

Service	CURRENT Supported Living Services Definition through 6/30/09		Service	Proposed Service Definitions as of 7/1/09
Personal Assistance	<p>Personal Assistance services provides necessary personnel and supports to meet the daily living needs of a person with a developmental disability. These services and supports, including evaluation and assessment, are provided to ensure adequate functioning in the person’s own home, someone else’s home, or in the home of their natural or adoptive family.</p> <p>Personal Assistance services may include support or training with a wide range of activities necessary to meet the daily living needs of the person in the home and community including:</p>			<p><i>(DDD notation: the broad category of personal assistance is being discontinued , however, the services are now available individually as follows:)</i></p>
	<ul style="list-style-type: none"> Personal care, such as hygiene, bathing, eating, dressing, grooming, bowel and bladder care, menstrual care, transferring, supervision, basic first aid, giving medications, relief to a family who normally provides personal care, emergency response in the form of human assistance and operating medical, assistive or adaptive equipment; 		Personal Care	<p>A range of assistance to enable participants to accomplish tasks that they would normally do for themselves (i.e. hygiene, bathing, eating, dressing, grooming, bowel and bladder care, menstrual care, transferring, money management, grocery shopping), if they did not have a developmental disability. This assistance may take the form of hands-on assistance (actually performing a task for the person) or cuing to prompt the participant to perform a task. Personal Care services may be provided on an episodic, emergency or on a continuing basis. When Personal Care and health-related services are needed, they may be covered to the extent the Medicaid State Plan, Third Party Resource or another waiver service is not responsible.</p>
	<ul style="list-style-type: none"> Personal care, such as ... supervision...; 		Respite	<p>Services provided to participants that are furnished on a short-term basis, because of the absence or need for relief of those persons who normally provide care for the participant. Respite may be provided in the participant’s home/private place of residence or the private residence of a respite care provider. Federal financial participation is not to be claimed for the cost of room and board except when provided as part of respite care furnished in a facility approved by the State that is not a private residence. Respite shall be billed according to a unit rate or daily rate whichever is less.</p>

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				<p>The total amount of respite provided in one plan year may not exceed 30 days and 1,880 units per plan year. The state may approve a higher amount based on a documented increase in medical or behavioral needs as reflected in the behavior plan for behavioral needs or in the medical records for medical needs.</p> <p><i>(DDD notation: The total amount of respite provided will have two types of limitations. First, it will be limited to 30 full days per year. A full day is any service period of 40 units (10 hours) or greater. Additionally, an individual may receive up to 1,880 units (470 hours) of respite for those days in which the total hours were less than 40 units (10 hours).</i></p> <p><i>(DDD notation: the service category of supervision has been discontinued.)</i></p>
	<ul style="list-style-type: none"> Household Activities necessary to maintain a home living environment on a day-to-day basis, such as meal preparation, shopping and chores, assistance with money management and personal finances, cleaning, laundry, household repairs and maintenance which are related to the person's disability; 		<p>Basic Homemaker</p>	<p>Services that consist of the performance of basic household tasks within the participant's primary residence (i.e., cleaning, laundry, or household care) including maintenance which are related to the participant's disability and provided by a qualified homemaker, when the parent or primary caretaker is unable to manage the home and care for the participant in the home. This assistance must be due to the participant's disability that results in additional household tasks and increases the parent/caregiver's ability to provide care needed by the participant. This assistance may take the form of hands-on assistance (actually performing a task for the participant) or cuing to prompt the participant to perform a task.</p>
	<ul style="list-style-type: none"> Household Activities necessary to maintain a home living environment on a day-to-day basis, such as meal preparation, shopping and chores, assistance with money management and personal finances, cleaning, laundry, household repairs and maintenance which are related to the person's disability; 		<p>Enhanced Homemaker</p>	<p>Services provided by a qualified homemaker that consist of the same household tasks as described under Basic Homemaker services with the addition of either habilitation or extraordinary cleaning.</p> <p>Habilitation includes direct training and instruction to the participant, which is more than basic cuing to prompt the participant to perform a task. Habilitation shall include a</p>

