

Program Coordinator and DDPM Guidance for New Payment System and Service Changes

September 14, 2017

Introduction

This document is to serve as instructions for DDPMs and Program Coordinators on the transition steps for individual's receiving services that pertain to the changes which will go into effect 4/1/18.

The information contained in this document may also be utilized as guidance to provide information on this transition to individuals and/or legal decision makers during contacts and team meetings. This will ensure that individuals and/or legal decision makers are adequately informed and have the opportunity to make any necessary informed decisions.

A waiver amendment was out for public comment July 12, 2017, through August 10, 2017, and submitted to the Centers for Medicare and Medicaid (CMS) on August 15, 2017. CMS is the federal agency responsible for the approval and oversight of home and community based services funded through Medicaid. The proposed changes include a new payment method using a state approved assessment to determine service hours for some services and a change in classification of residential, day, prevocational, and employment services.

The change affects individuals who are currently enrolled in ISLA, MSLA, TCLF, Congregate Care, SLA, FCOIII, ICF/IID, Day Support, and Extended Services.

**The following services will not be impacted by these changes: IHS, FCO, Parenting Support, Extended Home Health Care, Infant Development, Home Maker, Self-Directed, and AFC.*

Notification Letter

A letter will be mailed out on behalf of the Department to those individuals and/or legal decision makers who are currently receiving ISLA, MSLA, TCLF, Congregate Care, SLA, FCOIII, ICF/IID, Day Support, and Extended Services to notify and provide information to them on the changes taking place. A copy of the letter will be forwarded to providers and human service centers in order for them to be informed of when the letter was mailed and the contents of the letter.

Payment Method Changes History

In 2009, House Bill 1556 instructed the DD Division to study the current rate-setting process, which is retrospective, and bring forward recommendations on other types of rate-setting processes to change to. In 2011, Senate Bill 2043 instructed the Department, in conjunction with the DD providers, to develop a prospective or related payment system utilizing the SIS/ICAP assessment tool. In 2017, SB 2187 was introduced and would have instructed the DD Division to implement on 7/1/2017, or upon Federal approval. However, SB 2187 was defeated on the House side, and the chairman of the House Human Services Committee indicated that the intent of the Legislature is that DHS and the stakeholders

continue to move forward with implementation and that implementation should occur prior to the 2019 Legislative session.

Prior to this, there was no consistent statewide way to assess a person's support needs, which resulted in a variation of services, supports, and payments provided across the service delivery system. The use of a standard assessment approved by the Department provides a consistent method for determining hours by assessing a person's support needs. The hours for each person is determined based upon individual identified needs. A process is also in place to request additional hours above what is identified.

A SIS or ICAP assessment is required for anyone who wants to receive the following services:

- ICF/IID
- Waiver services of Residential Habilitation, Independent Habilitation, Day Habilitation, Prevocational Services, Small Group Employment, and Individual Employment

Service Classification Changes

The service classifications are a result of the new payment method and waiver amendment which align service definitions with CMS requirements. Additionally, the service classifications are to ensure that people receiving services and supports have full access to the benefits of community living and receive supports in the most integrated setting according to the March 2014 CMS home and community based requirements. The services are intended to benefit people served and result in improved employment outcomes.

- "Day Supports" will have a name change to "Day Habilitation."
- "Extended Services" has been removed and replaced with "Prevocational Services," "Small Group Employment Support," and "Individual Employment Support."
- "Transitional Care Living Facility (TCLF)," "Minimally Supervised Living Arrangement (MSLA)," "Congregate Care," "Individual Supported Living Arrangement (ISLA)," "Supported Living Arrangement (SLA)," and "Family Care Option III (FCO III)" will have a name change to "Residential Habilitation" or "Independent Habilitation."

Appeals

The name change from Day Supports to Day Habilitation and the removal of Extended Service with the replacement of Prevocational Service, Small Group Employment Support, and Individual Employment Support is a mass change and applies to anyone receiving the services.

