



Medicaid Waiver Services Summary Definitions

Table of Contents

1-2 Bed Adult Family Home	Page 2
3-4 Bed Adult Family Home	Page 3
Adaptive Aids	Page 4
Adult Day Care	Page 5
Community-Based Residential Facility	Page 6
Communication Aids Vendors/Interpreter Services	Page 7
Consumer Education and Training	Page 8
Counseling and Therapeutic Services	Page 9
Customized Goods and Services	Page 10
Daily Living Skills Training.....	Page 12
Day Services.....	Page 13
Home-Delivered Meals.....	Page 14
Home Modification	Page 15
Housing Counseling	Page 17
Live-In Caregiver	Page 18
Nursing Services.....	Page 20
Personal Emergency Response System.....	Page 21
Prevocational Services.....	Page 22
Relocation – Housing Start-Up and Related Utility Costs	Page 24
Residential Care Apartment Complex (RCAC)	Page 25
Respite	Page 26
Specialized Medical Equipment and Supplies.....	Page 28
Specialized Transportation	Page 29
Specialized Transportation 2	Page 29
Support Broker.....	Page 30
Supported Employment.....	Page 31
Supportive Home Care.....	Page 33
Vocational and Futures Planning.....	Page 34

1-2 Bed Adult Family Home

Adult family homes for 1-2 beds are residences in which the owner of the residence provides care and maintenance above the level of room and board, but not including nursing care to one or two residents. Adult family home services are identified for each individual participant by the participant and the adult family home operator. Services typically include supportive home care, personal care and supervision, which may not be provided separately. Services may also directly include transportation and recreational/social activities, which alternatively may be provided from separate providers, in which case the adult family home is responsible to provide access to and coordination with those services. Adult family home services also coordinate with other services received by the participant, including health care services, work or vocational services.

Additional funding for temporary residential care services is available when:

- Residential care is needed as part of the back-up plan when primary services/supports are not available
- Residential care is needed temporarily for recuperative purposes
- The person is living in residential care when coming onto the SDS waiver, but wants to move to his or her own apartment/home. Residential care could be approved for up to three months while the person develops necessary services and transitions to the community.

Waiver funds are not used to pay for the cost of room and board. Supportive Home Care is not available to recipients of residential services. This service may not duplicate any other service that is provided under another waiver service definition.

Service May Be Provided By:

Legally Responsible Person	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Relative	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Legal Guardian	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

3-4 Bed Adult Family Home

Adult family homes for 3-4 beds are small congregate care settings where 3-4 adults who are not related to the operator reside and receive care, treatment, support, supervision and training that is provided as needed for support in one or more aspects of living such as: health care, personal care, supervision, behavior and social supports, daily living skills training and transportation when transportation is part of providing the services.

Additional funding for temporary residential care services is available when:

- Residential care is needed as part of the back-up plan when primary services/supports are not available
- Residential care is needed temporarily for recuperative purposes
- The person is living in residential care when coming onto the SDS waiver, but wants to move to his or her own apartment/home. Residential care could be approved for up to three months while the person develops necessary services and transitions to the community.

Waiver funds are not used to pay for the cost of room and board. Supportive Home Care is not available to recipients of residential services. This service may not duplicate any other service that is provided under another waiver service definition.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Adaptive Aids

Adaptive aids are controls or appliances that enable persons to increase their abilities to perform activities of daily living or control the environment in which they live (including patient lifts, control switches, etc.). Adaptive aids are also services and material benefits that enable individuals to access, participate and function in their community. These include the purchase of vehicle modifications (such as van lifts, hand controls, equipment modifications etc. that allow the vehicle to be used by the participant to access the community), or those costs associated with the maintenance of these items.

Excludes DME that can be obtained through Wisconsin's approved MA State Plan.

The IRIS Consultant Agency reviews all participant service plans and the ICA approval of the plan serves as the prior authorization.

If purchases will exceed the participant's individual budget allocation, then DHS review is required for prior authorization.

