

Changes and Transition Periods for DD Waiver Service Standards

Effective Date: November 1, 2021

Chapter	Overall Summary of Changes	Specific References for Transition	Transition Period
Introduction	<ul style="list-style-type: none"> • Clarification on future updates • Update to Advocate Statement 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
Chapter 1	<ul style="list-style-type: none"> • Updates to Definition of IDD • Clarification of application in “pend” status • Submitting the ARF (Allocation Reporting Form) through Therap Case Notes 	<p>1) Chapter 1.7.1 Initial Allocation #7: Updating the Allocation Reporting Form (ARF) in Therap no later than the 15th of each month until the individual is receiving services. This includes submitting approved documentation to the IEB within 5 business days of the agency receiving the approved documents. Failure to provide required documentation timely may result in a civil monetary penalty.</p>	<p>1) ARF transition to THERAP case notes to be determined. Until then use, current process for submitting ARF and supporting documents through SComm.</p>
Chapter 2	<ul style="list-style-type: none"> • No significant changes 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
Chapter 3	<ul style="list-style-type: none"> • Agency responsibility to communicate with guardians about sharing information needed for health • Decision Consultation/Team Justification Process forms combined • Updates to interventions requiring HRC review • Addition of HRC Super Committee • Update to Emergency Physical Restraint (EPR) 	<p>1) 3.3 Human Rights Committee #1: HRC membership must include: d. a member from the community at large that is not associated (past or present) with DD Waiver services.</p> <p>2) 3.1 Decisions about Health Care or Other Treatment: Decision Consultation and Team Justification Process.</p>	<p>1) HRC Membership must include a community member by 5/1/22.</p> <p>2) A new DC/JT form will be a part of the ISP development for all ISP’s beginning 2 months from date of issue. DC/JT form will need to replace current documents during</p>

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			the development of an individual's ISP or any new decision.
Chapter 4	<ul style="list-style-type: none"> Update to Person Centered Thinking 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions
Chapter 5	<ul style="list-style-type: none"> Agency responsibility to communicate with guardians about sharing information needed for health Updates to healthcare coordination Updates about benefits of promoting Healthy Relationships and Sexuality as well as IDT and CM's roles and responsibilities Update to CARMP Process 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions
Chapter 6	<ul style="list-style-type: none"> Added remote/video participation for IDT Meetings Updates to role of assessment Updates to preparation for ISP meetings and timeframes Added documentation for Employment First Added section: Planning for Technology Use 	<p>1) Chapter 6.5.1 Annual ISP Meetings #2: Meeting should not occur more than 90 calendar days before the ISP expiration, in order to include third quarter reporting and assessment updates.</p> <p>2) Chapter 6.6 DDSD ISP Template #6: The CM and IDT members must review the individual's technology and telehealth needs.</p>	<p>1) Starting with ISP beginning 6/1/22, ISP annual meeting cannot occur more than 90 calendar days before ISP Expiration.</p> <p>2) DDSD will issue an ISP Addendum for Technology/Telehealth to be part of ISP development for all ISPs beginning 4 months from date of issue.</p>

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Chapter 7	<ul style="list-style-type: none"> Children to follow same budget submission as adults 	1) Chapter 7.4 Budget Submission Process.	1) Child Budgets transition by ISP term for ISPs on or after 1/15/22.
Chapter 8	<ul style="list-style-type: none"> Agency responsibility to communicate with guardians about sharing information needed for health Updates to CM monitoring, qualification, agency office location, and caseload 	1) Chapter 8.3.1 CM Qualifications and Training Requirements: #6e: or have a minimum of 6 years of direct experience related to the delivery of social services to people with disabilities.	1) New case managers must meet requirements; existing case managers approved through Regional Office exception no longer need Regional Office approval.
Chapter 9	<ul style="list-style-type: none"> Added Out of Home placement Addition of notification to individual/guardian for Discharge From Services Addition of transition meeting for individuals being discharged 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions
Chapter 10	<ul style="list-style-type: none"> Updates to include importance of communication with guardian Updates to bundled Nursing and Nutritional supports Addition of section 10.3.2: Supporting Technology Addition of section 10.3.8.2.2 Subcontractor Application and Home Study Self-Assessment, Application and Home Study section to Family Living CIHS agency requirements to use state mandated EVV System 	<p>1) Chapter 10.3.9.2.1.1 Subcontractor Application and Home Study: An on-site Home Study is required to be conducted by the Family Living Provider agency initially, annually, and if there are any changes in the home location, household makeup, or other significant event.</p> <p>2) Chapter 10.2.3.1 Monitoring and Supervision #3: Monitor DSP use of the state approved EVV system to meet</p>	<p>1) Home Study Implementation-All new subcontractors or renewing subcontractors must complete all required elements of the Home Study beginning 12/1/21.</p> <p>2) HSD and DDSD will provide further guidance on phase II</p>