The new payment method is a mass change and applies to anyone receiving the services.

These changes above are taking effect on April 1, 2018, and are considered a mass change action and are not appealable.

Team Meetings

Team meetings will begin to be scheduled after the statewide trainings are held in September 2017. Team meetings must be completed by November 30, 2017. The meetings will be a time to personally explain to the individual and/or legal decision maker the system changes that are occurring and how the transition will take place. This will provide the opportunity for the individual and/or legal decision maker to be educated and understand on an individualized level.

Program Coordinators and DDPMs will need to communicate and work with each other closely. One way to accomplish this is to have Program Coordinators and DDPMs schedule a time where they can get together to discuss all their shared clients to pre-plan and prioritize meetings based on individual situations.

The DD Division will be sending out a list to each Regional Developmental Disabilities Program Administrator (RDDPA) which will include all individuals who are currently ISP'd with any residential and/or day services impacted by the change in services and a list of those authorized services. The list will be sent out after the statewide trainings to ensure that the most up to date information is sent. The RDDPA will be responsible to distribute the client list to the DDPMs and Providers. This list is meant to be used for tracking purposes, listing the individuals who are enrolled in services who are part of the system wide implementation.

The Primary Program Coordinator will be responsible to arrange the team meeting with the OSP Team Members (must include individual, legal decision maker, DDPM, representative from each service provider, and any other necessary team members).

Per currently policy, team meetings may occur either in-person, conference call, or other methods. The DDPM and Program Coordinator may use their professional judgement to determine which method would be most appropriate. If meetings occur via conference call, documents and forms should be provided ahead of time.

Before or after team meetings, the DDPM could use the QER face to face visits and/or contacts with THE legal decision maker as an additional opportunity to personally explain the changes and new service options available and complete any additional follow-up.

The meeting agenda will comprise of the following items, in no particular order:

- **Review and determine the new service classification(s):**
 - Service names will change to the appropriate new service(s) based on the person's current activities.
 - For some people this will only be a name change and their service should continue similar to their current services.
 - For some people they may be completing activities in their current day program that are not allowable according CMS service definitions and some changes may need to be made either to their activities or service.

- Day Supports and Extended Services - The team will need to evaluate what the individual is currently doing in the day support program (e.g., volunteering, paid employment, activities, etc.) and what best matches their current environment. The team will be selecting among options to determine the appropriate enrollment and service combinations based on the waiver definitions.
 - Note: This will also be completed for people in ICF/IID.
- Residential Services - The team will evaluate the person's current living situation and how they are receiving services. The team will discuss if the person currently receives services on a daily or non-daily basis and select either Residential or Independent Habilitation.
- The team should consider what supports are necessary to allow the person to live and work as independently as possible.
- During annual plans over the next year, additional changes and any addition to services could be further pursued at that time.
- **Refer to the Appendix "How the previous services will be changed to the new services" and Appendix "Waiver Descriptions" for additional guidance.*
- **Discuss the new payment methodology and SIS or ICAP assessment results:**
 - Prior to the team meeting, the DDPM will complete the Assessment Hours Calculator, which is located in a folder in the P drive, using the individual's most current SIS or ICAP Assessment score. Instructions on how to complete are located within the Assessment Hours Calculator document.
 - The DDPM will bring a print out of the Assessment Hours Calculator for them to reference, if the individual may want to choose a different service.
 - After completion of the Assessment Hours Calculator, the DDPM will complete the Assessment Results Form which is located in the P drive.
 - The Program Coordinator will outline the person's weekly schedule by day to have available at the meeting.
 - The DDPM will share the most recent SIS or ICAP assessment score and assessment score hours at the team meeting using the Assessment Results Form.
 - The DDPM will bring the SIS or ICAP fact sheet, which are located in a folder in the P drive, to use as a discussion guide on the purpose of the assessment during the Assessment Results Form review. A copy of the fact sheet will be provided if the individual and/or legal decision maker would like one.
 - The DDPM and Program Coordinator will explain that the assessment score hours include direct and in-direct hours. Direct hours may include when the staff are providing prompting or physical assistance. In-direct hours may include when staff are still available in the environment but completing other tasks.
 - Teams will need to look at what the person's current daily schedule looks like. For the majority of people, they will continue to receive the same supports. This system change will not affect their service delivery.

