

Attachment A

Service Authorization
Home and Community Based Services for Persons with Developmental Disabilities Waiver (HCBS-DD)

*"Threshold" means the maximum number of units of service that may be approved at the Case Manager level and the Case Management Supervisor level without requiring DDD approval

Service	Definition	Thresholds	Consideration and Questions	Exclusions
Behavioral Services	<p>Behavioral Consultation Services include consultations and recommendations for behavioral interventions and development of behavioral support plans that are related to the individual’s developmental disability and are necessary for the individual to acquire or maintain appropriate adaptive behaviors, interactions with others and behavioral self-management. Intervention modalities shall relate to an identified challenging behavioral need of the individual. Specific goals and procedures for the Behavioral Services must be established. Individuals with co-occurring diagnoses of developmental disabilities and covered mental health conditions 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 individual.</p> <p>Services for the sole purpose of training in basic life skills such as Activities of Daily Living, social skills and adaptive responding are excluded and shall not be reimbursed under Behavioral Services.</p> <p>Behavioral Consultation Services are limited to 80 units or 20 hours per Service Plan year.</p> <p>Provider Qualifications: Shall have a Master’s degree or higher in behavioral, social or health science or education and be nationally certified as a “Board Certified Behavior Analyst” (BCBA), or certified by a similar nationally recognized organization or licensed by the State Board of Examiners. Shall have at least 2 years of directly supervised experience developing and implementing behavioral support plans utilizing established approaches including Behavioral Analysis or Positive Behavioral Supports that are consistent with best practice and research on effectiveness for people with developmental disabilities; or, Shall have a Baccalaureate degree or higher in behavioral, social or health science or education and be 1) certified as a “Board Certified Associate Behavior Analyst” (BCABA) or 2) be enrolled in a BCABA or BCBA certification program or completed a</p>	<p>Consultation Services: 1-40</p> <p>Assessment: 1-40</p> <p>Counseling Services: 1-104</p> <p>Line: N/A</p>	<ul style="list-style-type: none"> • General Considerations • Is there a BISSP in place? • Is the appropriate Behavioral Service procedure utilized to meet the identified needs? • Is Behavioral Line Service being utilized for an indefinite/long term period of time? 	<ul style="list-style-type: none"> • Group counseling that appears to focus on general social skills and are available to anyone with a developmental disability regardless of the correlation with the challenging behavior. • Mental Health Services

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Behavioral Services Continued	<p>Positive Behavior Supports training program and 3) working under the supervision of a certified or licensed Behavioral Services professional.</p> <p>Behavioral Plan Assessment Services include observations, interviews of direct staff, functional behavioral analysis and assessment, evaluations and completion of a written assessment document. Behavioral Plan Assessment Services are limited to 40 units or 10 hours and one assessment per Service Plan year.</p> <p>Provider Qualifications: Shall have a Master's degree or higher in behavioral, social or health science or education and be nationally certified as a "Board Certified Behavior Analyst" (BCBA) or certified by a similar nationally recognized organization or licensed by the State Board of Examiners. Shall have at least 2 years of directly supervised experience developing and implementing behavioral support plans utilizing established approaches including Behavioral Analysis or Positive Behavioral Supports that are consistent with best practice and research on effectiveness for people with developmental disabilities; or, Shall have a Baccalaureate degree or higher in behavioral, social or health science or education and be 1) certified as a "Board Certified Associate Behavior Analyst" (BCABA) or 2) be enrolled in a BCABA or BCBA certification program or completed a Positive Behavior Supports training program and 3) working under the supervision of a certified or licensed Behavioral Services provider.</p> <p>Individual/Group Counseling Services include psychotherapeutic or psychoeducational intervention related to the developmental disability in order for the individual to acquire or maintain appropriate adaptive behaviors, interactions with others and behavioral self-management, and positively impact the individual's behavior or functioning. Counseling may be provided in a individual or group setting and may include cognitive behavior therapy, systematic desensitization, anger management, biofeedback, and relaxation therapy.</p>	Consultation Services Line: 41-80		
		Assessment: N/A		
		Counseling Services: 105-208		
		Line: N/A		