Service May Be Provided By:

- Legally Responsible Person Yes No
- Relative Yes No
- Legal Guardian Yes No

Adult Day Care

Adult day care services are the provision of services for part of a day in a non-residential group setting to adults who need an enriched social or health-supportive experience or who need assistance with activities of daily living, supervision and/or protection. Services may include personal care and supervision, light meals, medical care, and transportation to and from the day care site. Transportation between the individual's place of residence and the adult day health center may be provided as a component part of adult day health services. The cost of this transportation is included in the rate paid to providers of adult day health services. Meals provided as part of adult day care may not constitute a "full nutritional regimen" (Three meals per day).

Adult Day Care is available up to eight hours per day.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Community-Based Residential Facilities (CBRF)

Community-based residential facilities (CBRF) are larger congregate care settings where five or more unrelated adults who are not related to the operator or administrator reside and receive care, treatment, support, supervision and training that is provided as needed for support in one or more aspects of living such as: health care, personal care, supervision, behavior and social supports, daily living skills training and transportation when transportation is part of providing the services and that may include several hours per week of nursing care per resident.

Additional funding for temporary residential care services is available when:

- Residential care is needed as part of the back-up plan when primary services/supports are not available
- Residential care is needed temporarily for recuperative purposes
- The person is living in residential care when coming onto the SDS waiver, but wants to move to his or her own apartment/home. Residential care could be approved for up to three months while the person develops necessary services and transitions to the community.

Waiver funds are not used to pay for the cost of room and board. Supportive Home Care is not available to recipients of residential services. This service may not duplicate any other service that is provided under another waiver service definition.

The CBRF size for persons who are in the developmentally disabled target group is limited to eight beds.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Communication Aids Vendors/Interpreter Services

Communication aids are devices or services needed to assist with hearing, speech or vision impairments in order to access and deliver services. These services assist the individual to effectively communicate with service providers, family, friends and the general public, decrease reliance on paid staff, increase personal safety, enhance independence, and improve social and emotional well-being. Communication aids include: communicators, speech amplifiers, aids and assistive devices, interpreters, and cognitive retraining aids, (including repair).

Excludes DME that can be obtained through Wisconsin's approved MA State Plan.

The IRIS Consultant Agency reviews all participant service plans and the ICA approval of the plan serves as the prior authorization.

If purchases will exceed the participant's individual budget allocation, then DHS review is required for prior authorization.

Service May Be Provided By:

- Legally Responsible Person Yes No
- Relative Yes No
- Legal Guardian Yes No

Consumer Education and Training

The provision of educational services to help the participant develop self-advocacy skills, exercise civil rights and acquire the skills necessary to exercise control and responsibility over their other supportive services. Covered services may include enrollment fees, books and other educational materials and transportation related to participation in training courses, conferences and other similar events that address the objectives of this service category.

Excludes payment for hotel and meal expenses while participants or their legal representatives attend allowable training/education events.

The IRIS Consultant Agency reviews all participant service plans and the ICA approval of the plan serves as the prior authorization.

If purchases will exceed the participant's individual budget allocation, then DHS review is required for prior authorization.

Service May Be Provided By:

Legally Responsible Person	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Relative	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Legal Guardian	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Counseling and Therapeutic Services

Counseling and therapeutic services includes the provision of professional treatment-oriented services to participant's identified needs for physical, medical, personal, social, behavioral, cognitive, developmental, emotional, or substance abuse treatment. The goal of treatment is to maintain or improve participant health, welfare, or functioning in the community. Counseling and therapeutic resources may include assistance in adjusting to aging and disability including understanding capabilities and limitations. Counseling and therapeutic resources may also include assistance with interpersonal relationships. Counseling and therapeutic resources may also include recreational therapy, music therapy, nutritional counseling, medical and legal counseling, and grief counseling. The therapy or treatment service may be provided in a natural setting or in a service provider's office. Includes therapies or treatments provided by state-licensed or certified medical professionals or practitioners of the healing arts, which are not available under the state plan.

Excludes inpatient services. Excludes services provided by a physician. Excludes services available through the Medicaid State Plan.

