

DBHDS
OFFICE OF DEVELOPMENTAL SERVICES
COMMUNITY BULLETIN #8
MAY 2012

This is the eighth in a series of communications from the Office of Developmental Services (ODS) aimed at keeping ID Waiver and Targeted Case Management providers (CSBs and private providers) informed regarding the new initiatives and in compliance with established requirements.

PROVIDER CHOICE FOR AT/EM/PERS

Support Coordinators/Case Managers, please remember that all ID/DS Waiver services should be included on individuals' Provider Choice forms. This includes the services of Assistive Technology, Environmental Modifications and Personal Emergency Response Systems. If there is only one provider serving a particular area, that provider should still be listed.

**THE ID MEDICAID TARGETED CASE MANAGEMENT
MODULES ARE NOW AVAILABLE!**

The Office of Developmental Services is pleased to be able to offer the CSBs a combination of training in ID Targeted Case Management (TCM) through the DBHDS Knowledge Center, an online learning system, followed by an optional on-site visit from the Community Resource Consultant for a question and answer session with the support coordinators.

This training consists of ten TCM modules and accompanying handouts. The information in previous TCM trainings has been updated and reflects information contained in the MR/ID Community Services Manual (7/14/2010), as well as information on IDOLS and the person-centered ISP.

Instructions for accessing the modules are at the following site:

<http://www.dbhds.virginia.gov/ODS-default.htm>

Please pass this along to all support coordinators and supervisors and contact your CRC if you need assistance or for scheduling follow-up visits. These training modules are free and provide critical policy and procedural information needed by support coordinators providing Medicaid Targeted Case Management, including TCM for individuals using the ID and DS Waivers. We hope you find this training useful and welcome feedback about the modules.

SLOT ASSIGNMENT PROCESS ISSUES

Overall, it appears that the slot assignment process initiated in 2010 is working well across the state. However, a couple of reminders are warranted.

- 1) The full process, as detailed in the “ID Waiver Slot Assignment Process” guidance document, available on the DBHDS website at <http://www.dbhds.virginia.gov/ODS-MRWaiver.htm> (under ID Waiver), should be followed for every ID Waiver community slot assigned. There have been some reports that “the next individual on the Tier 2 list” was given an available slot quite some time after the Waiver Slot Advisory Committee (WSAC) met to determine the disposition of the last available slot. This is not permitted. The Slot Assignment Process document states, “Each CSB/BHA shall call a waiver slot assignment committee (WSAC) to meet as soon as possible when a slot is available.”

As an outer limit, if a slot becomes available **no more than one month** following the last in-person meeting of the WSAC assigning the previous available slot **and** the CSB confirms that there have been *no changes* to the status of any of the individuals on the CSB’s urgent needs list, the next person on the Tier 2 list may be assigned the slot. This may take place as long as the last WSAC committee members assemble by phone or email to weigh in on the appropriateness of the assignment. However, if there is any doubt or if there has been any change in status to an individual on the CSB’s urgent needs list, the WSAC must actually meet in person to review the top scoring (Tier 1) individuals, per the “Intellectual Disability Waiver Slot Assignment Process” available on the DBHDS website.

The above clarification will be added to the Waiver slot Assignment Process document located at the web address listed in the first paragraph above.

- 2) The “Slot Assignment Results Spreadsheet” form **MUST BE** sent as soon as possible to the CSB’s Community Resource Consultant (CRC) following the decision of the WSAC. All CSBs have received training on the procedures to accomplish this via IDOLS. Data on compliance with this policy is one of the performance measures against which CMS evaluates the ID Waiver. Therefore, it is critical that this be completed and forwarded with each community slot assignment.

UPDATES TO THE PC ISP

The PC ISP format has remained unchanged since July of 2009. We are excited about a couple of revisions and one addition that will incorporate our learning since its introduction.

