

6. Peer Mentorship
7. Residential Habilitation Services and Supports (RHSS)
8. Specialized Medical Equipment and Supplies
9. Supported Employment
10. Transition Setup
11. Vision Services

8.500.5.B DEFINITIONS OF SERVICES

The following services are available through the HCBS-DD Waiver within the specific limitations as set forth in the federally approved HCBS-DD Waiver.

1. Behavioral Services are services related to a Client's developmental disability which assist a Client to acquire or maintain appropriate interactions with others.
 - a. Behavioral services shall address specific challenging behaviors of the Client and identify specific criteria for remediation of the behaviors.
 - b. A Client with a co-occurring diagnosis of a developmental disability and mental health diagnosis covered in the Medicaid State Plan shall have identified needs met by each of the applicable systems without duplication but with coordination by the behavioral services professional to obtain the best outcome for the Client.
 - c. Services covered under Medicaid EPSDT or a covered mental health diagnosis in the Medicaid State Plan, covered by a third-party source or available from a natural support are excluded and shall not be reimbursed.
 - d. Behavioral Services include:
 - i) Behavioral Consultation Services include consultations and recommendations for behavioral interventions and development of behavioral support plans that are related to the Client's developmental disability and are necessary for the Client to acquire or maintain appropriate adaptive behaviors, interactions with others and behavioral self-management.
 - ii) Intervention modalities shall relate to an identified challenging behavioral need of the Client. Specific goals and procedures for the behavioral service shall be established.
 - iii) Behavioral consultation services are limited to eighty (80) units per service plan year. One unit is equal to fifteen (15) minutes of service.
 - iv) Behavioral plan assessment services include observations, interviews of direct care staff, functional behavioral analysis and assessment, evaluations and completion of a written assessment document.
 - v) Behavioral Plan Assessment Services are limited to forty (40) units and one (1) assessment per service plan year. One unit is equal to fifteen (15) minutes of service.

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- vi). Individual and Group Counseling Services include psychotherapeutic or psycho educational intervention that:
 - 1) Is related to the developmental disability in order for the Client to acquire or maintain appropriate adaptive behaviors, interactions with others and behavioral self-management, and
 - 2) Positively impacts the Client's behavior or functioning and may include cognitive behavior therapy, systematic desensitization, anger management, biofeedback and relaxation therapy.
 - 3) Counseling services are limited to two-hundred and eight (208) units per service plan year. One (1) unit is equal to fifteen (15) minutes of service. Services for the sole purpose of training basic life skills, such as activities of daily living, social skills and adaptive responding are excluded and not reimbursed under behavioral services.
 - vii) Behavioral Line Services include direct one-to-one implementation of the Behavioral Support Plan and is:
 - 1) Under the supervision and oversight of a behavioral consultant,
 - 2) To include acute, short term intervention at the time of enrollment from an institutional setting, or
 - 3) To address an identified challenging behavior of a Client at risk of institutional placement and to address an identified challenging behavior that places the Client's health and safety or the safety of others at risk.
 - 4) Behavioral Line Services are limited to nine hundred and sixty (960) units per service plan year. One (1) unit is equal to fifteen (15) minutes of service. Requests for Behavioral Line Services shall be prior authorized in accordance with the Operating Agency's procedures.
 - 2. Day Habilitation Services and Supports include assistance with the acquisition, retention or improvement of self-help, socialization and adaptive skills that take place in a non-residential setting, separate from the Client's private residence or other residential living arrangement, except when services are necessary in the residence due to medical or safety needs.
 - a. Day habilitation activities and environments shall foster the acquisition of skills, appropriate behavior, greater independence and personal choice.
 - b. Day Habilitation Services and Supports encompass three (3) types of habilitative environments: specialized habilitation services, supported community connections, and prevocational services.
 - c. Specialized Habilitation (SH) services are provided to enable the Client to attain the maximum functioning level or to be supported in such a manner that allows the Client to gain an increased level of self-sufficiency. Specialized habilitation services:

- i) Include the opportunity for Clients to select from Age Appropriate Activities and Materials, as defined in Section 8.484.2.A., both within and outside of the setting.
 - ii) Include assistance with self-feeding, toileting, self-care, sensory stimulation and integration, self-sufficiency and maintenance skills, and
 - iii) May reinforce skills or lessons taught in school, therapy or other settings and are coordinated with any physical, occupational or speech therapies listed in the service plan.
- d. Supported Community Connections Services are provided to support the abilities and skills necessary to enable the Client to access typical activities and functions of community life, such as those chosen by the general population, including community education or training, retirement and volunteer activities. Supported community connections services:
 - i) Provide a wide variety of opportunities to facilitate and build relationships and natural supports in the community while utilizing the community as a learning environment to provide services and supports as identified in a Client's service plan,
 - ii) Are conducted in a variety of settings in which the Client interacts with persons without disabilities other than those individuals who are providing services to the Client. These types of services may include socialization, adaptive skills and personnel to accompany and support the Client in community settings,
 - iii) Provide resources necessary for participation in activities and supplies related to skill acquisition, retention or improvement and are provided by the service agency as part of the established reimbursement rate, and
 - iv) May be provided in a group setting or may be provided to a single Client in a learning environment to provide instruction when identified in the service plan.
 - v) Activities provided exclusively for recreational purposes are not a benefit and shall not be reimbursed.
- e. Prevocational Services are provided to prepare a Client for paid community employment. Services consist of teaching concepts including attendance, task completion, problem solving and safety, and are associated with performing compensated work.
 - i) Prevocational Services are directed to habilitative rather than explicit employment objectives and are provided in a variety of locations separate from the participant's private residence or other residential living arrangement.
 - ii) Goals for Prevocational Services are to increase general employment skills and are not primarily directed at teaching job specific skills.

- iii) Clients shall be compensated for work in accordance with applicable federal laws and regulations and at less than fifty (50) percent of the minimum wage. Providers that pay less than minimum wage shall ensure compliance with the Department of Labor Regulations.
 - iv) Prevocational Services are provided to support the Client to obtain paid community employment within five (5) years. Prevocational services may continue longer than five (5) years when documentation in the annual service plan demonstrates this need based on an annual assessment.
 - v) A comprehensive assessment and review for each person receiving Prevocational Services shall occur at least once every five (5) years to determine whether or not the person has developed the skills necessary for paid community employment.
 - vi) Documentation shall be maintained in the file of each Client receiving this service that the service is not available under a program funded under Section 110 of the Rehabilitation Act of 1973 or the Individuals with Disabilities Education Act (IDEA) (20 U.S.C. Section 1400 et seq.).
 - f. The number of units available for day habilitation services in combination with prevocational services is four thousand eight hundred (4,800). When used in combination with supported employment services, the total number of units available for day habilitation services in combination with prevocational services will remain at four thousand eight hundred (4,800) units and
 - g. The cumulative total, including supported employment services, may not exceed seven thousand one hundred and twelve (7,112) units. One unit equals fifteen (15) minutes of service.
3. Dental services are available to individuals age twenty-one (21) and over and are for diagnostic and preventative care to abate tooth decay, restore dental health, are medically appropriate and include preventative, basic and major dental services.
- a. Preventative services include:
 - i) Dental insurance premiums and co-pays/co-insurance,
 - ii) Periodic examination and diagnosis,
 - iii) Radiographs when indicated,
 - iv). Non-intravenous sedation,
 - v) Basic and deep cleanings,
 - vi). Mouth guards,
 - vii) Topical fluoride treatment, and
 - viii) Retention or recovery of space between teeth when indicated.
 - b. Basic services include:
 - i) Fillings,

- ii) Root canals,
 - iii) Denture realigning or repairs,
 - iv) Repairs/re-cementing crowns and bridges,
 - v) Non-emergency extractions including simple, surgical, full and partial
 - vi) Treatment of injuries, or
 - vii) Restoration or recovery of decayed or fractured teeth
- c. Major services include:
- i) Implants when necessary to support a dental bridge for the replacement of multiple missing teeth or is necessary to increase the stability of dentures, crowns, bridges, and dentures. The cost of implants is only reimbursable with prior approval in accordance with Operating Agency procedures.
 - ii) Crowns
 - iii) Bridges
 - iv) Dentures. Implants are a benefit only when the procedure is necessary to support a dental bridge for the replacement of multiple missing teeth, or is necessary to increase the stability of dentures. The cost of implants is reimbursable only with prior approval.
- e. Implants shall not be a benefit for a Client who uses tobacco daily due to a substantiated increased rate of implant failures for tobacco users. Subsequent implants are not a benefit when prior implants fail.
- f. Dental services are provided only when the services are not available through the Medicaid state plan due to not meeting the need for medical necessity as defined in Health Care Policy and Financing rules at Section 8.076.1.8 or available through a third party. General limitations to dental services including frequency will follow the Operating Agency's guidelines using industry standards and are limited to the most cost effective and efficient means to alleviate or rectify the dental issue associated with the Client.
- g. Dental services do not include cosmetic dentistry, procedures predominated by specialized prosthodontic, maxillo-facial surgery, craniofacial surgery or orthodontia, which includes, but is not limited to:
- i) Elimination of fractures of the jaw or face,
 - ii) Elimination or treatment of major handicapping malocclusion, or
 - iii) Congenital disfiguring oral deformities.
- h. Cosmetic dentistry is defined as aesthetic treatment designed to improve the appearance of the teeth or smile, including teeth whitening, veneers, contouring and implants or crowns solely for the purpose of enhancing appearance.