- The DDPM and Program Coordinator will explain how other hours and supports are provided, will continue to be provided or if any other supports are necessary (e.g., natural supports, sharing supports, assistive technology, etc.).
 - **Refer to Appendix “Meeting the Client’s Overall Support Needs.”*
 - If the team determines an individual requires more support than what is identified in the SIS or ICAP and other options have been explored, the individual may qualify for an Outlier and the team may decide to complete an Outlier Request during the meeting.
 - The enhancement process and any approved hours will be discontinued on March 31, 2018.
 - *Any Outlier Requests must be submitted to the RDDPA by December 1, 2017.*
 - **Refer to the Outlier Policy for further instructions.*
 - If the individual resides in an ICF/IID and meets the criteria for the ICF/IID Medically Intensive Rate add-on and has a need for this, the team may decide to complete a request during the meeting.
 - Any ICF/IID Medically Intensive Rate requests must be submitted to the RDDPA by January 2, 2018.
 - **Refer to ICF/IID Medically Intensive Rate Policy for further instructions.*
 - If an Outlier or Medically Intensive request is not approved, the team should talk about what next steps would be.
- **Determine and discuss any needed updates to the OSP:**
 - If the person is currently satisfied with services and appropriate supports are being provided, no changes should be necessary to the PCSP. If there are areas that need attention or updating, these should be discussed during the meeting and documented per the OSP Instructions.
 - Program Coordinator will bring the OSP Signature sheet and obtain signatures, which will indicate they have met and discussed the items. The OSP Signature sheet will be completed if an in-person team meeting occurs. If a team meeting is held over the phone or through other methods, the OSP Signature sheet is not required.
 - The DDPM will obtain appropriate signatures on the completed Assessment Results Form.
 - The DDPM will inquire if the individuals and/or legal decision makers are satisfied with their current provider and wish to remain with their current provider per current OSP Instructions.

After the team meeting:

- The Program Coordinator will create an OSP Update type “OSP Revisions.” The reason for the update will be “Discussion of system wide service name changes and new payment methodology using the standardized assessment anticipated to begin on 4/1/18.” If an individual has an OSP meeting already scheduled or due during this time, then that plan type may be used (e.g., Annual OSP).
 - For people with Individual Employment Support **ONLY:**

- Annual no-PCSP update will be completed by DDPM
 - Attach the completed Assessment Results Form completed by the DDPM.
 - Attach completed meeting minutes outlining the same information that the OSP update includes
- After CMS waiver approval is obtained, the DD Division will notify providers so the Program Coordinator can develop the OSP on the provider side.
 - DDPM will create OSP update type and send to provider.
 - Program Coordinator will complete the OSP update.
 - Use the meeting minutes from the Annual no-PCPS update to complete the OSP update type according to the OSP instructions.
- No changes will be made to the ISP at this time. This will be completed by the DDPM at a future date per directions provided by the DD Division. Instructions will be provided at that time.
- If there are any updates made to goals, objectives, or other supports reflected in PCSP, this will be documented along with the statement “Anticipated start date of 4/1/18 or upon CMS approval” to indicate when these updates will be occurring, if they are not already being provided. The comment section can also be utilized to capture other important documentation and discussion.
- The DDPM will document in the comment section of the “DDPM final review and discussion” to reflect the change is service name(s), explanation of the assessment score and hours, summary of how supports will continue, any recommendations, outlier recommendation if applicable, and any other important changes. The DDPM will document the discussion that the individual and/or legal decision maker continues to be satisfied with services and wishes to remain with current provider.
- Program Coordinator will attach the OSP signature page.
- The DDPM will attach the completed and signed Assessment Result Form.
- Program Coordinator submits the OSP for the DDPM to approve per OSP Instructions.
- **Refer to the Appendix “OSP Information” for further instructions.*

Appendix: How the previous services will be changed to the new services

Please also refer to the appendix which provides the service definitions, service combination(s), and service limitations. These descriptions should be used during team meetings and contacts in determining the appropriate waiver service.