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				<p>training program with specific objectives and anticipated outcomes. There may be some amount of incidental basic homemaker services that is provided in combination with enhanced homemaker services, however, the primary intent must be to provide habilitative services to increase independence of the participant. Habilitation may include some hands-on assistance (actually performing a task for the participant) or cuing to prompt the participant to perform a task, only when such support is incidental to the habilitative services being provided and the primary duties must be to provide habilitative services to increase independence of the participant.</p> <p>Enhanced Homemaker services also include the need for extraordinary cleaning as a result of the participant's behavioral or medical needs.</p>
	<ul style="list-style-type: none"> Mentorship activities, such as assistance with his/her participation on private and public boards, advisory groups and commissions, and person specific training costs associated with providing unique supported living services to an individual, such as training in child and infant care for parent(s) who themselves have a developmentally disability. 		Mentorship	<p>Service provided to participants to promote self-advocacy through methods such as instructing, providing experiences, modeling and advising. This service includes assistance in interviewing potential providers, understanding complicated health and safety issues, and assistance with participation on private and public boards, advisory groups and commissions. This service may also include training in child and infant care for parent(s) who themselves have a developmental disability. This service does not duplicate case management or waiver services such as Day Habilitation.</p> <p>Mentorship is limited to 192 units (48 hours) per year. Units to provide training to participants for child and infant care may be authorized beyond the 192 units per year.</p>
	<ul style="list-style-type: none"> Supported living consultation: Supported living consultation includes assistance with decision-making, planning daily activities, and direct assistance to access community resources and/or service providers. 		<i>n/a</i>	<p><i>(DDD notation: the service category of supported living consultation will no longer be available, however, some of the same services are available under mentorship.)</i></p>

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<p>Day Habilitation Services</p>	<p>Services use a combination of lifelong or extended duration training and supervision activities, that are individually planned and coordinated, and are designed to assist individuals in acquiring, retaining, and improving the self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings and avoid institutional placement. This service includes:</p>		<p>Day Habilitation Services</p>	<p>Day Habilitation includes assistance with acquisition, retention or improvement in self-help, socialization and adaptive skills that takes place in a non-residential setting, separate from the participant’s private residence or other residential living arrangement, except when due to medical and/or safety needs. Activities and environments are designed to foster the acquisition of skills, appropriate behavior, greater independence, and personal choice. These services are individually coordinated through the person’s Service Plan. Day Habilitation Services and Supports encompass two types of habilitative environments: Specialized Habilitation (SH) and Supported Community Connections (SCC).</p> <p>The number of units available, without special authorization from the DHS/DDD, for Day Habilitation in combination with Supported Employment is 7,112 units. This number of units is the equivalent of 1,778 hours of service per year or on average 7 hours a day for 254 service days.</p> <p><i>(DDD notation: the maximum units for SLS day habilitation was submitted to be the same as the HCBS-DD waiver, however, due to the standardized rates and Service Plan Authorization Limits for the SLS program, the maximum units for SLS is actually 6,427 or the equivalent of 1,607 hours of service per year or an average 6.3 hours a day for 254 service days.)</i></p>
	<ul style="list-style-type: none"> Specialized habilitation services focus on enabling the individual to attain his or her maximum functional level or to be supported in such a manner which allows the person to gain an increased level of self-sufficiency. These services are generally provided in non-integrated settings where a majority of the persons have a disability, such as program sites and supervised work settings. Such services include self-feeding, toileting, self-care, sensory stimulation and integration, self-sufficiency, maintenance skills, and supervision. Specialized habilitation services 		<p>Specialized Habilitation</p>	<p>Specialized habilitation (SH) services focus on enabling the participant to attain his or her maximum functional level, or to be supported in such a manner, which allows the person to gain an increased level of self-sufficiency. These services are generally provided in non-integrated settings where a majority of the persons have a disability, such as program sites and supervised work settings. Such services include assistance with self-feeding, toileting, self-care, sensory stimulation and integration, self-sufficiency, maintenance skills, and supervision. Specialized habilitation services may serve to reinforce skills or lessons taught in school, therapy, or other</p>