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- i. Preventative and basic services are limited to \$2,000 per service plan year. Major services are limited to \$10,000 for the five (5) year renewal period of the waiver.
 - 4. Home Delivered Meals as defined at Section 8.553.1.
 - 5. Non-Medical Transportation enables Clients to gain access to Day Habilitation Services and Supports, Prevocational Services and Supported Employment services. A bus pass or other public conveyance may be used only when it is more cost effective than or equivalent to the applicable mileage band.
 - a. Whenever possible, family, neighbors, friends or community agencies that can provide this service without charge must be utilized and documented in the Service Plan.
 - b. Non-Medical Transportation to and from day program shall be reimbursed based on the applicable mileage band. Non-Medical Transportation services to and from day program are limited to five hundred and eight (508) units per service plan year. A unit is a per-trip accessed each way to and from day habilitation and supported employment services.
 - c. Non-Medical Transportation does not replace medical transportation required under 42 C.F.R. Section 431.53 or transportation services under the Medicaid State Plan, defined at 42 C.F.R. Section 440.170 (a).
 - 6. Peer Mentorship as defined at Section 8.553.1.
 - 7. Residential Habilitation Services and Supports (RHSS) are delivered to ensure the health and safety of the Client and to assist in the acquisition, retention or improvement in skills necessary to support the Client to live and participate successfully in the community.
 - a. Services may include a combination of lifelong, or extended duration supervision, training or support that is essential to daily community living, including assessment and evaluation, and includes training materials, transportation, fees and supplies.
 - b. The living environment encompasses two (2) types that include individual Residential Services and Supports (IRSS) and Group Residential Services and Supports (GRSS).
 - c. All RHSS environments shall provide sufficient staff to meet the needs of the Client as defined in the service plan.
 - d. The following RHSS activities assist Clients to reside as independently as possible in the community:
 - i) Self-advocacy training, which may include training to assist in expressing personal preferences, increasing self-representation, increasing self-protection from and reporting of abuse, neglect and exploitation, advocating for individual rights and making increasingly responsible choices,
 - ii) Independent living training, which may include personal care, household services, infant and childcare when the Client has a child, and communication skills,

- iii) Cognitive services, which may include training in money management and personal finances, planning and decision making,
 - iv) Implementation of recommended follow-up counseling, behavioral, or other therapeutic interventions. Implementation of physical, occupational or speech therapies delivered under the direction of a licensed or certified professional in that discipline.
 - v) Medical and health care services that are integral to meeting the daily needs of the Client and include such tasks as routine administration of medications or tending to the needs of Clients who are ill or require attention to their medical needs on an ongoing basis,
 - vi) Emergency assistance training including developing responses in case of emergencies and prevention planning and training in the use of equipment or technologies used to access emergency response systems,
 - vii) Community access services that explore community services available to all people, natural supports available to the Client and develop methods to access additional services, supports, or activities needed by the Client,
 - viii) Travel services, which may include providing, arranging, transporting or accompanying the Client to services and supports identified in the service plan, and
 - ix) Supervision services which ensure the health and safety of the Client or utilize technology for the same purpose.
 - e. All direct care staff not otherwise licensed to administer medications must complete a training class approved by the Colorado Department of Public Health and Environment and successfully complete a written test and a practical and competency test.
 - f. Reimbursement for RHSS does not include the cost of normal facility maintenance, upkeep and improvement, other than such costs for modifications or adaptations to a facility required to assure the health and safety of Clients or to meet the requirements of the applicable life safety code.
8. Specialized Medical Equipment and Supplies include:
- a. Devices, controls or appliances that enable the Client to increase the Client's ability to perform activities of daily living,
 - b. Devices, controls or appliances that enable the Client to perceive, control or communicate within the Client's environment,
 - c. Items necessary to address physical conditions along with ancillary supplies and equipment necessary to the proper functioning of such items,
 - d. Durable and non-durable medical equipment not available under the Medicaid State Plan that is necessary to address Client functional limitations, or