Previous Service Name	New Service Name
ICF/IID	<p>ICF/IID</p> <ul style="list-style-type: none"> • No service name change. • If an individual will need an ICF/IID Medically Intensive Rate, this will be discussed and applied for per the policy. • If an individual is residing in an ICF/IID and receiving Day Supports or Extended Services, the team will also need to determine the appropriate service categories of Day Habilitation, Prevocational Service, Small Group Employment Support, and/or Individual Employment Support. The funding source will be Title XIX ICF/IID.
MSLA (non-apartment based), TCLF, Congregate Care	<p>Residential Habilitation</p> <ul style="list-style-type: none"> • This is a service name change. • Individuals in these services should receive Residential Habilitation because they need daily support.
ISLA, MSLA (apartment based), FCOIII	<p>Residential Habilitation or Independent Habilitation</p> <ul style="list-style-type: none"> • This is a service name change. • Individuals who need daily support should receive Residential Habilitation. • Individuals who do not need daily support should receive Independent Habilitation.
SLA	<p>Independent Habilitation</p> <ul style="list-style-type: none"> • This is a service name change. • Individuals who do not need daily support should receive Independent Habilitation.
Day Supports	<p>Service name change to Day Habilitation or enrollment in new services of Prevocational Service, Small Group Employment Support , and/or Individual Employment Support</p> <ul style="list-style-type: none"> • The team will need to evaluate what the individual is currently doing in the day support program (e.g., volunteering, paid employment, types of activities, etc.) to determine what service(s) best matches their current environment. • Based on the type of activities and utilizing the new waiver definitions, the team will select among options to determine the appropriate enrollment and service combinations - Day Habilitation, Prevocational Service, Small Group Employment Support, and/or Individual Employment Support.

Extended Service	<p>Extended Services is replaced with Prevocational Services, Individual Employment Support, and/or Small Group Employment Support</p> <ul style="list-style-type: none">• Based on the type of activities and utilizing the new waiver definitions, the team will select among options to determine the appropriate enrollment and service combinations -Prevocational Services, Small Group Employment Support, and/or Individual Employment Support.
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Appendix –Waiver Descriptions

Note: The following waiver descriptions are to be utilized to determine enrollment into the waiver services. They are currently pending for approval with CMS and are subject to change.

Day Habilitation

Day Habilitation services are scheduled activities, formalized training, and staff supports typically provided in a non-residential setting to promote skill development for the acquisition, retention, or improvement in self-help, socialization, and adaptive skills. Activities should focus on improving a participant's sensorimotor, cognitive, communication, and social interaction skills. The goal of this service is to enable the participant to attain or maintain his or her maximum physical, intellectual, emotional, and social functional level. Day Habilitation services should facilitate and foster community participation as indicated in each participant's person-centered service plan.

Services are designed to maximize the functioning of persons with developmental disabilities and shall be coordinated with any needed therapies in the participant's person-centered service plan, such as physical, occupational, or speech therapy.

This service shall be provided in a non-residential setting, separate from the participant's private residence or other residential living arrangement. However, this service may be furnished in a residence, if the participant's needs are documented in the participant's person-centered service plan.

This service is to provide support for conditions specifically related to IID/DD.

Rates for Day Habilitation may include transportation costs to access program related activities in the community. Transportation does not include travel between the participant's home and the Day Habilitation site. Any transportation provided to a participant as a part of the rate is not billable as a discrete service and cannot duplicate transportation provided under any other service in this waiver.