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	<p>may serve to reinforce skills or lessons taught in school, therapy, or other settings and, where appropriate, be coordinated with any physical, occupational, or speech therapies listed in the plan of care.</p>			<p>settings and, where appropriate, are coordinated with any physical, occupational, or speech therapies listed in the Service Plan.</p>
	<ul style="list-style-type: none"> Community Accessibility: Community accessibility services support the abilities and skills necessary to enable the individual to access the community and/or provide the basis for building skills which will assist the individual to access the community. These types of services include socialization, adaptive skills, personnel to accompany and support the individual in all types of community settings, supplies, and providing necessary resources for participation in activities and functions in the community. 		<p>Supported Community Connection</p>	<p>Supported Community Connection supports the abilities and skills necessary to enable the participant to access typical activities and functions of community life such as those chosen by the general population, including community education or training, retirement and volunteer activities. Supported Community Connection provides a wide variety of opportunities to facilitate and build relationships and natural supports in the community, while utilizing the community as a learning environment to provide services and supports as identified in a participant’s Service Plan. These activities are conducted in a variety of settings in which participants interact with non-disabled individuals (other than those individuals who are providing services to the participant). These types of services may include socialization, adaptive skills and personnel to accompany and support the participant in community settings, resources necessary for participation in activities and supplies related to skill acquisition, retention or improvement. Supported Community Connections may be provided in a group setting (or groups traveling together into the community) and/or may be provided on a one-to-one basis as a learning environment to provide instruction when identified in the Service Plan.</p>
<p>Employment Services (Supported Employment)</p>	<p>Supported Employment services and supports are paid employment in a variety of regular work settings, particularly work sites in which persons without disabilities are employed. Individuals for whom competitive employment at or above the minimum wage is unlikely and who because of their disabilities need considerable ongoing support to perform in a regular work</p>		<p>Supported Employment</p>	<p>Supported Employment services consists of intensive, ongoing supports that enable participants, for whom competitive employment at or above the minimum wage is unlikely absent the provision of supports, and who, because of their disabilities, need supports, to perform in a regular work setting. Supported employment may include assessment and identification of vocational</p>

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	<p>setting may receive supported employment services and supports.</p> <p>Supported employment services and supports encompass the following types of activities designed to assist eligible individuals to access and sustain employment in a regular work setting:</p> <ol style="list-style-type: none"> 1) individualized assessment which may include community orientation and job exploration; individualized job development and placement services that produce an appropriate job match for the individual and his/her employer; ongoing support, training, and facilitation in obtaining a job, job skill acquisition, job retention, career development, and work related activities; 2) intervention and training needed to benefit from supported employment services and other supports which would help to remove or diminish common barriers to participation in employment and the building of community relationships; and <p>The activities provided under the definition of Supported employment services and supports are not typically available as Section 110 services. Supported employment services and supports will provide supplemental and additional support to during the time an individual receives transition services. Supported employment services and supports will provide long-term support for post-Colorado Division of Vocational Rehabilitation Services.</p> <p>Documentation will be maintained in the file of each individual receiving Supported employment services and supports rendered under the waiver that these services and supports are not duplicative of services being received under a program funded by either section 110 of the Rehabilitation Act of 1973, or P.L. 102-119, Individuals with Disabilities Education Act (IDEA).</p>		<p>interests and capabilities in preparation for job development, assisting the participant to locate a job or job development on behalf of the participant. Supported employment is conducted in a variety of settings in which participants interact with non-disabled individuals (other than those individuals who are providing services to the participant) to the same extent that individuals employed in comparable positions would interact. Persons must be involved in work outside of a base site. Included are persons in community jobs, in enclaves, and on mobile crews. Group employment (e.g. mobile crews and enclaves) shall not exceed eight persons. Supported employment includes activities needed to sustain paid work by participants, including supervision and training. When supported employment services are provided at a work site where persons without disabilities are employed, payment is made only for the adaptations, supervision and training required by participants receiving waiver services as a result of their disabilities. This does not include payment for the supervisory activities rendered as a normal part of the business setting.</p> <p>Participants are required to apply for services through the Division for Vocational Rehabilitation. Supported employment does not take the place of nor is it duplicative of services received through the Division for Vocational Rehabilitation. Documentation is maintained in the file of each participant receiving this service that the service is not available under a program funded under section 110 of the Rehabilitation Act of 1973 or the Individuals with Disabilities Education Act (20 U.S.C. 1401 et seq.).</p> <p>Federal financial participation is not claimed for incentive payments, subsidies, or unrelated vocational training expenses such as incentive payments made to an employer to encourage or subsidize the employer's participation in a supported employment program; payments that are passed through to users of supported employment programs; or payments for</p>