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Behavioral Services Continued	<p>Services for the sole purpose of training in basic life skills such as Activities of Daily Living, social skills and adaptive responding are excluded and shall not be reimbursed under Behavioral Services.</p> <p>Counseling Services are limited to 208 units or 52 hours per Service Plan year.</p> <p>Provider Qualifications: Shall hold the appropriate license or certification for the provider's discipline according to state law or federal regulations and represent one of the following professional categories: Licensed Clinical Social Worker, Certified Rehabilitation Counselor, Licensed Professional Counselor, Licensed Clinical Psychologist, or BCBA and must demonstrate or document a minimum of two years experience in providing counseling to individuals with developmental disabilities; or, Have a Baccalaureate degree or higher in behavioral, social or health science or education and work under the supervision of a licensed or certified professional as set forth above in the individual/group counseling provider qualifications.</p> <p>Behavior Line Services include direct 1:1 implementation of the behavioral support plan, under the supervision and oversight of a Behavioral Consultant for acute, short term intervention at the time of enrollment from an institutional setting or to address and identified challenging behavior of an individual at risk of institutional placement and that puts the individual's health and safety and/or the safety of others at risk. Behavioral Line Services are limited to 960 units or 240 hours per Service Plan year.</p> <p>Provider Qualifications: Must be at least 18 years of age, graduated from high school or earned a high school equivalence degree and have a minimum of 24 hours training, inclusive of practical experience in the implementation of positive behavioral supports or applied behavioral analysis that is consistent with best practice and research on effectiveness for people with developmental disabilities. Work under the direction of a Behavioral Consultant.</p>	Consultation Services: N/A Assessment: N/A Counseling Services: N/A Line: All	
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Service	Definition	Thresholds	Consideration and Questions	Exclusions
<p>Day Habilitation Services and Supports-Specialized Habilitation</p>	<p>Day Habilitation Services and Supports includes assistance with acquisition, retention or improvement in self-help, socialization and adaptive skills that takes place in a non-residential setting, separate from the participant’s private residence or other residential living arrangement, except when due to medical and/or safety needs. Activities and environments are designed to foster the acquisition of skills, appropriate behavior, greater independence, and personal choice. These services are individually coordinated through the person’s Service Plan.</p>	<p>Combined Day Hab: 1-4800</p>	<ul style="list-style-type: none"> • General Considerations • Day programs that operate on weekends. 	<ul style="list-style-type: none"> • 8-21 y/o during the school year. • 18-21 y/o during school breaks that qualifies for Extended School Year (ESY).
	<p>Specialized Habilitation (SH): services focus on enabling the participant to attain his or her maximum functional level, or to be supported in such a manner, which allows the person to gain an increased level of self-sufficiency. These services are generally provided in non-integrated settings where a majority of the persons have a disability, such as program sites. Such services include assistance with self-feeding, toileting, self-care, sensory stimulation and integration, self-sufficiency, maintenance skills, and supervision. Specialized Habilitation services may serve to reinforce skills or lessons taught in school, therapy, or other settings and, where appropriate, are coordinated with any physical, occupational, or speech therapies listed in the Service Plan.</p>	<p>N/A</p>		
		<p>N/A</p>		

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<p>Day Habilitation Services and Supports- Supported Community Connection</p>	<p>Day Habilitation Services and Supports includes assistance with acquisition, retention or improvement in self-help, socialization and adaptive skills that takes place in a non-residential setting, separate from the participant’s private residence or other residential living arrangement, except when due to medical and/or safety needs. Activities and environments are designed to foster the acquisition of skills, appropriate behavior, greater independence, and personal choice. These services are individually coordinated through the participant’s Service Plan.</p> <p>Supported Community Connection (SCC): supports the abilities and skills necessary to enable the participant 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 Connection provides 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 participant’s Service Plan. These activities are conducted in a variety of settings in which participants interact with non-disabled individuals (other than those individuals who are providing services to the participant). These types of services may include socialization, adaptive skills and personnel to accompany and support the participant in community settings, resources necessary for participation in activities and supplies related to skill acquisition, retention or improvement. Supported Community Connections may be provided in a group setting (or groups traveling together into the community) and/or may be provided on a one-to-one basis as a learning environment to provide instruction when identified in the Service Plan.</p>	<p>Combined Day Hab: 1-4800</p>	<ul style="list-style-type: none"> • General Considerations • Does the activity provide the opportunity to build relationships and natural supports in the community? • Does the participant have the opportunity to have meaningful interaction with community members other than paid staff? • Are the activities included within the Residential Habilitation Services and Supports (RHSS) services/rate? • Day programs that operate on weekends. • Activities that occur outside of the client’s community • Seasonal hot spots. 	<ul style="list-style-type: none"> • Service excluded in another service • Movies and activities exclusively for recreational purposes. • 18-21 y/o during school year. • 18-21 y/o that qualifies for Extended School Year (ESY), during school breaks.
		<p>N/A</p>		