This service will not be authorized, nor payment made, for participants who are eligible for services under the Individuals with Disabilities Education Act, unless enrolled in a school district pursuant to an interdepartmental plan of transition.

This service cannot duplicate any other service in this waiver.

This service shall not be furnished or billed at the same time of day as other services that provide direct care to the participant.

This service shall be available to those receiving Individual Employment Support, Small Group Employment Support, and Prevocational Services subject to limitations stipulated in the Division policy. Billing for such services may not be duplicated in a time period (e.g., billed for more than one service for 1:00p.m. to 5:00p.m. on April 1). Hours in Day Habilitation, Individual Employment Support, Small Group Employment Support, and Prevocational Services may not exceed 40 cumulative hours per week per participant.

Day Habilitation may not provide for the payment of services that are vocational in nature (i.e., for the primary purposes of producing goods or performing services).

The maximum utilization by a participant for Day Habilitation services shall not exceed eight (8) hours per day.

Prevocational Services

Prevocational Services are formalized training, experiences, and staff supports designed to prepare participants for paid employment in integrated community settings. Services are structured to develop general abilities and skills that support employability in a work setting. Services may include training in effective communication within a work setting, workplace conduct and attire, following directions, attending to tasks, problem solving, and workplace safety. Services are not directed at teaching job-specific skills, but at specific habilitative goals outlined in the participant's person-centered service plan.

Rates for Prevocational Services may include transportation costs to access program related activities in the community. Transportation does not include travel between the participant's home and the Prevocational Services program site. Any transportation provided to a participant as a part of the rate is not billable as a discrete service and cannot duplicate transportation provided under any other service in this waiver.

This service is to provide support for conditions specifically related to IID/DD.

A participant's need and desire for continued Prevocational Services shall be evaluated every twelve (12) months or more frequently if requested by the participant and/or legal decision maker.

Providers must, in consultation with each participant, develop employment goals/outcomes in their person-centered service plan that outlines a pathway for transitioning to integrated employment. The person-centered service plans must be updated annually and document each participant's progress toward completion of prevocational training.

The Department will review annually the active progress made during the prior year on increasing work skills, time on tasks, or other job preparedness objectives. The RDDPA may approve an additional 12 months, twice (for a total of 24 months), of prevocational training with the submission of employment outcomes that are consistent with the participant's goals/outcomes in their person-centered service plan. A participant who requests to remain in the service beyond the two additional approvals from the RDDPA (36 months) must receive approval from the DD Division.

Individuals participating in this service may be compensated in accordance with applicable federal laws and regulations.

Participation in this service is not a required prerequisite for Individual Employment or Small Group Employment Support services furnished under this waiver.

This service does not include training and services available to a participant through the Rehabilitation Act of 1973 or Individuals with Disabilities Education Act (IDEA).

This service cannot duplicate any other service in this waiver.

This service shall not be furnished or billed at the same time of day as other services that provide direct care to the participant.

This service shall be available to those receiving Day Habilitation, Individual Employment Support, and Small Group Employment Support are subject to limitations stipulated in DD Division policy. Billing for such services may not be duplicated in a time period (e.g., billed for more than one service for 1:00pm to 5:00 p.m. on April 1). Hours in Day Habilitation, Individual Employment Support, Small Group Employment, and Prevocational Services may not exceed 40 cumulative hours per week per participant.

Small Group Employment Support

Small Group Employment Support services provide long-term ongoing supports to assist participants in maintaining paid employment in an integrated setting. Services include on- or off-the-job employment-related support for small groups of participants needing intervention to assist them in obtaining and maintaining employment as a group, in accordance with their person-centered service plan. Supports are provided to groups of two (2) to eight (8) employed participants. Participants are paid by the employer for work performed in accordance with State and Federal laws.

