabilization services may be provided by permanent supportive housing agencies that are enrolled in Medicaid to provide this service, comply with DHH rules and regulations, and are listed as a provider of choice on the Freedom of Choice (FOC) form.

Service Exclusions

No more than 165 units of combined housing stabilization transition or housing stabilization services (see definition) can be used per POC year without written approval from the OCDD State Office.

Service Limitations

This service is only available upon referral from the support coordinator. This service is not duplicative of the other waiver services including support coordination. This service is only available to persons who are residing in a state of Louisiana permanent supportive housing unit.

No more than 93 units of housing stabilization services can be used per year without written approval from the support coordinator.

CHAPTER 43: SUPPORTS WAIVER

SECTION 43.4: COVERED SERVICES

PAGE(S) 28

Reimbursement

Payments will not be authorized until the OCDD state office gives final Plan of Care approval.

OCDD state office reviews all documents to ensure all requirements are met. If all requirements are met, the LGE approves the POC and authorizes the payment.

The PSH provider is notified of the release of the PA and can bill the Medicaid fiscal intermediary for services provided.

Housing stabilization services will be reimbursed at a prospective flat rate for each approved unit of service provided to the recipient. **A standard unit of service is equal to 15 minutes.**

Personal Emergency Response Systems

A Personal Emergency Response System (PERS) is a rented electronic device that enables recipients to secure help in an emergency.

The recipient may wear a portable "help" button to allow for mobility. The PERS is connected to the person's phone and programmed to signal a response center once the "help" button is activated. The response center is staffed by trained professionals.

Service Limits

Coverage of the PERS is limited to the rental of the electronic device. The monthly rental fee, regardless of the number of units in the household, must include the cost of maintenance and training the recipient on how to use the equipment.

Reimbursement will be made for a one-time installation fee for the PERS unit.

Agency Provider Type

Providers must be enrolled as a Medicaid Home and Community Based Services Waiver service provider of Personal Emergency Response System. The provider shall install and support PERS equipment in compliance with all applicable federal, state, parish and local laws and meet manufacturer's specifications, response requirements, maintenance records and recipient education requirements.

CHAPTER 43: SUPPORTS WAIVER**SECTION 43.4: COVERED SERVICES****PAGE(S) 28**

Support Coordination

Support Coordination is a service that will assist recipients in gaining access to all of their needed support services, including medical, social, educational and other services, regardless of the funding source for the services.

Support Coordination activities include but are not limited to the following:

- Convening the person-centered planning team comprised of the recipient, recipient's family, direct service providers, medical and social work professionals, as necessary, and advocates, who assist in determining the appropriate supports and strategies needed in order to meet the recipient's needs and preferences.
- On-going coordination and monitoring of supports and services included in the recipient's approved POC.
- Building and implementing the supports and services as described in the POC.
- Assisting the recipient to use the findings of formal and informal assessments to develop and implement support strategies to achieve the personal outcomes defined and prioritized by the recipient in the POC.
- Providing information to the recipient on potential community resources, including formal resources and informal/natural resources, which may be useful in developing strategies to support the recipient in attaining his/her desired personal outcomes.
- Assisting with problem solving with the recipient, supports, and services providers.
- Assisting the recipient to initiate, develop and maintain informal and natural support networks and to obtain the services identified in the POC assuring that they meet their individual needs.
- Advocacy on behalf of the recipient to assist them in obtaining benefits, supports or services, i.e. to help establish, expand, maintain and strengthen the recipient's information and natural support networks. This may involve calling and/or visiting recipients, community groups, organizations, or agencies with or on behalf of the recipient.
- Training and supporting the recipient in self-advocacy, i.e. the selection of providers and utilization of community resources to achieve and maintain his/her desired outcomes.
- Oversight of the service providers to ensure that their recipient receives appropriate services and outcomes as designated in the POC.
- Assisting the recipient to overcome obstacles, recognize potential opportunities and developing creative opportunities.

CHAPTER 43: SUPPORTS WAIVER**SECTION 43.4: COVERED SERVICES****PAGE(S) 28**

- Meeting with the recipient in a face-to-face meetings as well as phone contact as specified.
- Must report and document any incidents/complaints/abuse/neglect according to the OCDD policy.
- Must arrange any necessary professional/clinical evaluations needed and ensure recipient choice.
- Must identify, gather and review the array of formal assessments and other documents that are relevant to the recipient's needs, interests, strengths, preferences and desired personal outcomes.
- Prepare the annual social summary.
- Develop an action plan in conjunction with the recipient to monitor and evaluate strategies to ensure continued progress toward the recipient's personal outcomes.

NOTE: Advocacy is defined as assuring that the recipient receives appropriate supports and services of high quality and locating additional services not readily available in the community.

Service Limits

Support Coordination shall not exceed 12 units. A unit is considered a month.

Provider Qualifications

Support Coordination providers must meet the following requirements:

- Be licensed as a support coordination provider;
- Meet all requirements in the Standards for Participation for Medicaid Home and Community-Based Waiver Services.

NOTE: Please refer to the Case Management manual for additional information.