

DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION (DDSD)

DIRECTOR'S RELEASE (DR)

EFFECTIVE DATE: May 19, 2014

Signature Date:	May 19, 2014
FROM:	Signature on file <hr/> Cathy Stevenson, DDSD Director
TO:	DD Waiver Providers
SUBJECT:	Updates to existing policy and procedure and 2013 DD Waiver Standards

I. SUMMARY:

This Director's Release provides guidance regarding updates to existing policy and procedure, as well as the 2013 DD Waiver Standards.

II. SPECIFIC SECTION OF THE REQUIREMENTS AFFECTED BY THIS RELEASE:

- A. Transition of Individuals in NM DDW Groups A & B from 24 Hour Residential Living Supports Policy and Procedure
- B. Group H Policy and Procedure
- C. 2013 DD Waiver Standards, Chapter 5, Community Integrated Employment Services
- D. 2013 DD Waiver Standards, Chapter 6, Customized Community Supports
- E. 2013 DD Waiver Standards, Chapter 6, Customized Community Supports-Fiscal Management for Adult Education Opportunities
- F. 2013 DD Waiver Standards, Chapter 11, Living Supports-Family Living
- G. 2013 DD Waiver Standards, Chapter 11, Living Supports-Family Living
- H. 2013 DD Waiver Standards, Chapter 12, Living Supports-Supported Living
- I. 2013 DD Waiver Standards, Chapter 13, Living Supports-Intensive Medical Living Services
- J. 2013 DD Waiver Standards, Chapter 17, Personal Support Technology

III. Requirement Amendment(s) or Clarifications:

- A. **If an individual had a Continuation of Benefits (COB) due to a Fair Hearing, the transition policy for individuals in NM DDW Groups A & B from 24 Hour Residential Living Supports applies. The policy allows one full Individual Service Plan (ISP) year for individuals to transition out of 24 hour residential services into models of service that provide intermittent support consistent with the individual's assessed need.**
 - 1. If transition planning did not occur under these circumstances, the IDT may request additional hours of Customized In-Home Supports through Group H. This request can either be temporary or long term depending on the needs of the individual.
 - 2. The DD Waiver participant and their IDT must develop a transition plan that includes a "step-down" of hours over the first ISP term of receiving less than 24 hour residential supports, to prepare for intermittent Customized In-Home Supports.

3. The process for Group H request must be followed pursuant to the Group H policy and procedure.
4. Upon Group H approval for additional transition units, the Case Manager will document the transition plan in the ISP, monitor the transition from the existing level of staff support to the staffing level for Customized In-Home Supports provided within their NM DDW service package.

B. Individuals in NM DDW Groups A & B, who have one full ISP year to transition out of 24 Hour residential living supports into models of service that provide intermittent support consistent with the individual's assessed need, cannot request Family Living or Supported Living services through Group H.

1. DDW participants and their IDT may request additional units of Customized In-Home Supports through Group H if the Interdisciplinary Teams feels the individual may need additional support to transition to a less than 24 hour support model.
2. The process for Group H request must be followed pursuant to the Group H policy and procedure.

C. Increase the amount of Individual Community Integrated Employment from an additional 5 hours up to an additional ten (10) hours (40 units) per week to provide necessary supports for individuals to maintain employment. This requires approval by Regional Community Inclusion Coordinators.

1. These requests are approved for up to 1 year and may be requested annually.
2. The DD Waiver Community Integrated Employment Provider works with individual's IDT to compile/prepare a request packet for the additional hours/units in excess of units available through their base budget and associated service package.
3. The individual's Case Manager is responsible to ensure the assembled packet is delivered to the DDS Regional Office to the appropriate DDS Community Inclusion Coordinator, via fax, hand delivery and/or by mail a minimum of 30 days prior to the beginning of the ISP or continuation of requested service.
4. Upon approval from DDS Regional Office, the Case Manager submits the budget or budget revision to include services and date spans specified in the approval along with the DDS Prior Approval Form to the Medicaid Third Party Assessor.

D. The 2013 DD Waiver Standards does not allow Customized Community Supports to be provided in the home under any circumstances.

1. If the need for day time supports in the home relates to medical issues the team can request Intensive Medical Living Services through the DDS prior approval process.
2. If the need for day time supports in the home relates to behavioral issues the team can access Individual Intensive Behavioral Supports to meet this need.

E. Chapter 6 Fiscal Management for Adult Education Opportunities, page 92:

1. Customized Community Support will provide the information requested on the Fiscal Management for Adult Education Opportunities (FMA) checklist when the individual begins to access the classes for continuing or adult education.
2. Regional Community Inclusion Coordinators (CIC) will track the types of classes people access.
3. Prior approval from the Regional Office CICs is not required.
4. DDW budget worksheets now have this service available for use under Customized Community Supports effective May 19, 2014.

F. In Chapter 11 Living Supports-Family Living, page 133: language under Service Requirements that states “Clinical Necessity Criteria for Living Supports-Family Living Services: Substantiated clinical necessity criteria must be met and prior authorization obtained for each individual to qualify for Living Supports” is being removed from the standards.

1. DDW participants assigned to NM DDW Groups C through G are eligible to receive Family Living if they choose.
2. The language outlined above in F, will be removed from the standards.

G. Living Supports-Family Living, page 148.

1. Provide or arrange up to seven hundred fifty (750) hours of substitute care as sick leave or relief for the primary caregiver.
2. Under no circumstances can the Family Living provider agency limit how these hours will be used over the course of an ISP year. It is not allowed to limit the number of substitute care hours used in a given time period, other than an ISP year.

H. In Chapter 12 Living Supports-Supported Living, page 152-153: language under Service Requirements that states “Clinical Necessity Criteria for Living Supports Services: Substantiated clinical necessity criteria must be met and prior authorization obtained for each individual to qualify for Supported Living” is being removed from the standards.

1. DDW participants assigned to NM DDW Groups C through G are eligible to receive Supported Living if they choose.
2. The language outlined above in H, will be removed from the standards.

I. Group H may authorize short term Intensive Medical Living Services for individuals in NM DDW Groups A-G.

1. Page 174, Section B. DDW participants assigned to NM DDW Groups A through G are eligible to receive short-term Intensive Medical Living Services (IMLS) based on the submission and approval of the designated eligibility parameters and with prior authorization from DDSD.
2. Remove the word “region” from DDW Standards, page 186, 3. Agency Requirements, B. Agencies do not always have to have capacity for at least one (1) short-term placement

within their organization for each **region** they serve. However, each IMLS provider must have capacity for at least one short-term placement within their organization statewide. If that short-term location is being used for a short-term placement at any given time, the agency is not expected to expand capacity to take additional short-term referrals.

J. In Chapter 17 Personal Support Technology, pages 221-222: language under Service Requirements that states “A written justification addressing the need for Personal Support Technology to fulfill activities and supports in the ISP and that identifies the associated ISP outcomes. The specifics of the proposed device must be submitted by the Case Manager to the relevant Developmental Disabilities Supports Division (DDSD) Regional Office for prior approval” is being removed from the standards.

1. DDSD Prior Authorization listed under Service Requirements for Personal Support Technology is no longer required.
2. Personal Support Technology Services funded through the DDW cannot exceed \$2500 per ISP year.
3. The language outlined above in J, will be removed from the standards.

IV. REFERENCES: Group H Policy and Procedure
Transition of Individuals in NM DDW Groups A & B from 24 Hour Residential Living Supports Policy and Procedure
April 2013 DD Waiver Standards
DDW Standards Requirement for Prior Approval by DDSD Regional Office
Provider Request Form