

Description of I/DD Services

(For adults and children who are eligible for Medicaid and I/DD services)

I/DD = Intellectual and Developmental Disabilities

Information is subject to change.

Certain limitations and restrictions apply as outlined in state policy and regulation.

Targeted Case Management

Case management assists the person and the person's support network to identify, select, obtain, coordinate, utilize, and monitor paid services and natural supports to enhance the person's independence, integration, productivity, and community inclusion consistent with the person's needs and lifestyle preferences as outlined in the Person Centered Support Plan (PCSP). Case management is required if receiving a paid service. There is no waiting list for case management. Title XIX Medicaid beneficiaries may receive case management services at no cost. Individuals who are not eligible for Medicaid may access case management on a private pay basis. Targeted case management is available to persons of any age who meet the criteria for I/DD services.

Day Supports

Day Supports are regularly occurring activities, for persons age 18 or older, which provide a sense of participation, accomplishment, personal reward, personal contribution, or remuneration, and thereby serve to maintain or increase adaptive capabilities, independence, integration and participation in the community. Day Supports also includes the provision of pre-vocational services which are aimed at preparing an individual for paid or unpaid employment, but are not job-task oriented. These services include teaching such concepts as compliance, attendance, task completion, problem-solving and safety. Such activities shall be appropriate for or lead to a lifestyle as specified in the person's Person Centered Support Plan (PCSP). Opportunities can include socialization, recreation, community inclusion, adult education and skill development in areas of employment, transportation, daily living, self sufficiency, and resource identification and acquisition. Persons eligible for services through the local education authority shall not have access for reimbursement unless they are at least 18 years of age, are graduating from high school before the age of 22 and a transition plan is developed by a transition team that includes the CDDO representative or the CDDO's designee.

Supported Employment

Supported Employment is competitive work in an integrated setting with on-going support services for individuals who have I/DD. Competitive work is work for which an individual is compensated in accordance with the Fair Labor Standards Act. An integrated work setting is a job site that is similar to that of the general work force. Such work is supported by any activity needed to sustain paid employment by persons with disabilities. The following supported employment activities are designed to assist individuals in acquiring and maintaining employment: individualized assessment; individualized job development and placement services that create an appropriate job match for the individual and the employer; on-the-job training in work and work-related skills required to perform the necessary functions of the job; ongoing monitoring of the individuals performance on the job; ongoing support services necessary to assure job retention as identified in the Person Centered Support Plan (PCSP); and, training in related skills essential to secure and retain employment.

Adult Residential Services

These supports are provided to persons 18 or older who live in a residential setting and do not live with their birth or adoptive parents. This service provides assistance, acquisition, retention and/or improvement in skills related to activities of daily living, such as, but not necessarily limited to, personal grooming and cleanliness, bed making and household chores, eating and preparing food, and acquiring social and adaptive skills necessary to enable the individual to reside in a non-institutional setting. Payments for Residential Supports are not made for room and board, the cost of facility maintenance, upkeep, and improvement, other than such costs for modifications or adaptations to the facility required to assure the health and safety of individuals or to meet the requirements of the applicable life safety code. Payment for Residential Supports does not include payments made directly to members of the individual's immediate family. Payments will not be made for routine care and supervision which would be expected to be provided by immediate family members or for which payment is made by a source other than Medicaid.

Residential Supports for Children (who are not in DCF Custody)

DCF = Department for Children and Families

Residential Supports are available to minor children, ages 5 through 21 (eligibility ends on the 22nd birthday) years of age who are determined eligible for the Medicaid program through a waiver of requirements relating to the deeming of parental income. Children's Residential Services shall be provided outside the family home in a home which is: (A) licensed by KDHE as a family foster home, meets all state or DCF requirements, or is another residential setting that is approved by DCF; and, (B) serves no more than two (2) children unrelated to the family foster care provider and in which no more than two individuals funded with State or Medicaid money reside; and, (C) is located in or near the child's home community and school so the child remains in contact with the natural family, if appropriate, and maintains established community connections such as but not limited to the child's school and teachers, friends and neighbors, community activities, church and health care professionals.

Wellness Monitoring

Wellness Monitoring is a process whereby a registered nurse evaluates the level of wellness of a consumer to determine if the consumer is properly using medical health services as recommended by a physician and if the health of the consumer is sufficient to maintain him/her in his/her place of residence without more frequent skilled nursing intervention. Wellness Monitoring includes checking and/or monitoring the following: orientation to surroundings; skin characteristics; edema; personal hygiene; blood pressure; respiration; pulse; and adjustments to medication. Available only to HCBS I/DD Waiver recipients. One visit by a registered nurse, per 60 days, is covered.

Medical Alert Rental

The purpose of this service is to provide support to a consumer who has a medical need that could become critical at any time. The medical alert device is a small instrument carried or worn by the consumer which, by the push of a button, automatically dials the telephone of a predetermined responder who will answer the call for help. The following are examples of medical needs that might require this service: quadriplegia; severe heart conditions; difficult to control diabetes; severe convulsive disorders; severe chronic obstructive pulmonary disease; head injury. Rental, not the purchase, of this equipment is covered.