Transportation costs from a participant's residence to their workplace may be included in the service rate when a participant needs it as a support intervention for the participant to maintain employment. It is not allowed as a substitute for personal, public, or generic transportation, is not billable as a discrete service, and cannot duplicate any transportation through the Medicaid State Plan. If transportation is to be included in the rate, the RDDPA must certify the number of participants for whom transportation is necessary as part of intervention to successfully support continued employment.

This service is to provide support for conditions specifically related to IID/DD.

Group size shall be limited to no fewer than two (2) and no more than eight (8) participants.

This service cannot duplicate any other service in this waiver.

This service may not be used to support a self-employed participant.

This service shall not be furnished or billed at the same time of day as other services that provide direct care to the participant.

This service shall be available to those receiving Day Habilitation, Small Group Employment support, Prevocational services, and Individual Employment Support services and are subject to limitations stipulated in Division policy. Billing for such services may not be duplicated in a time period (e.g., billed for more than one service for 1:00pm to 5:00p.m. on April 1). Hours in Day Habilitation, Individual

Employment Support, Prevocational services, and Small Group Employment Support services may not exceed 40 cumulative hours per week per participant.

This service does not include facility-based, or other similar types of vocational services furnished in specialized facilities that are not a part of the general workplace.

This service does not include payment for supervision, training, support, and adaptations typically available to other workers without disabilities filling similar positions in the business.

This service does not include training and services available to a participant through the Rehabilitation Act of 1973 or Individuals with Disabilities Education Act (IDEA).

Individual Employment Support

Individual Employment Support services are long-term ongoing supports to assist participants in maintaining paid employment in an integrated setting or self-employment. This service is designed for participants who need intensive ongoing support to perform in a work setting. Service includes on- or off-the-job employment-related support for participants needing intervention to assist them in obtaining or maintaining employment, in accordance with their person-centered service plan. Supports are provided on an individual basis. Participants are paid by the employer for work performed in accordance with State and Federal laws.

Transportation costs from a participant's residence to their workplace may be included in the service rate when a participant needs it as a support intervention for the participant to maintain employment. It is not allowed as a substitute for personal, public, or generic transportation, is not billable as a discrete service, and cannot duplicate any transportation through the Medicaid State Plan. If transportation is to be included in the rate, the RDDPA must certify the number of participants for whom transportation is necessary as part of intervention to successfully support continued employment.

This service is to provide support for conditions specifically related to IID/DD.

Direct intervention time for this service shall only be provided to one participant at a time.

This service cannot duplicate any other service in this waiver.

This service shall not be furnished or billed at the same time of day as other services that provide direct care to the participant.

This service shall be available to those receiving Day Habilitation, Prevocational Services, Individual Employment Supports, and Small Group Employment Support services and are subject to limitations stipulated in Division policy. Billing for such services may not be duplicated in a time period (e.g., billed for more than one service for 1:00pm to 5:00pm on April 1). Hours in Day Habilitation, Individual Employment Support, Prevocational Services, and Small Group Employment Support services may not exceed 40 cumulative hours per week per participant.

This service does not include facility-based, or other similar types of vocational services furnished in specialized facilities that are not a part of the general workplace.

This service does not include payment for supervision, training, support, and adaptations typically available to other workers without disabilities filling similar positions in the business.

This service does not include training and services available to a participant through the Rehabilitation Act of 1973 or the Individuals with Disabilities Education Act (IDEA).

Independent Habilitation

Independent Habilitation is formalized training and staff supports provided to participants on a regular, but not on a daily basis for fewer than 24-hours per day. This service is designed to assist with and develop self-help, socialization, and adaptive skills that improve the participant's ability to independently reside and participate in an integrated community. Independent Habilitation may be provided in community residential settings leased, owned, or controlled by the provider agency, or in a private residence owned or leased by a participant.

Eligible participants must not be living with a primary caregiver. Primary caregiver is a responsible person providing continuous care and supervision to an eligible individual that prevents institutionalization. The participant may be living with other individuals who may or may not be receiving waiver services.

This service is to provide support for conditions specifically related to IID/DD.