Service May Be Provided By:

Legally Responsible Person	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Relative	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Legal Guardian	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Customized Goods and Services

Customized Goods and Services refers to a service, support or good that addresses a participant's assessed long-term support need, enhances the participant's opportunities to achieve outcomes related to living arrangement, relationship, community inclusion, work and functional or medical status with respect to a long-term support need. Each service, support or good selected must address a long-term support need and must meet all of the following four criteria and at least one of the criteria as stated in the second list of criteria:

- The item or service is designed to meet an assessed long-term support need related specifically to the participant's functional, vocational, medical or social needs and also advances the desired outcomes in his/her Individual Service Plan
- The service, support or good is documented on the Individual Support and Service Plan
- The service, support or good is not prohibited by Federal and State statutes and regulations, or guidance including the State's Procurement Code
- The service, support or good is not available through another source and is not aversive or experimental in nature

Each service, support or good selected must meet at least one of the following criteria:

- The service, support or good will maintain or increase the participant's safety in the home or community environment
- The service, support or good will decrease or prevent increased dependence on other Medicaid-funded services to meet a long-term support need
- The service, support or good will maintain or increase the participant's functioning related to the disability
- The service, support or good will address a long-term support need and will maintain or increase the participant's access to or presence in the community

Some examples of items that have been provided under this service definition include:

- Somatron bed for a participant with autism to relieve stress and prevent behaviors
- Pool passes for a participant who has an outcome to lose weight and be more active while in the community
- Treadmill for a participant with TBI from auto accident in order to improve walking ability and coordination
- Cell phone for a participant who is blind uses a cell phone with voice recognition and a GPS so she can continue to be more independent, take the bus to downtown and feel secure so she will not get lost (the GPS is also audio)

Items, goods or services that are not for the primary benefit of the participant are prohibited.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Daily Living Skills Training

Daily Living Skills training services provide education and skill development or training to improve the participant's ability to independently perform routine daily activities and effectively utilize community resources. Services are instructional, focused on skill development, and are not intended to provide substitute task performance. Daily living skills training may include skill development in:

- Personal hygiene
- Food preparation
- Home upkeep/maintenance
- Money management
- Accessing and using community resources
- Community mobility
- Parenting

When a participant selects an agency for the provision of services, the agency must maintain this documentation and the IRIS Participant works with the agency to ensure that his or her individual needs are met. This is verified by the IRIS Consultant.

No more than eight hours of Daily Living Skills training may be provided per each day.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Day Services

Day services programs provide regularly scheduled, individualized skill development activities to participants. Services are typically provided in a non-residential setting. Day services include services primarily intended for adults with disabilities. Program goals may include developing/enhancing participant skills for social interaction, communication, or community integration. Day services must have a training component providing service above the level of basic supervision. Services are typically provided four or more hours per day, up to five days per week outside the home of the participant. Services may occur in a single physical environment or multiple environments or in the community at large.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Home-Delivered Meals

Home-delivered meal services include the provision of meals to participants who are at risk of institutionalization due to inadequate nutrition. Home-delivered meals provider costs may include the purchase and planning of food, supplies, equipment, and labor, as well as the transportation costs associated with the delivery of one or two meals per day to the participant's home. Participants provided with home-delivered meals may be unable to plan, prepare or obtain nutritional meals without assistance or may be unable to manage a special diet recommended by their physician. Generally, these meals are provided in the participant's home.

Home-delivered meals may not constitute a "full nutritional regimen" (three meals per day) and may not exceed one meal per each day to waiver participants who live in their own private residence. Excludes payment for meals at federally subsidized nutrition sites.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Home Modification

Home modifications are those services that are designed to assess the need for, arrange for, and provide modifications and/or improvements to a participant's residence that address a need identified to improve health, safety, accessibility, or provide for the maximization of independent functioning. Home modifications may include the materials and services needed to complete the installation of specific equipment, the modification of the physical structure, or the reconfiguration of essential systems within the home. Home modifications are generally permanent fixtures/changes to a physical structure.