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Service	Definition	Thresholds	Consideration and Questions	Exclusions
Dental Services	<p>Dental services are available to individuals age 21 and over. Covered dental services are for diagnostic and preventative care to abate tooth decay, restore dental health and are medically appropriate. Services include preventative, basic and major services. These dental services require prior authorization at the local Community Centered Board (CCB) level pursuant to the DDD Prior Authorization Request (PAR) process.</p> <p>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 10 CCR 2505-10 Section 8.011.11 or available through a third party resource. General limitations to dental services (e.g., frequency) will follow Department guidelines using industry standards and are limited to the most cost effective and efficient means to alleviate or rectify the dental issues associated with the individual.</p> <p>Implants are not a covered service for participants who smoke due to substantiated increased rate of implant failures for chronic tobacco users. Subsequent implants are not a covered service when prior implants fail. Full mouth implants and/or crowns are not covered. Services not covered under the waiver dental services include, but are not limited to cosmetic dentistry, orthodontia, emergency extractions, intravenous sedations, general anesthesia and hospital fees. Cosmetic dentistry is defined as aesthetic treatments designed to improve the appearance of the teeth and/or smile (e.g., whitening, contouring, and veneers).</p>	<p>Preventative and Basic: 1-750</p> <p>Major: 1-750</p>	<ul style="list-style-type: none"> • General Considerations • Does the participant have dental insurance? • By getting dental insurance would the cost to the waiver be reduced? • Have third party resources been explored (i.e. School of Dentistry, Dental Lifeline Network-aka Colorado Foundation of Dentistry for the Handicapped)? • Is the service requested the most cost effective? For example: <ul style="list-style-type: none"> ○ Crown/Fillings: Gold, silver or porcelain? • Should the participant get a second opinion? • For implants, does the Treatment Plan align with a Fee for Service model? • Have dentures been considered? Has an evaluation for dentures been completed? Why wouldn't the client use dentures? • Are the implant(s) necessary to 	<ul style="list-style-type: none"> • Cosmetic Procedures • Orthodontia • Emergency Services • General Anesthesia • Intravenous Sedation • Operating Room Charges • Hospital Fees • Biopsies • Implants shall not be a benefit for participants who smoke due to substantiated increased rate of implant failures for smokers. • Subsequent implants are not a benefit when prior implants fail. • Full mouth implants • Full mouth crowns • Services covered under EPSDT for 18-21 year olds.

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<p>Dental Services Continued</p>	<p>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 lifetime of the waiver.</p> <p>Available Dental Services:</p> <ul style="list-style-type: none"> • Preventative Services <ul style="list-style-type: none"> ○ Dental Insurance Premiums ○ Periodic Examination and Diagnosis ○ Radiographs (e.g. X-rays), when indicated ○ Non-Intravenous Sedation ○ Basic and Deep Cleanings ○ Mouth Guards ○ Topical Fluoride Treatment • Basic Services <ul style="list-style-type: none"> ○ Fillings ○ Root Canals ○ Denture realigning and/or repairs ○ Repairs/Re-cement Crowns and Bridges ○ Non-Emergency Extractions including simple, surgical, full and partial • Major Services <ul style="list-style-type: none"> ○ Implants only 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, Dentures 	<p>Preventative and Basic: 751-2,000</p> <p>Major: 751-10,000</p>	<p>support a-dental bridge?</p> <ul style="list-style-type: none"> • Are the implant(s) necessary to increase the stability(anchor)dentures • Major dental services cannot exceed \$10,000 for the life of the waiver, which began July 1, 2009. 	
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		Preventative and Basic: N/A Major: N/A		

