



Home and Community Based Services Waiver Support Level Review Process

The Support Level Review Process is to review situations where it is believed that a member does not have a Support Level that meets their current needs.

1. The Case Management Agency (CMA) shall provide a copy of this Support Level Review Process to the member, the member's guardian, authorized representative and family member, as appropriate, prior to the Supports Intensity Scale (SIS) assessment and the calculation of the member's Support Level.
2. The member, guardian, authorized representative and family member, as appropriate, may request a review of the member's Support Level when they believe the Algorithm Support Level does not meet the current needs of the member. The request may be made either verbally or in writing by contacting the case manager.
3. The CMA shall complete the request form and gather the information as required by the Department of Health Care Policy and Financing (HCPF). The CMA shall provide the member, guardian, authorized representative and family member, as appropriate, with the opportunity to review the information and to add any additional information that they believe is relevant.
4. HCPF will convene a Support Level Review Panel based on the pre-determined schedule available to the CMA. The Review Panel will be composed of at least three members with extensive knowledge and experience with the SIS assessment, Support Levels, case management, and Home and Community Based Services (HCBS) Waivers.
5. The Review Panel will examine all information submitted by the CMA and will seek to identify any significant support needs that cause the member to have substantially higher support needs than other members in the same Algorithm Support Level.
6. If the Review Panel finds that the member has substantially higher support needs than other members in the same Support Level, then the Review Panel may assign the member to the Support Level that more closely represents his or her overall support needs.
7. HCPF will communicate with the CMA any denial or approval decision made by the Review Panel. In this communication, the CMA will be notified of the effective dates of the approval if applicable. All manual Support Level changes needed will be completed by HCPF staff.
8. Changes to Support Levels are not permanent. HCPF does not approve "permanent" Support Level changes. If the approval effective date is expiring, and a member continues to need support above their Algorithm Support Level, the CMA must follow this process and submit another Support Level Review.
9. No Support Level approvals will be backdated. If the Support Level Review is a re-exam, the CMA must submit a new Support Level Review request before the expiration of the previous effective date. If the CMA does not submit a new Support Level prior to an effective date expiration, there will be no backdating to cover the gap in effective dates.
10. HCPF will provide the CMA, the member, guardian, authorized representative and family member, as appropriate, with a written decision within fifteen (15) business days. The decision of the Review Panel is final for all members enrolled in the Home and Community Based Services for members with Developmental Disabilities (HCBS-DD) waiver.



11. If the member is enrolled in the HCBS-Supported Living Services (SLS) waiver and the member, guardian, authorized representative or family member, as appropriate, is not satisfied with the decision, he or she may request a review by the Executive Director of the Department of Human Services, or his or her designee within fifteen (15) business days.
12. The Department will provide a written response to the complainant within fifteen (15) business days and this response shall be the final agency decision.