Home modifications may include adaptations to the home such as:

- Ramps (fixed, non-portable)
- Porch/stair lifts
- Doors/doorways, door handles/door opening devices
- Adaptive door bells, locks/security items or devices
- Plumbing, electrical modifications
- Medically necessary heating, cooling or ventilation systems
- Shower, sink, tub and toilet modifications
- Faucets/water controls
- Accessible cabinetry, counter tops or work surfaces
- Grab bars, handrails
- Smoke/fire alarms and fire safety adaptations
- Adaptive lighting/light switches
- Flooring and/or floor covering to address health and safety
- Wall protection

Modifications not specifically described above may be approved if the item or service meets the definition and the standards for allowable home modifications. DHS or the IRIS Consultant Agency will determine if the modification is waiver allowable and notify the participant of the decision.

Home modifications must be necessary to increase self-reliance and independence, or to ensure safe, accessible means of ingress/egress to a participant's living quarters, or to otherwise provide safe access to rooms, facilities or equipment within the participant's living quarters, or adjacent buildings that are part of the residence. Modifications which increase the square footage or that enhance the general livability and value of a privately owned residence are excluded.

The IRIS Consultant Agency reviews all participant service plans and the ICA approval of the plan serves as the prior authorization. Home modifications require an independent evaluation to ensure that the most cost-effective modifications are requested and that the modification is consistent with health and safety needs of the participant.

Home modifications made prior to a person leaving an institutional setting cannot be paid for until the person leaves the institution and is enrolled in the IRIS Waiver with a

plan start date. If purchases will exceed the participant's individual budget allocation, then DHS review is required for prior authorization.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Housing Counseling

The provision of services to waiver participants to provide people with comprehensive guidance on housing opportunities that are available to meet their needs and preferences. Includes guidance on how a participant may gain access to available public and private resources available to assist the person to obtain or retain safe, decent, accessible, and affordable housing and avoid institutionalization. Housing Counseling includes planning, guidance and assistance in accessing resources related to:

- Home ownership, both pre-and post-purchase
- Home financing and refinancing
- Home maintenance, repair and improvements, including abating environmental hazards
- Rental counseling, not including any cash assistance
- Accessibility and architectural services and consultation
- Weatherization evaluation and assistance in accessing these services
- Lead-based paint abatement evaluation
- Low-income energy assistance evaluation.
- Access to transitional or permanent housing
- Accessibility inventory design
- Health and safety evaluations of physical property
- Debt/credit counseling
- Homelessness and eviction prevention counseling

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Live-In Caregiver

Live-In Caregiver is the payment for the additional costs of rent and food that can be reasonably attributed to an unrelated live-in personal caregiver who resides in the same household as the waiver participant. The intent of the service is to meet the needs of participants who require assistance with daily living activities in order to ensure adequate functioning in their home and permit safe access to the community.

Live-In Caregiver services include:

1. Personal Services

- a. Assistance with activities of daily living such as eating, bathing, grooming, personal hygiene, dressing, exercising, transferring, and ambulating
- b. Assistance in the use of adaptive equipment, mobility, and communication aids
- c. Accompaniment of a participant to community activities
- d. Assistance with medications that are ordinarily self-administered
- e. Attendant care
- f. Supervision and monitoring of participants in their homes, during transportation (if not done by the transportation provider), and in community settings
- g. Reporting of observed changes in the participant's condition and needs
- h. Extension of therapy services. "Extension of therapy services" means activities by the Live-In Caregiver that assist the participant with a PT/OT or other therapy/treatment plan. Examples of these activities include assistance with exercise routines, range of motion exercises, standing by during therapies for safety reasons, having the Live-In Caregiver read the therapist's directions, helping the participant remember and follow the steps of the exercise plan or hands on assistance with equipment/devices used in the therapy routine. It does not include the actual service the therapist provides.

2. Household Services

- a. Performance of household tasks and home maintenance activities, such as meal preparation, shopping, laundry, house cleaning, simple home repairs, snow shoveling, lawn mowing, and running errands
- b. Assistance with packing/unpacking and household cleaning/organizing when a participant moves

3. Room and board costs for Caregiver providers who "live in" are allowable under this service, except as excluded under limitations. Specifically, legally responsible persons, relatives, and guardians may not be live-in caregivers, and may not be paid room and board costs. In addition, a provider of Medicaid services who owns or leases the residence may not be paid room and board costs.