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	<ul style="list-style-type: none"> • CIHS Clarification of services 	<p>EVV requirements as detailed in Chapter 21.4 Error! Reference source not found.</p> <p>3) Chapter 10.5.2.1 #3c: A general schedule of hourly support, connection to ISP vision and desired outcomes, and justification that 24/7 residential models will not better serve the individual are required for Regional Office approval to submit a budget averaging more than 11 hours per day.</p>	<p>implementation of EVV and billing process.</p> <p>3) Regional Office approval for CIHS of more than 11 hours per day must be submitted for ISP start dates on or after 1/15/22.</p>
Chapter 11	<ul style="list-style-type: none"> • Updates to general scope and intent of services • Updates to Employment First to include IDT requirements • Removal of Individual Intensive Behavior Supports Customized Community Supports (CCS-IIBS) 	<p>1) Chapter 11: Individual Intensive Behavioral Supports Customized Community Supports (CCS-IIBS) has been removed.</p>	<p>1) Transition for CCS-IIBS: Prior approvals remain in effect until end of ISP term. No new requests allowable for any submissions made on or after 12/1/21.</p>
Chapter 12	<ul style="list-style-type: none"> • Updates to service requirements to include pandemic exceptions and telehealth • Exceptions to qualifications to provide guidance to interns 	<p>1) Chapter 12.4.7.12.6.5c: Annual retraining of ongoing (continued or maintenance) WDSIs should be completed within 30 calendar days following the ISP effective date.</p>	<p>1) 30-day requirement for annual WDSI training is effective for ISP start dates on or after 1/15/22.</p>

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	<ul style="list-style-type: none"> • Updates to Positive Behavioral Supports Plan requirement dates • Updates for prerequisite requirements for Risk Screeners • Updates to Therapy Service providers to include PTA and COTA • Updates to Delivery of therapy services/service settings • Updates to IDT participation requirements • Skilled Treatment/Individual Therapy updates include family or DSP support process • Updates to fading therapy • Clarification on therapy evaluation reports • Updates to Annual retraining of ongoing WDSIs 		
Chapter 13	<ul style="list-style-type: none"> • Changes to structure • Requirements for nurses despite setting • Alignment of certified medication aides (CMA) language with Board of Nursing requirements • Clarification on relationships with schools of nursing • Clarification of nursing visits and use of telehealth 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions

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	<ul style="list-style-type: none"> • Updates on Collaboration & Hierarchy responsibilities • New verbal order language • Updates to Monitoring/oversight • Updates to Change of Condition, On-Call and Planning • ANS structure and Agency requirements 		
Chapter 14	<ul style="list-style-type: none"> • Updates to Assistive Technology • Updates to Remote Personal Support Technology • Supplemental Dental remains • Update to Socialization and Sexuality Education • Requirements to use state mandated EVV System for respite • Ride Share allowed in Non-Medical Transportation • Updates to Driver Responsibilities 	<p>1) Chapter 14.8.3 Respite Agency Requirements #4: Respite Providers must use the state approved EVV system to meet EVV requirements as detailed Chapter 21.4. Services rendered that are not captured in the EVV system and do not have the approval / exception from the state cannot be paid.</p>	<p>1) Reporting on EVV. HSD and DDS will provide further guidance of phase II implementation of EVV.</p>
Chapter 15	<ul style="list-style-type: none"> • Updates to include application reviewed by DDS Committee and/or Subject Matter Experts • New and renewing Provider Agencies may incur a \$500 fee, if the DDS Committee and/or SME must ask for a 4th Request for Information (RFI-4) or more 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions

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Chapter 16	<ul style="list-style-type: none"> • Updates on who at DDS may provide Technical Assistance or impose administrative actions • Update to provider responsibilities during IQR 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
Chapter 17	<ul style="list-style-type: none"> • Updates to training requirements with timeframes and required trainings • Access to on-line training courses 	<p>1) Chapter 17: Training</p> <p>2) 17.2 Training Requirements for CM's and Case Management Supervisors #4: All case managers will be required to complete 14 hours of training annually.</p> <p>3) 17.4: Nutritionists: #3: Within 180 calendar days of hire complete ARM Training for RD's/LDs.</p>	<p>1) All Providers must be in compliance with the new DD Waiver Service Standards Trainings by 12/1/2021</p> <p>2) All CM's with a year of service by January 1, 2022, must be in full compliance with 14 hours of annual training by 12/31/22.</p> <p>3) Existing RD/LD's must complete ARM training by 11/1/22. RD/LDs hired after 11/1/21 will have 180 days to complete ARM Training.</p>
Chapter 18	<ul style="list-style-type: none"> • No significant changes 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
Chapter 19	<ul style="list-style-type: none"> • Update to events required to be reported in GER • Update to the Regional Office Request for Assistance (RORA) 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
Chapter 20	<ul style="list-style-type: none"> • Therap requirements updated to include electronic MAR • CARMP Draft in Therap added 	<p>1) Chapter 20.6 Medication Administration Record (MAR) #2:</p>	<p>1) Provider agencies must have current E-MAR in Therap by 11/1/22</p>

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Chapter 21	<ul style="list-style-type: none"> Addition of Electronic Visit verification requirements 	1) Chapter 21.4 Electronic Visit Verification requirements	1) HSD and DDSD will provide further guidance during Phase II implementation of EVV.
Chapter 22	<ul style="list-style-type: none"> Addition of use of EVV data Providers must use a DOH issued Annual Report Template 	<p>1) Chapter 22.1 EVV reports: EVV required KPI for providers of EVV services as determined by DDSD.</p> <p>2) Chapter 22.4 Preparation of an Annual Report: The Provider Agency must complete an annual report based on the quality assurance (QA) activities and the QI Plan that the agency has implemented during the year. DDSD will provide an updated annual report template to be utilized by provider agencies.</p>	<p>1) Use of EVV Data will follow implementation of Phase II for EVV.</p> <p>2) QA/QI Report Template to be used by next reporting deadline (2/15/22).</p>
Appendix A	<ul style="list-style-type: none"> Updates to Client File Matrix 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions
Appendix B	<ul style="list-style-type: none"> Updates to GER events, tips and definitions 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions
Appendix C	<ul style="list-style-type: none"> No significant changes 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions
List 1 Acronyms	<ul style="list-style-type: none"> EVV-Electronic Visit Verification RPST-Remote Personal Support Technology PPN-Primary Provider Nurse COTA-Certified OT Assistant 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions
List 2 Authorities	<ul style="list-style-type: none"> No significant changes 	<ul style="list-style-type: none"> No Transitions 	<ul style="list-style-type: none"> No Transitions

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List 3 State Agencies, Divisions and Bureaus	<ul style="list-style-type: none"> • Updates to roles and responsibilities for Intake and Eligibility and Division of Health Improvement 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
Table 1 Proposed Budget Levels	<ul style="list-style-type: none"> • No changes 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
Table 2 Suggested Dollar Amounts	<ul style="list-style-type: none"> • Dollar amounts adjusted to align with rate increases implemented in 10/1/2020 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions
DDSD Contact information	<ul style="list-style-type: none"> • No changes 	<ul style="list-style-type: none"> • No Transitions 	<ul style="list-style-type: none"> • No Transitions