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	<p>FFP will not be claimed for incentive payments, subsidies, or unrelated vocational training expenses such as the following:</p> <ul style="list-style-type: none"> a) Incentive payments made to an employer of beneficiaries to encourage or subsidize employer's participation in a supported employment program; b) Payments that are passed through to beneficiaries of supported employment programs; or <p>Payments for vocational training that is not directly related to a beneficiary's supported employment program.</p>		<p>training that are not directly related to an individual's supported employment program.</p> <p>The number of units available, without special authorization from the DHS/DDD, for Day Habilitation in combination with Supported Employment is 7,112 units. This number of units is the equivalent of 1,778 hours of service per year or on average 7 hours a day for 254 service days.</p> <p><i>(DDD notation: the maximum units for SLS Supported employment was submitted to be the same as the HCBS-DD waiver, however, due to the standardized rates and Service Plan Authorization Limits for the SLS program, the maximum units for SLS is actually 6,068 or the equivalent of 1,517 hours of service per year or an average 6 hours a day for 254 service days.)</i></p>
Pre-vocational	<p>Prevocational services are designed to assist individuals with developmental disabilities in acquiring and maintaining work habits and work-related skills. Prevocational services are intended to have a more generalized result as opposed to vocational training for a specific job. Individuals must have a demonstrated earning capacity of less than 50 percent of the federal minimum wage, as determined in accordance with certification standards promulgated by the U.S. Department of Labor. Prevocational services encompass the following types of work-related activities:</p> <ul style="list-style-type: none"> a) teaching an individual such concepts as following directions, attending to task, task completion, communication, decision-making, and problem-solving; b) training in the areas of safety, self-advocacy, and mobility; c) intervention and training needed to benefit from Prevocational services which would allow common barriers to participation to be 	n/a	<p><i>(DDD notation: the service category of pre-vocational will no longer be available due to extremely limited utilization, however, similar services can now be provided under Special Habilitation.)</i></p>

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	<p>avoided; and,</p> <p>d) travel training services may include providing, arranging, transporting, or accompanying a person with developmental disabilities to Prevocational services and supports identified in the plan of care.</p> <p>When compensated, individuals are typically paid at less than 50 percent of the minimum wage.</p> <p>Activities included in this service are not <u>primarily</u> directed at teaching specific job skills, but at underlying habilitative goals, such as attention span and motor skills. All prevocational services will be reflected in the individual's plan of care as directed to habilitative, rather than explicit employment objectives.</p> <p>Documentation will be maintained in the file of each individual receiving Prevocational services rendered under the waiver that these services are not duplicative of services being received under a program funded under section 110 of the Rehabilitation Act of 1973 or P.L. 102-119, Individuals with Disabilities Education Act (IDEA).</p> <p>Transportation may be provided between habilitation sites (in cases where the recipient receives habilitation services in more than one place) as a component part of habilitation services.</p>		
Transportation Services	<p>Service offered in order to enable waiver recipients to gain access to waiver and other community services and resources, required by the plan of care. This service is offered in addition to medical transportation required under 42 CFR 431.53 and transportation services offered under the State plan, defined at 42 CFR 440.170(a) (if applicable), and shall not replace them. Transportation services under the waiver shall be offered in accordance with the recipient's plan of care. Whenever possible, family, neighbors, friends, or community agencies which</p>	Non-Medical Transportation Services	<p>Service offered in order to enable waiver participants to gain access to waiver and other community services, activities and resources, as specified by the Service Plan. This service is offered in addition to medical transportation required under 42 CFR §431.53 and transportation services under the State plan, defined at 42 CFR §440.170(a) (if applicable), and does not replace them. Transportation services under the waiver are offered in accordance with the participant's Service Plan. Whenever possible, family, neighbors, friends, or community agencies, which can provide this service without charge, are</p>