Excludes services available through the Medicaid State Plan. Excludes payment when a participant lives in a caregiver's home, or in a residence that is owned or leased by the provider of Medicaid services. Excludes training provided to a participant intended to

improve the participant's ability to independently perform routine daily living tasks, which may be provided as Daily Living Skills training. This service may not duplicate any service that is provided under another waiver service definition. This service excludes legally responsible persons, relatives or legal guardian from receiving "Live-In Caregiver" payments. It also excludes payment for "Live-In Caregiver" payments when the home is owned or leased by the provider of Medicaid services.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Nursing Services

Nursing services are those medically necessary, skilled nursing services that may only be provided safely and effectively by a nurse practitioner, a registered nurse, or a licensed practical nurse working under the supervision of a registered nurse. The nursing services provided must be within the scope of the Wisconsin Nurse Practice Act and are not otherwise available to the participant under the Medicaid state plan. Nursing services may include periodic assessment of the participant's medical condition when the condition requires a skilled nurse to identify and evaluate the need for medical intervention or to monitor and/or modify the medical treatment services provided by non-professional care providers. Services may also include regular, ongoing monitoring of a participant's fragile or complex medical condition as well as the monitoring of a participant with a history of noncompliance with medication or other medical treatment needs.

Excludes services available through the Medicaid State Plan. The IRIS Consultant Agency Clinical Services Unit provides for the review of the need for nursing services to assure that it exceeds the State Plan benefit. This serves as the prior authorization for this service. DHS reviews all authorizations on a quarterly basis.

Service May Be Provided By:

Legally Responsible Person	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Relative	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Legal Guardian	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

Personal Emergency Response System

A personal emergency response system is a service that provides immediate assistance in the event of a physical, emotional, or environmental emergency through a community-based electronic communications device. This service can provide a direct link to health professionals, enabling the user to secure an immediate response by the activation of an electronic communications unit in the participant's home. Allowable items under this service may also include a cellular telephone and cellular service used when a conventional PERS system is not feasible.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Prevocational Services

Prevocational services involve the provision of learning and work experiences where a participant can develop general, non-job-task-specific strengths and skills that contribute to employability in paid employment in integrated, community settings. Services are expected to occur over a defined period of time as determined by the participant and his/her IRIS Consultant in the ongoing participant-centered planning process. Services are expected to specifically involve strategies that enhance a participant's employability in integrated, community settings. Competitive employment or supported employment are considered successful outcomes of prevocational services.

Prevocational services should enable each participant to attain the highest possible wage and work which is in the most integrated setting and matched to the participant's interests, strengths, priorities, abilities, and capabilities. Services are intended to develop and teach general skills that lead to employment including but not limited to:

- Ability to communicate effectively with supervisors, co-workers and customers
- Generally accepted community workplace conduct and dress
- Ability to follow directions
- Ability to attend to tasks
- Workplace problem solving skills and strategies
- General workplace safety and mobility training

Support of employment outcomes is a part of the participant-centered planning process, which includes the individual, his or her guardian if any, and the IRIS Consultant and emphasizes informed consumer choice. This process includes identification of the participant's personal outcomes and identification of services and items, including prevocational services and other employment-related services that advance achievement of the participant's outcomes. The participant and his or her IRIS Consultant will identify alternatives that are effective in supporting his or her outcomes and from those select the most cost-effective alternative.

Participants who receive prevocational services during some days or parts of days may also receive supported employment, educational, or day services at other times.

Participants participating in prevocational service may be compensated in accordance with applicable Federal laws and regulations, but the provision of prevocational services is intended to lead to a permanent integrated employment situation.

Participation in prevocational services is not a required pre-requisite for supported employment services provided under the waiver. Prevocational services may be provided in a variety of community locations including but not limited to work centers operated by community rehabilitation programs (CRPs).

Prevocational services furnished under the waiver are not available under a program funded under section 110 of the Rehabilitation Act of 1973 or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). Prevocational services may be provided to supplement, but may not duplicate services

provided under supported employment or vocational futures planning and support services provided under the waiver.

Transportation may be provided between the participant's place of residence and the site of the prevocational services or between prevocational service sites (in cases where the participant receives prevocational services in more than one place) either as a component part of prevocational services or under specialized transportation, but not both. All providers of transportation shall ensure that the provider qualifications for specialized transportation are met. If the transportation is provided by the prevocational services provider, the cost of this transportation is included in the rate paid to the provider.