Multiple participants living in a single or a shared private residence are eligible for this service.

This service shall not be used solely for the purpose of supervision or emergency assistance on a 24-hour basis.

This service cannot duplicate any other service in this waiver.

The service may not be authorized for participants who are receiving In-Home Supports, Residential Habilitation, Adult Foster Care, Homemaker, Family Care Option, Parenting Support or Medicaid State Plan Personal Care services.

This service shall not be furnished or billed at the same time of day as other services that provide direct care to the participant.

Payment for Independent Habilitation does not include room and board, or the cost of facility maintenance and upkeep.

This service does not include payment for non-medical transportation costs.

Residential Habilitation

Residential Habilitation is formalized training and supports provided to participants who require some level of ongoing daily support. This service is designed to assist with and develop self-help, socialization, and adaptive skills that improve the participant's ability to independently reside and participate in an integrated community. Residential Habilitation may be provided in community residential settings leased, owned, or controlled by the provider agency, or in a private residence owned or leased by a participant.

Eligible participants must not be living with a primary caregiver. Primary caregiver is a responsible person providing continuous care and supervision to an eligible individual that prevents institutionalization. The participant may be living with other individuals who may or may not be receiving waiver services.

This service shall be used to assist with self-care and/or transfer a skill from the direct care staff to the participant.

This service is to provide support for conditions specifically related to IID/DD.

This service shall not be furnished or billed at the same time of day as other services that provide direct care to the participant.

This service shall not be used solely for the purpose of supervision or emergency assistance on a 24-hour basis.

This service cannot duplicate any other service in this waiver.

The service may not be authorized for participants who are receiving In-Home Supports, Independent Habilitation, Adult Foster Care, Homemaker, Parenting Support, Extended Home Health Care, Family Care Option, or Medicaid State Plan Personal Care services.

This service does not include payment for non-medical transportation costs.

Payment for Residential Habilitation does not include room and board, or the cost of facility maintenance and upkeep.

Appendix: Meeting the Client's Overall Support Needs

People will use a variety of supports to foster independence and assistance in achievement of goals. Person-centered planning will identify ALL the strategies and resources in the person's life that contribute to a life the person wants, with services (e.g., paid supports) being only one of the possibilities.

Supports include but are not limited to:

- Natural supports - family, friends, relationships, social roles, neighbor, church members, hobby groups, clubs, etc.
- Personal strengths, skills, and learning opportunities - goals/objectives, behavior support plans, cooking classes, sexuality training/sex education, use of public transportation, groups, anger management, household management, self-regulation, etc.
- Education
- Technology – Night Owl, emergency response, monitors, adaptive equipment's, medication dispensers, etc.
- Environmental modification
- Universal designs (pre-chopped foods, detergent pods)
- Community – public transportation, Senior Center, Meals on Wheels, Home Health, support groups, YMCA, mentor programs, probation officer, Public Health Units, etc.
- Paid supports

The team should discuss how the individual's support needs are being met in terms of type, frequency, and intensity considering the direct and/or indirect hours from the assessment score hours and in addition to what the person is currently receiving or other recommendations.

Team discussions may include the following review and considerations:

- The individual's favorite activities, times of meaningful activities, and importance of work.
- The individual's living and day programming situation (where and whom they live with, interact with).
- Activities that the individual is responsible for or able to complete.
- Times that the individual can be alone or time/activities not requiring support, if applicable.
- Hours of direct support that are needed/provided.
- Type of supports that are available/provided for activities.
- Frequency or how often support is needed (e.g., less than once a month, daily, once an hour, or more, etc.)
- Daily support time for activities (e.g., no support time, 30 minutes to less than 2 hours, etc.)
- The person's typical weekly schedule and who provides the supports (these could be listed in order of least to most amount of support). Teams may also consider building an alternate schedule to address holidays, vacation, events, school/work variations, planned caregiver absences, illness, etc. Develop actions or strategies related to support needs, designation of responsibilities, frequency, dates, review, and methods to review how things are going.
- Current and needed home modifications, mobility, medical needs, medications, treatments, mental health issues, nutrition, communication, behavior concerns, possible risk factors, etc.
- What are the barriers for the individual (e.g., health issues, transportation, behavioral, etc.)
- What is currently in place to support the individual and what is working or not working.