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	<p>can provide this service without charge will be utilized. In no case will family members be reimbursed for the provision of transportation services under the waiver.</p>			<p>utilized. Transportation to and from day program shall be reimbursed based on the applicable transportation band. Transportation in addition to day program is limited to 10 trips per week reimbursed at transportation band one.</p>
<p>Environmental Engineering</p>	<p>Environmental engineering consists of devices and adaptations identified in the plan of care which are necessary to overcome environmental barriers which people with disabilities face in their daily lives, whether in their home or in their community. Such devices or adaptations minimize or eliminate the need for ongoing human assistance.</p> <p>Environmental engineering can be included under this waiver when such devices or adaptations are not available under the regular Medicaid State Plan or third party source.</p> <p>Environmental engineering is available to improve the individual's level of independent functioning in daily living by adapting or supplementing the person's environment through such means as:</p>			<p><i>(DDD notation: the broad category of environmental engineering is being discontinued and the services now must be billed individually as follows:)</i></p> <p><i>(DDD notation: all goods and services under Home Accessibility, Vehicle Modification and Assistive Technology must not be otherwise available to a waiver participant as a benefit under the Medicaid State Plan or Third Party source.)</i></p>
	<ul style="list-style-type: none"> Adaptations to living quarters including showers, toilets, control switches for the home, kitchen equipment for the preparation of special diets and accessibility such as ramps and railings; 		<p>Home Accessibility Adaptations</p>	<p>Those physical adaptations to the primary residence of the participant's family, required by the participant's Service Plan, that are necessary to ensure the health, welfare and safety of the participant or that enable the participant to function with greater independence in the home. All adaptations shall be the most cost effective means to meet the identified need. Such adaptations include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or the installation of specialized electric and plumbing systems that are necessary to accommodate the medical equipment and supplies that are necessary for the welfare of the participant. Excluded are those adaptations or improvements to the home that are of general utility (e.g., carpeting, roof repair, central air conditioning, etc.) and are not of direct medical or remedial</p>

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	<ul style="list-style-type: none"> Mobility devices to help people move around including wheelchairs (general use and customized) and vans adaptations; 	<p>Vehicle Modifications</p>	<p>benefit to the participant. Adaptations that add to the total square footage of the home are excluded from this benefit except when necessary to complete an adaptation (e.g., in order to improve entrance/egress to a residence or to configure a bathroom to accommodate a wheelchair). Prior authorization is required for any adaptation adding square footage to a home. All devices and adaptations shall be provided in accordance with applicable State or local building codes and/or applicable standards of manufacturing, design and installation. Medicaid State Plan or third party resources shall be utilized prior to accessing waiver funds.</p> <p>Adaptations or alterations to an automobile or van that is the participant’s primary means of transportation in order to accommodate the special needs of the participant. Vehicle adaptations are specified by the Service Plan as necessary to enable the participant to integrate more fully into the community and to ensure the health, welfare and safety of the participant. The following are specifically excluded:</p> <ol style="list-style-type: none"> Adaptations or improvements to the vehicle that are of general utility, and are not of direct medical or remedial benefit to the participant; Purchase or lease of a vehicle; and Regularly scheduled upkeep and maintenance of a vehicle except upkeep and maintenance of the modifications. <p><i>(DDD notation: the purchase of wheelchairs is no longer available as a waiver service, however, the purchase of wheelchairs is available as a benefit under the Medicaid State Plan.)</i></p>
	<ul style="list-style-type: none"> Expressive and receptive communication augmentation including electronic communication boards, Skill acquisition supports which make learning more purposeful and useful including computers, adaptations and software, or instructional aids. 	<p>Assistive Technology</p>	<p>Assistive technology device means an item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve functional capabilities of participants. Assistive technology service means a service that directly assists a participant in the selection, acquisition, or use of an assistive technology device. Assistive technology includes:</p>