Specifically, the Person-Centered Review and Shared Planning Document have been simplified and better reflect the contents of the 2-day Person-Centered Thinking Training, without losing the content. A Safety Supports Checklist is now available to document overnight safety supports in residential settings. These formats are *optional* and are currently being added to the Advanced PC ISP training which will be available on the DBHDS Knowledge Center this spring. Instructions on how to access the training will be forthcoming. The documents are currently available for use and can be accessed online at the DBHDS website: <http://www.dbhds.virginia.gov/ODS-PersonCenteredPractices.htm>.

SIS™ REMINDER

CSBs should have completed the first Supports Intensity Scale™ for each person on the ID and DS Waiver by 6/30/12. Second round SIS administration begins 7/1/12. Please remember that it is required that each adult receiving ID and DS Waiver services receive the SIS assessment every three years (every two years for children 5 – 15 years of age).

RETAINING WAIVER SLOTS

Another form which must be sent to the CSB's CRC in a timely manner is the "Retain Slot of Individual Not Currently Receiving Waiver Services" form (DMH 885E 1197). The latest version of this form is dated 6/15/11, and a Word version of it may be obtained from the DBHDS website at <http://www.dbhds.virginia.gov/ODS-forms.htm> under "Forms Used by Case Managers."

This form **must be** completed in the following circumstances (per Chapter IV of the 7/14/10 "MR/ID Community Services Manual" pp. 16 – 17 and 22 - 23):

- When ID or DS Waiver services are not initiated within 60 days of enrollment (for individuals assigned community slots)
- When ID or DS Waiver services are interrupted for more than 60 consecutive days for any reason.

In both of the above circumstances, the form is submitted to the CRC via IDOLS (as an attachment) and copied to the individual or individual's family/caregiver, as appropriate. The CRC has the authority to approve or deny the request. The CRC shall provide a response to the support coordinator/case manager via IDOLS within 10 working days of the receipt of the request, indicating either "Reviewed/Accepted" or "Requires more information." If the CRC denies the request, it will be included under "Requires more information," so be sure to review the comments section for any action you might need to take. Once the support coordinator/case manager provides the requested information, the CRC will follow-up with "Reviewed/Accepted."

If Waiver services have not begun or been reinstated within 30 days, another “Retain Slot” form must be submitted to the CRC (and copied to the individual and the individual’s family/caregiver, as appropriate).

In the case of a newly enrolled individual, a maximum of four consecutive extensions may be approved.

It is important that CSBs comply with these policies so that DBHDS can ensure the status of all slots. Also, the CRC may be able to assist the support coordinator/case manager in initiating/reinitiating services in some circumstances.

FAMILY MEMBERS AS PROVIDERS

It has come to the attention of DBHDS that not all support coordinators/case managers and providers are following the policies regarding family members providing Waiver services for their loved ones. According to Chapter IV of the 7/14/10 “MR/ID Community Services Manual” p. 19 the policy regarding this practice is as follows:

Some waiver services (i.e., residential support, personal assistance, respite, and companion services) specify that payment may not be made for services rendered by family members who live under the same roof as the individual receiving services unless there is objective written documentation as to why there are no other providers available to provide the supports. Family members who are reimbursed to provide these services shall meet the same applicable standards and policies as providers who are unrelated to the individual. Examples of situations meeting the criteria of no other providers available might include when:

- *Individuals are living in a remote area unserved or underserved by other providers; or*
- *Other providers have been unsuccessful at appropriately supporting the individual.*

In these cases, the case manager shall review and document that service delivery by the family member best meets the individual’s preferences and support needs, that the family member is qualified and able to provide the supports, and that the individual’s choice of providers has been honored. Concerns that these intents will not or have not been fulfilled must be discussed with DBHDS staff.

Please especially note the underlined passages above. Also please keep in mind that CMS prevents *parents of minor children* receiving Waiver services and *spouses of individuals* receiving Waiver services from being paid providers of Waiver supports to those individuals.

To facilitate the service authorization process when requesting services that will be provided by a family member living under the same roof as the individual, it is recommended that the support coordinator include with the IDOLS submission documentation of the names of providers and dates the individual received services from each provider, as well as the reason(s) service provision by those providers was unsuccessful.

If you have any questions about a particular situation, please discuss them with your Community Resource Consultant.