Personal care provided to a participant during the receipt of prevocational services may be included in the reimbursement paid to the prevocational services provider, or may be covered and reimbursed under the waiver service supportive home care or state plan personal care, but not both. All providers of supportive home care or personal care shall meet the appropriate provider qualifications.

Only activities that contribute to the participant's work experience, work skills, or work-related knowledge can be included in prevocational services.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Relocation – Housing Start-Up and Related Utility Costs

Relocation-related services include the payment of certain costs associated with relocating from an institution. Costs may include the initial fees to establish utility service or the purchase of essential items and services needed to establish a community living arrangement.

Relocation-related housing start-up services includes person-specific services, supports or goods that may be arranged, scheduled, contracted or purchased, and that will be put in place in preparation for the participant's relocation to a safe, accessible community living arrangement. There is no institutional length-of-stay requirement that must be met in order to access this service.

Excludes purchase of food, the payment of rent, or the purchase of leisure or recreational devices or services (e.g., television or video equipment, cable or satellite service, etc.) and excludes the use of waiver funds to purchase service agreements or extended warranties for appliances or any other home furnishings.

Housing start-up costs will require prior approval for purchases exceeding an identified budget amount or that exceed the participant's budget.

When this service is provided to an individual transitioning from an institution to a community-based setting, the service is not billed until the date the individual leaves the institution and enters the waiver.

Service May Be Provided By:

Legally Responsible Person	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Relative	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Legal Guardian	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Residential Care Apartment Complex

Residential care apartment complexes (RCAC) are services provided in a homelike, community-based setting where 5 or more adults reside in their own living units that are separate and distinct from each other. Persons who reside in the facility also receive the following services: supportive services (e.g., laundry, house cleaning), personal assistance (e.g., personal care), nursing services (e.g., wound care, medication management), and assistance in the event of an emergency (e.g., PERS and response).

Additional funding for temporary residential care services is available when:

- Residential care is needed as part of the back-up plan when primary services/supports are not available
- Residential care is needed temporarily for recuperative purposes
- The person is living in residential care when coming onto the SDS waiver, but wants to move to his or her own apartment/home. Residential care could be approved for up to three months while the person develops necessary services and transitions to the community.

Waiver funds are not used to pay for the cost of room and board. Supportive Home Care is not available to recipients of residential services. This service may not duplicate any other service that is provided under another waiver service definition.

RCAC Administrative code HFS 89 requires that an RCAC maintain a home-like environment defined as follows: all residential care apartment complexes must provide each tenant with an independent apartment in a setting that is home-like and residential in character; make available personal, supportive and nursing services that are appropriate to the needs, abilities and preferences of individual tenants; and operate in a manner that protects tenants' rights, respects tenant privacy, enhances tenant self-direction, self-reliance and supports tenant autonomy in decision-making including the right to accept risk.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Respite

Respite care services are those services provided to a waiver-eligible participant on a short-term basis, to relieve the participant's primary caregiver(s) from care demands. Respite care services may be provided in a residential setting, the home of the participant, or in another community setting such as the respite provider's home.

1. Residential Respite

Residential respite may be provided in the following allowable settings:

- a. Adult Family Home certified for one or two persons
- b. Adult Family Home licensed for three or four persons
- c. Community Based Residential Facility
- d. Residential Care Apartment Complex

Residential respite may involve overnight stays or partial day stays by the participant. Costs for room and board in these settings may be included in the charge to the waiver program. The actual length of the respite stay must be specified in the participant record.

2. Home-Based Respite

When respite care service is provided in the home of the participant, it is defined as Home-Based Respite. Home-Based Respite care services may be provided in partial day or overnight increments. Costs for room and board in these settings may not be included in the charge to the waiver program. The actual length of the respite stay must be specified in the participant record. The standards for respite provided within an individual's home are determined primarily by the participant and/or their legal decision-maker. However, the respite provider would still be subject to a background check, the same as other providers.