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	<p>Assessing the need for, arranging for, providing and maintaining such devices and/or adaptations.</p>			<ol style="list-style-type: none"> 1) The evaluation of the assistive technology needs of a participant, including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the participant in the customary environment of the participant; 2) Services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices; 3) Training or technical assistance for the participant, or, where appropriate, the family members, guardians, advocates, or authorized representatives of the participant; and 4) Devices that help the participant to communicate such as electronic communication devices (excluding cell phones, pagers, and internet access unless prior authorized by the state); skill acquisition devices which are proven to be a cost effective and efficient means to meet the need and which make learning easier, such as adaptations to computers, or computer software related to the person's disability. <p>Assistive technology devices and services are only available when the cost is above and beyond that of typical expenses and are not available through the Medicaid State Plan or third party resource.</p>
	<ul style="list-style-type: none"> • Environmental engineering is limited to a maximum of \$10,000 per individual within the duration of this waiver except that on a case-by-case basis the State may prior authorize additional funds for any individual. 			<p>The total cost of home accessibility adaptations, vehicle modifications, and assistive technology may not exceed \$10,000 over the life of the waiver except that on a case by case basis the DHS/DDD may approve a higher amount, to ensure the health, welfare and safety of the participant or that enable the participant to function with greater independence in the home, or if it decreases the need for paid assistance in another waiver service on a long-term basis. Any request to add square footage to the home shall be prior authorized.</p>

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	<ul style="list-style-type: none"> Safety enhancing supports including security or emergency response systems, and specialized clothing (e.g. Velcro) if the cost is above and beyond that of normal personal needs expenses; 	<p>Personal Emergency Response System (PERS)</p>	<p>PERS is an electronic device that enables waiver participants to secure help in an emergency. The participant may also wear a portable "help" button to allow for mobility. The system is connected to the participant's phone and programmed to signal a response center once a "help" button is activated. The response center is staffed by trained professionals. The participant and their case manager develop a protocol for identifying who is to be contacted if/when the system is activated.</p> <p><i>(DDD notation: specialized clothing is now part of Specialized Medical Equipment and Supplies.)</i></p>
	<ul style="list-style-type: none"> Specialized medical equipment, non durable medical equipment and supplies; and, 	<p>Specialized Medical Equipment and Supplies</p>	<p>Specialized Medical Equipment and supplies include:</p> <ol style="list-style-type: none"> 1) Devices, controls, or appliances, specified in the Service Plan, that enable participant to increase their ability to perform activities of daily living. 2) Kitchen equipment required for the preparation of special diets if this results in a cost saving over prepared foods. General care items such as distilled water for saline solutions, supplies such as specialized eating utensils, etc., required by a participant with a developmental disability and related to the disability. 3) Specially designed clothing (e.g. Velcro) for participant if the cost is over and above the costs generally incurred for a participant's clothing. 4) Maintenance and upkeep of the equipment. <p>Items reimbursed with waiver funds are in addition to any medical equipment and supplies furnished under the State plan and exclude those items that are not of direct medical or remedial benefit to the participant.</p> <p>All items shall meet applicable standards of manufacture, design and installation.</p>

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	<ul style="list-style-type: none"> Excluded items and services include those adaptations or devices for the person’s environment which are not associated with a direct medical or remedial need of the individual such as carpeting, roof repair, central air conditioning, regular clothing, etc. All devices and adaptations shall be provided in accordance with applicable State or local building codes and/or applicable standards of manufacturing, design and installation. 			<p><i>(DDD notation: specific exclusions are now included within each individual service description.)</i></p>
<p>Professional Services</p>	<p>Professional services: The following types of Professional services can be included under this waiver <u>ONLY</u> when they are not available under the regular Medicaid State Plan or from a third party source:</p> <p>Professional services are those services, including evaluation and assessment, provided for a person with a developmental disability which address the physical and mental needs of the person and require the service provider to be licensed or certified in a particular occupational skill area, such as an occupational therapist, physical therapist, registered nurse, speech/language pathologist, psychologist etc.</p>			<p><i>(DDD notation: the broad category of professional services is being revised to include only the specific services listed below.)</i></p>
	<ul style="list-style-type: none"> Therapeutic services needed to sustain the overall functioning of an individual such as occupational or physical therapy, including diagnostic evaluations or consultations 		<p>Professional services</p>	<p>Professional services include Hippo-therapy, Movement Therapy and Massage. These services can be funded only when the provider is licensed, certified, registered and/or accredited by an appropriate national accreditation association in that profession and the intervention is related to an identified medical or behavioral need. The service must be an identified need in the Service Plan. In addition, the service must be an identified need by a licensed Medicaid State Plan therapist/physician and that therapist/physician has identified a goal for the treatment and shall monitor the progress of that goal at least quarterly. The identified “Professional Service” cannot be available under the regular Medicaid State Plan or from a third party source.</p>