- Staff sharing/shared supports (pairing people with common interests to attend community events, shared transportation, sharing living expenses, etc.). Sharing supports may be used for people living together and those who do not live together but share common interests.

Appendix: OSP Information

The OSP will continue to be completed according to the OSP Instructions. The instructions will be updated to reflect the changes for the payment system methodology and new service categories. These fully revised OSP Instructions will be distributed at a later date.

Program Coordination Responsibilities

Program Coordination responsibilities are built into the rate for the services listed below, which now include Prevocational Services, Small Group Employment Support, and Individual Employment Support. The OSP will be completed by the DD Provider using the OSP module in Therap following the OSP Instructions.

- ICF/IID community group home
- Residential Habilitation (formally Congregate Care, MSLA, TCLF, ISLA, FCO III)
- Independent Habilitation (formally ISLA, FCO III, SLA)
- Day Habilitation
- **Prevocational Services**
- **Small Group Employment Support**
- **Individual Employment Support**

Note: People who will be having a service name change to Prevocational Service, Small Group Employment Support, and Individual Employment Support may already be currently receiving day supports or residential services and have the OSP module in Therap already completed. For those receiving Individual Employment Support ONLY, a transition from the Annual no PCSP to the OSP will be made.

How to complete the OSP for Prevocational Services, Small Group Employment Support, and Individual Employment Support:

All sections of the OSP will continue to be entered according to the OSP instructions along with the following specifications listed below.

Prevocational Services

- This is a new service and has program coordination built into the rate.
- Outcome/goals and objectives should be related to the need of the service to develop general abilities and skills to prepare towards employment. These do not include job specific skills, but may focus more on communication skills, workplace attire, following directions, attending to tasks, problem solving, workplace safety, etc. Data will support the need to continue Prevocational Services if the individual has made progress or not and if the services need to continue. Support objectives may be included which describe how staff will support the individual. These will transfer to the QER so the DDPM can monitor during the QER process.
- The RMAP Version: DHS-ND-2016.10 is to be utilized.

- IPOPS are not required if this is the only service. Residential Assessment section will be completed according to other applicable services.
- Vocational/Employment/Day Supports/VR section - provider is responsible to complete an assessment, provide a summary, summarize work, hours, etc.

Small Group Employment Support

- This is a new service and has program coordination built into the rate.
- Outcome/goals and objectives should be related to the need of the service. They may be related to obtaining, maintaining, or improving employment (hours, pay, job responsibilities, etc.) Support objectives may be included which describe how staff will support the individual. These outcomes/goals will transfer to the QER so the DDPM can monitor during the QER process.
- The RMAP Version: DHS-ND-2016.10 is to be utilized.
- IPOPS are not required for this service. Residential Assessment section will be completed according to other applicable services.
- Vocational/Employment/Day Supports/VR section - provider is responsible to complete an assessment, provide a summary, summarize work, hours, etc.

Individual Employment Support

- This is a new service and has program coordination built into the rate.
- Outcome/goals and objectives should be related to the need of the service. They may be related to obtaining, maintaining, or improving employment (hours, pay, job responsibilities, etc.) Support objectives may be included which describe how staff will support the individual. These outcomes/goals will transfer to the QER so the DDPM can monitor during the QER process.
- The RMAP #3 can continue to be utilized, however RMAP Version: DHS-ND-2016.10 may be used.
- IPOPS are not required for this service. Residential Assessment section will be completed according to other applicable services.
- Vocational/Employment/Day Supports/VR section-provider is responsible to complete an assessment, provide a summary, summarize work, hours, etc.