3. Other Setting Respite

Other Setting Respite services may be provided in a home other than the home of the participant. Services may involve overnight or partial day stays by the participant. The actual length of the respite stay must be specified in the participant record. The standards for respite provided within an individual's home are determined primarily by the participant and/or their legal decision-maker. However, the respite provider would still be subject to a background check, the same as other providers.

The receipt of respite precludes the participant from receiving other waiver services such as adult day care, nursing services, and supportive home care on the same day the participant receives respite care, unless there is clear documentation that the hours of service were delivered at distinct times from respite services.

Excludes 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 or a residential care complex.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Specialized Medical Equipment and Supplies

Specialized medical and therapeutic supplies are those items necessary to maintain the participant's health, manage a medical or physical condition, improve functioning, or enhance independence. Items or devices provided may be in excess of the quantity of medical equipment or supplies covered under the Medicaid state plan when coverage of the additional items or devices has been denied. Items or devices provided must be of direct medical or remedial benefit to the participant.

Allowable items, devices, or supplies may include incontinence supplies, wound dressings, IV or life support equipment, orthotics, nutritional supplements, vitamins, over-the-counter medications and skin conditioning lotions/lubricants. Additional allowable items may include books and other therapy aids that are designed to augment a professional therapy or treatment plan. Room air conditioners, air purifiers, humidifiers and water treatment systems may be allowable when recommended or prescribed by the participant's physician.

Will require prior approval for purchases exceeding an identified budget amount or that exceed the participant's budget.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Specialized Transportation

Specialized transportation is the provision of services to permit a waiver program participant access to the community to obtain services, use necessary community resources, and participate in community life. Specialized transportation services may include the pre-purchase or provision of such items as tickets, passes, vouchers or other fare medium or may include a direct payment to providers covering the cost of conveyance. Services may also include the development of a contracted, standing participant account between the participant and the transportation provider.

Specialized transportation services are intended to maintain or improve the participant's mobility in the community, increase independence and community participation and prevent institutionalization. Community should be broadly defined and should not be limited to the boundaries of any particular municipality.

Service May Be Provided By:

Legally Responsible Person	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Relative	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Legal Guardian	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

Specialized Transportation 2

Same as Specialized Transportation - added another service category for budget break out needs in Appendix J.

Service May Be Provided By:

Legally Responsible Person	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Relative	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Legal Guardian	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

Support Broker

A support broker is an individual who assists a participant in planning, securing, and directing self-directed supports. The services of a support broker are paid for from the participant’s self-directed supports budget authority. Service brokers are subject to criminal background checks and must be independent of any other waiver service provider. A support broker shall be knowledgeable of the local service delivery system and local community-integrated services and resources available to the participant. A support broker shall also be knowledgeable of the typical kinds of needs of persons in the participant’s target group. The participant and the Financial Services Agency are responsible to assure that a support broker selected by the participant has the appropriate knowledge.

Excludes the cost of the IRIS Consultant and the Financial Services Agency which are paid for and reported as administrative costs.

Service May Be Provided By:

Legally Responsible Person

Yes No

Relative

Yes No

Legal Guardian

Yes No

Supported Employment

Supported employment services is the provision of support to participants who, because of their disabilities, need intensive on-going support to obtain and maintain competitive or customized employment in an integrated work setting. Supported employment may also include support to maintain self-employment, including home-based self-employment. Supported employment services are individualized and may include any combination of the following services:

- Vocational/job-related discovery or assessment,
- Person-centered employment planning,
- Job placement,
- Job development,
- Negotiation with prospective employers,
- Job analysis,
- Training and systematic instruction,
- Job coaching,
- Benefits management,
- Transportation and career advancement services

Other workplace support services, including services not specifically related to job skill training, may also be provided based on the needs of the specific participant served.

Supported employment services may be provided by a co-worker or other job site personnel provided that the services that are furnished are not part of the normal duties of the co-worker or other personnel and these individuals meet the qualifications established below for individual providers of service. Employers may be reimbursed for supported employment services provided by co-workers.

The cost of transportation for a participant to get to and from a supported employment site may be included in the reimbursement paid to the supported employment provider, or may be covered and reimbursed under specialized transportation, but not both. All providers of transportation shall ensure that the provider qualifications for specialized transportation are met.