- e. Necessary medical supplies in excess of Medicaid State Plan limitations or not available under the Medicaid State Plan.
 - f. All items shall meet applicable standards of manufacture, design and installation.
 - g. Specialized medical equipment and supplies exclude those items that are not of direct medical or remedial benefit to the Client.
9. Supported Employment includes intensive, ongoing supports that enable a Client, for whom competitive employment at or above the minimum wage is unlikely absent the provision of supports, and who because of the Client's disabilities needs supports to perform in a regular work setting.
- a. Supported Employment may include assessment and identification of vocational interests and capabilities in preparation for job development and assisting the Client to locate a job or job development on behalf of the Client.
 - b. Supported Employment may be delivered in a variety of settings in which Clients have the opportunity to interact regularly with individuals without disabilities, other than those individuals who are providing services to the Client.
 - c. Supported Employment is work outside of a facility-based site, which is owned or operated by an agency whose primary focus is service provision to persons with developmental disabilities.
 - d. Supported Employment is provided in community jobs or mobile crews.
 - e. Group Employment including mobile crews shall not exceed eight (8) Clients.
 - f. Supported Employment includes activities needed to sustain paid work by Clients including supervision and training.
 - g. When Supported Employment services are provided at a work site where individuals without disabilities are employed, service is available only for the adaptations, supervision and training required by a Client as a result of the Client's disabilities.
 - h. Documentation of the Client's application for services through the Colorado Department of Labor and Employment Vocational Rehabilitation shall be maintained in the file of each Client receiving this service. Supported employment is not available under a program funded under Section 110 of the Rehabilitation Act of 1973 or the Individuals with Disabilities Education CCT (20 U.S.C. Section 1400 et seq.).
 - i. Supported Employment does not include reimbursement for the supervisory activities rendered as a normal part of the business setting.
 - j. Supported Employment shall not take the place of nor shall it duplicate services received through the Division of Vocational Rehabilitation.
 - k. The limitation for Supported Employment services is seven thousand one hundred and twelve (7,112) units per service plan year. One (1) unit equals fifteen (15) minutes of service.

- I. The following are not a benefit of Supported Employment and shall not be reimbursed:
 - i) Incentive payments, subsidies or unrelated vocational training expenses, such as incentive payments made to an employer to encourage or subsidize the employer's participation in a supported employment,
 - ii) Payments that are distributed to users of supported employment, and
 - iii) Payments for training that are not directly related to a Client's supported employment.
- 10. Transition Setup services as defined at Section 8.553.1.
- 11. Vision Services include eye exams or diagnosis, glasses, contacts or other medically necessary methods used to improve specific dysfunctions of the vision system when delivered by a licensed optometrist or physician for a Client who is at least twenty-one (21) years of age.
 - a. Lasik and other similar types of procedures are only allowable when:
 - i) The procedure is necessary due to the Client's documented specific behavioral complexities that result in other more traditional remedies being impractical or not cost effective.
 - ii) Prior authorized in accordance with Operating Agency procedures.

8.500.6 SERVICE PLAN

- 8.500.6.A The Case Management Agency shall complete a Service Plan for each Client enrolled in the HCBS-DD waiver in accordance with Section 8.519.11.B.2.
- 8.500.6.D The Service Plan must be reported in the Department prescribed system and include the following employment information for individuals eligible for or receiving Supported Employment services, if applicable:
 - 1. Sector and type of employment;
 - 2. Mean wage per hour earned; and
 - 3. Mean hours worked per week.

8.500.7 WAITING LIST PROTOCOL

- 8.500.7.A There shall be one waiting list for persons eligible for the HCBS-DD waiver when the total capacity for enrollment or the total appropriation by the general assembly has been met.
- 8.500.7.B The name of a person eligible for the HCBS-DD waiver program shall be placed on the waiting list by the community centered board making the eligibility determination.
- 8.500.7.C When an eligible person is placed on the waiting list for HCBS-DD waiver services, a written notice of action including information regarding Client rights and appeals shall be sent to the person or the person's legal guardian in accordance with the provisions of Section 8.057 *et seq.*