Individual/Family Supports

Individual/Family Supports are an array of services consisting of Personal Care Services, Specialized Medical Care, Overnight Respite Care and Sleep Cycle Support. These are available to individuals age 5 or older who are determined eligible for Medicaid. Families may apply for any or all of the following:

- **Personal Care Services (PCS):** PCS is designed to assist elderly and disabled participants in their home and community settings that comply with the HCBS Settings Final Rule. PCS focuses on assistance with Activities of Daily Living (ADLs) such as bathing, grooming, toileting, transferring, and eating and Instrumental Activities of Daily Living (IADL) such as shopping, laundry, housekeeping, and meal preparation. PCS services are authorized, provided and reimbursed based on the assessed needs of the participant. The participant's needs are assessed by the selected Managed Care Organization (MCO) and identified on the Integrated Service (ISP). The ISP must document the participant's authorized service in hours/units and the participant's selected provider.

- An adult participant may receive PCS services in the participant's place of employment if the participant requires a need for assistance in the work environment. The participant's need for assistance in a work environment must be noted in the ISP. PCS services provided in a work environment cannot be duplicative of other waiver services such as supported employment or day supports.
- Participants authorized for PCS services have the option to agency-direct or self-direct their authorized services as provided for in the I/DD Waiver.
- Agency-directed and self-directing participants employing PCS workers shall comply with all applicable state and federal employment laws.
- If available, a participant, a parent, or legal guardian may elect to self-direct PCS. Self-directing participants employing PCS workers are subject to the same quality assurance standards as other PCS providers including, but not limited to completion of the tasks identified on the ISP.
- If a participant or legal guardian no longer wants to self-direct his or her PCS, the participant or legal guardian shall have the option to transition to agency-directed PCS without penalty. Conversely, if a participant or legal guardian no longer wants agency-directed PCS and has not been determined unable to self-direct his or her services, the participant or legal guardian shall have the option to transition to self-directed PCS, authorized in accordance with this policy.
- For minor participants under the age of 18, it is the parents' responsibility to complete the required parent fee documentation and, if a parent fee is determined to be required by the state, the parent(s) shall share the cost of services for the minor participant.

- **Specialized Medical Care:** This service provides long-term nursing support for medically fragile and technology-dependent individuals age 5 or older. The service may be provided in all customary and usual community locations including where the person resides and socializes. It is the responsibility of the provider agency to ensure that qualified nurses are employed and able to meet the specific medical needs of the person. The required level of care must provide medical support for an individual needing ongoing, daily care that would otherwise require the individual to be in the hospital. The intensive medical needs of the individual must be met to ensure the person can live outside of a hospital or ICF/IDD (Intermediate Care Facility for persons with Intellectual

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(**Specialized Medical Care cont.**) and Developmental Disability). For the purpose of the Kansas HCBS I/DD waiver, a provider of specialized medical care must be a registered nurse (RN), a licensed practical nurse (LPN) under the supervision of an RN, or another entity designated by the KS Department of Aging and Disability Services (KDADS), Department of Disability and Behavioral Health Services (DBHS).

- **Overnight Respite Care :** Overnight Respite Care is designed to provide relief for the individual's family member who serves as an unpaid primary care giver. Respite is necessary for families who provide constant care for individuals so family members are able to receive periods of relief for vacations, holidays and scheduled periods of time off. Respite care may not be provided by a consumer's spouse OR by a parent of a consumer who is a minor child under eighteen years of age. This service may be provided in the following location(s) and will allow for staff to sleep: (1) individual's family home or place of residence; (2) licensed foster home; (3) facility approved by KDHE or KDADS which is not a private residence; or (4) licensed respite care facility/home.
- **Enhanced Care Services:** ECS provides supervision and/or non-nursing physical assistance during a participant's normal sleeping hours in his/her place of residence. Enhanced Care Services (ECS) are available to a participant who demonstrates an assessed need for a minimum of 6 hours of sleep support within a 24-hour period and the assessed need cannot be met by the use of personal emergency response services (PERS), and informal support or other service. The ECS worker shall be available to provide immediate supervision or physical assistance with tasks such as, but not limited to, toileting, transferring, mobility, and medication reminders as needed. The ECS provider shall be prepared and capable of contacting a doctor, hospital, or medical professional in the event of an emergency.

Assistive Services

Assistive Services are available to individuals age 5 or older, and are supports or items that meet an individual's assessed need by improving and/or promoting the person's health, independence, productivity, or integration into the community, and are directly related to the individual's Person Centered Support Plan (PCSP) with measurable outcomes. Examples include, but are not limited to, wheelchair modifications, ramps, lifts, modifications to bathrooms and kitchens (specifically related to accessibility), and assistive technology (i.e. items that improve communication, mobility or assist with activities of daily living (ADLs) or instrumental activities of daily living (IADLs) in the home and work place). The assistive service(s) purchased must 1) increase the consumer's ability to live independently, or 2) increase or enhance the consumer's productivity, or 3) improve the consumer's health and welfare.

Please contact your area Community Developmental Disability Organization (CDDO), Big Lakes Developmental Center, Inc., at (785) 776-2600 for limitation and restriction information.