Personal care provided to a participant during the receipt of supported employment services may be included in the reimbursement paid to the supported employment provider, or may be covered and reimbursed under the waiver service personal care, but not both. All providers of personal care shall meet the personal care provider qualifications.

With regard to self-employment, supported employment services may include:

- a. Aiding the participant to identify potential business opportunities
- b. Assistance in the development of a business plan, including identifying potential sources of business financing and other assistance in developing and launching a business

- c. Identification of the supports that are necessary in order for the participant to operate the business
- d. Ongoing assistance, counseling and guidance once the business has been launched. This includes the development of a micro enterprise.

Waiver funds may not be used to defray expenses associated with starting up or operating a self-employment business. Supported employment does not include payment for supervision, training, support and adaptations typically available to other non-disabled workers filling similar positions in the business.

Service May Be Provided By:

Legally Responsible Person	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Relative	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Legal Guardian	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

Supportive Home Care

Supportive Home Care (SHC) is the provision of a range of services for participants who require assistance to meet their daily living needs, ensure adequate functioning in their home, and permit safe access to the community.

Supportive home care services include:

1. Personal Services

- a. Assistance with activities of daily living such as eating, bathing, grooming, personal hygiene, dressing, exercising, transferring, and ambulating
- b. Assistance in the use of adaptive equipment, mobility, and communication aids
- c. Accompaniment of a participant to community activities
- d. Assistance with medications that are ordinarily self-administered
- e. Attendant care
- f. Supervision and monitoring of participants in their homes, during transportation (if not done by the transportation provider), and in community settings
- g. Reporting of observed changes in the participant's condition and needs
- h. Extension of therapy services. "Extension of therapy services" means activities by the SHC worker that assist the participant with a Physical Therapy/Occupational Therapy or other therapy/treatment plan. Examples of these activities include assistance with exercise routines, range of motion exercises, standing by during therapies for safety reasons, having the SHC worker read the therapist's directions, helping the participant remember and follow the steps of the exercise plan, or hands on assistance with equipment/devices used in the therapy routine. It does not include the actual service the therapist provides.

2. Household Services

- a. Performance of household tasks and home maintenance activities, such as meal preparation, shopping, laundry, house cleaning, simple home repairs, snow shoveling, lawn mowing and running errands
- b. Assistance with packing/unpacking and household cleaning/organizing when a participant moves

Excludes services available through the Medicaid State Plan. Excludes training provided to a participant intended to improve the participant's ability to independently perform routine daily living tasks, which may be provided as daily living skills training. This service may not duplicate any service that is provided under another waiver service definition. This service excludes "Live-In Caregiver" services, as this is a separate service type.

Service May Be Provided By:

Legally Responsible Person	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Relative	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Legal Guardian	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

Vocational and Futures Planning

Vocational futures planning and support (VFPS) is a person-centered, team-based comprehensive employment planning and support service that provides assistance for waiver program participants to obtain, maintain, or advance in employment or self-employment. The agency providing VFPS services will ensure that the following service strategies are available as needed to the participant:

Development of an employment plan based on:

- An individualized determination of strengths, needs, and interests of the individual with a disability
- The barriers to work, including an assistive technology pre-screen or in-depth assessment
- Identification of the assets a member brings to employment
- Benefits analysis and support
- Resource team coordination
- Career exploration and employment goal validation
- Job-seeking support
- Job follow-up and long-term support

VFPS must be provided by qualified professionals that include, for example, an employment specialist, a benefits specialist and an assistive technology consultant. When this service is provided, the participant's record must contain activity reports, completed by the appropriate VFPS Team member(s), within thirty (30) days of completing a particular service strategy. When on-going support is provided, monthly on-going support reports must be completed by the provider of the on-going support.

VFPS furnished under the waiver excludes services available under a program funded under section 110 of the Rehabilitation Act of 1973 or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). VFPS excludes services that could be provided as prevocational or as supported employment. Such services may be used to supplement, but may not duplicate any VFPS services provided under the waiver.

Service May Be Provided By:

Legally Responsible Person	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Relative	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Legal Guardian	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No