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				<p>Hippotherapy: A therapeutic treatment strategy that uses the movement of the horse to assist in the development/ enhancement of skills: gross motor, sensory integration, attention, cognitive, social, behavioral and communication.</p> <p>Music Therapy: The use of music as a therapeutic tool for the habilitation, rehabilitation and maintenance of behavioral, developmental, physical, social, communication, pain management, cognition and gross motor skills.</p> <p>Massage: The physical manipulation of muscles to ease muscle contractures, spasms, extension, muscle relaxation and muscle tension including Watsu.</p>
	<ul style="list-style-type: none"> • Communication services to maintain or improve communication skills such as speech/language therapy, or interpreter services; • Behavioral services needed for the individual to acquire or maintain appropriate interactions with others including individual and/or group counseling, behavioral interventions, diagnostic evaluations or consultations. Intervention modalities must relate to an identified behavioral need of the person and specific criteria for remediation of the behavior must be established; 		<p>n/a</p> <p>Behavioral Services</p>	<p><i>(DDD notation: the service category of communication services will no longer be available as a waiver service, however, Speech Therapy is available as a benefit under the Medicaid State Plan.)</i></p> <p>Behavioral services identified in the Service Plan including individual and/or group counseling, behavioral interventions, diagnostic evaluations or consultations related to the individual’s developmental disability and are needed for the individual to acquire or maintain appropriate interactions with others. Intervention modalities shall relate to an identified challenging behavior need of the person and specific criteria for remediation of the behavior must be established. The provider(s) will be identified in the Service Plan and will be at the minimum qualification level necessary to achieve the specific criteria for remediation. If an individual has a covered mental health diagnosis and is in need of covered mental health services, then those services must be accessed through the Medicaid State Plan. It is possible for people with co-occurring diagnoses of Developmental Disabilities and Covered Mental Health conditions to have identified needs that the Developmental Disabilities system can provide and identified needs that the Mental Health system provides.</p>

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	<ul style="list-style-type: none"> Personal care functions requiring professional care by an RN, LPN, Physician's Assistant or other such licensed or certified medical personnel. This may also include operating medical equipment. 		n/a	<i>(DDD notation: the service category of personal care functions will no longer be available as a waiver service, however, personal care functions by an RN, LPN, Physician's Assistant or other such licensed or certified medical personnel are available as a benefit under the Medicaid State Plan.)</i>
Dental/Vision/Hearing	<ul style="list-style-type: none"> Dental services can be included under this waiver when they are not available under the regular Medicaid State Plan or third party source. Dental services are those services, including periodic examination and diagnosis, radiographs when 		Dental	These services are provided only when the services are not available through the Medicaid State Plan due to not meeting the need for medical necessity as defined in Health Care Policy and Financing rules at 8.011.11 or available through a third party resource. Dental services include periodic
	indicated, provided for a person with a developmental disability when dental problems are sufficient to lead to more generalized disease due to infection or improper care or nutrition.			examination and diagnosis; radiographs when indicated; detection of all manifestations of systemic disease; elimination of infection or life threatening oral conditions, disease of bone and soft tissue of the oral cavity, oral cancer, or cellulites; treatment of injuries; restoration of decayed or fractured teeth; retention or recovery of space between teeth when indicated; and payment for dental insurance. The cost of anesthesiology for dental procedures is not covered under the waiver. Dental services under the waiver are limited to the most cost effective and efficient means to alleviate or rectify the dental issues associated with the individual.
	<ul style="list-style-type: none"> Vision services to maintain or improve visual acuity; 		Vision	These services are provided only when the services are not available through the Medicaid State Plan due to not meeting the need for medical necessity as defined in Health Care Policy and Financing rules at 8.011.11 or available through a third party resource. Vision services are provided by a licensed Optometrist or physician and include eye exams and diagnosis, glasses, contacts, and other medically necessary methods used to improve specific dysfunctions of the vision systems. Lasik and other similar types of procedures are only prior approved and allowable when the procedure is necessary due to documented specific behavioral complexities (i.e. constant destruction of eye glasses) associated with the participant that make other more traditional remedies impractical.

Service	CURRENT Supported Living Services Definition through 6/30/09	Service	Proposed Service Definitions as of 7/1/09
	<ul style="list-style-type: none"> Hearing services to maintain or improve auditory acuity; 	n/a	<p><i>(DDD notation: the service category of hearing services will no longer be available as a waiver service, however, hearing aides can be covered under assistive technology and hearing services are available as a benefit under the Medicaid State Plan.)</i></p>
		<p>Consumer Directed Attendant Support Services</p>	<p>Services that assist an individual in accomplishing activities of daily living including personal care, homemaker activities, and protective oversight.</p> <p>Personal Care services are those routine and repetitive activities of daily living which require non-skilled assistance for health and normal bodily functioning and which would be carried out by an individual with a disability if he or she were physically/cognitively able. Personal Care includes accompanying the individual outside the home when associated with the delivery of a personal care task.</p> <p>Homemaker services are general household activities provided in the home of an eligible individual to maintain a healthy and safe home environment for a participant, when the person ordinarily responsible for these activities is absent or unable to manage these tasks.</p> <p>Protective oversight is supervision of the participant to prevent at risk behavior that may result in harm to the participant. These services are provided by an attendant under the supervision of the participant or the participant’s authorized representative. The participant, or the authorized representative, is responsible for hiring, training, recruiting, setting wages, scheduling, and in other ways managing the attendant.</p> <p>Consumer Directed Attendant Support Services offered in this waiver are limited based on the individual’s assessed need for services and prior authorization by case managers up to cost containment parameters.</p> <p>In addition, spouses, guardians and family members are limited to providing CDASS under the guidelines described in</p>

Service	CURRENT Supported Living Services Definition through 6/30/09		Service	Proposed Service Definitions as of 7/1/09
				<p>Appendix C-2, d and e. (see DDD notation below for more information)</p> <p>Payment may be made to family members who meet provider qualifications for each service under the waiver. For the purpose of this section family shall be defined as all persons related to the participant by virtue of blood, marriage, adoption, or common law and legal guardians as court appointed.</p> <p>The family member providing HCBS-SLS services shall meet requirements set forth by the qualified program approved service agency (PASA) through which the family member provides services.</p> <p>The family member providing Consumer Directed Attendant Support (CDASS) shall be employed by the Financial Management Services (FMS) agency and supervised by the participant and/or authorized representative in the provision of HCBS Supported Living Services. A family member who is an individual's authorized representative may not be reimbursed for providing HCBS Supported Living Services. The family member employed by the FMS may be reimbursed up to 40 hours of CDASS in a seven-day period. The family member must be at least 18 years of age, trained to perform appropriate tasks to meet the participant's needs, and demonstrate the ability to provide support to the participant as defined in the participant's Service Plan and Hiring Agreement.</p> <p>The participant and/or authorized representative must provide a planned work schedule to the FMS a minimum of two weeks in advance of beginning CDASS, and variations to the schedule must be noted and supplied to the FMS when billing. The FMS will review time sheets when submitted by the family member serving as an attendant. The FMS will not reimburse for any time in excess of 40 hours.</p> <p>Participants and/or authorized representatives, who choose to hire a family member as an attendant support provider in</p>

Service	CURRENT Supported Living Services Definition through 6/30/09	Service	Proposed Service Definitions as of 7/1/09
			<p>CDASS or utilize a family member through a PASA in HCBS-SLS must document their choice on the Services Plan. In addition to case management, monitoring, and reporting activities required for all waiver services, the following additional requirements apply when a family member is paid as an attendant support provider for participants receiving CDASS or a family member is paid through a PASA in HCBS-SLS:</p> <ul style="list-style-type: none"> a. At least quarterly reviews by the CCB case manager of expenditures, and health, safety and welfare status of the participant. b. Monthly reviews by the fiscal agent (CDASS) or PASA (HCBS- SLS) of hours billed for family member provided care. <p><i>(DDD notation: CDASS will not be available until rules have been drafted and approved. Appendix C-2:</i> <i>“d” states, “ The State does not make payment to legally responsible individuals for furnishing personal care or similar services.”; and</i> <i>“e” states, “The State makes payment to relatives/legal guardians under specific circumstances and only when the relative/guardian is qualified to furnish services.”)</i></p>