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Service	Definition	Thresholds	Consideration and Questions	Exclusions
Non-Medical Transportation Services	Service offered in order to enable waiver participants to gain access to Day Habilitation and Supported Employment services as specified by the Service Plan that are not related to medical interventions as covered in the State Plan. Transportation to and from work is not a benefit in conjunction with Supported Employment service except when the Supported Employment service occurs at a frequency less than the number of days worked. In that case, transportation to and from the place of employment is a benefit when the participant does not have resources available, including personal funds and natural supports or third party resources. This service is offered in addition to medical transportation required under 42 CFR §431.53 and transportation services under the State plan, defined at 42 CFR §440.170(a) (if applicable), and does not replace them. Transportation services under the waiver are offered in accordance with the participant's Service Plan. Whenever possible, family, neighbors, friends, or community agencies that can provide this service without charge are utilized.	1-508	<ul style="list-style-type: none"> • General Considerations • Can participant afford his/her own transportation? • Are there natural supports that can provide transportation? • Is the participant receiving Day Habilitation, Prevocational or Supported Employment services? • Are the units requested commensurate with the number of days in Day Habilitation? • Is the request within the appropriate mileage band? • A dollar per unit to purchase a bus pass or other Public Conveyance may only be used when it is more cost effective than, or equivalent to the applicable mileage range. 	<ul style="list-style-type: none"> • Rate requested above mileage band. • Requests that exceed 508 units.
		N/A		
		N/A		

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Service	Definition	Thresholds	Consideration and Questions	Exclusions
<p>Prevocational Services Continued</p>	<p>Habilitation Services and Supports, Supported Employment or Prevocational Services). However, different types of day services may not be billed during the same period of the day. Documentation is maintained in the file of each individual 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) at 20 U.S.C. 1401 et seq.</p> <p>In the HCBS-DD waiver, the number of units available for Day Habilitation Services and Supports in combination with Prevocational Services is 4,800 units. This number of units is the equivalent of 1,200 hours of services per Service Plan year or on average 24 hours per week.</p>	<p>N/A</p>		

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Residential Habilitation Services and Supports	<p>Residential Habilitation Services and Supports (RHSS) are designed to ensure the health, safety and welfare of the participant, and to assist in the acquisition, retention and/or improvement of skills necessary to support the participant to live and participate successfully in their community. These services are individually planned and coordinated through the participant’s Service Plan. The frequency, duration and scope of these services are determined by the participant’s needs identified in the Service Plan. These services may include a combination of lifelong - or extended duration - supervision, training and support (support is any task performed for the participant, where learning is secondary or incidental to the task itself, or an adaptation is provided) which are essential to daily community living, including assessment and evaluation and the cost of training materials, transportation, fees and supplies. 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 participants or to meet the requirements of the applicable life safety code. Under Residential Habilitation Services and Supports the service agency is responsible for the living environment. There are two types of living environments:</p> <p>Individual Residential Services and Supports (IRSS) in which three (3) or fewer participants receiving services may live in a single residential setting or in a host home setting. The living environment does not require state licensure. However, the Division for Developmental Disabilities (DDD) must program approve the service agency to provide such services. Monitoring of IRSS services to individuals is the responsibility</p>	1-365	<ul style="list-style-type: none"> • General Consideration 	

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Residential Habilitation Services and Supports Continued	<p>of CCB Case Managers and the monitoring of IRSS provider agencies is the responsibility of the DDD.</p> <p>Group Residential Services and Supports (GRSS) encompass group living environments of four (4) to eight (8) participants receiving services who may live in a single residential setting which is licensed by the state as a Residential Care Facility/Residential Community Home. All IRSS and GRSS settings are required to have staff available to meet the needs of the participant as defined in the Service Plan. The following activities are performed by RHSS staff and assist participants to reside as independently as possible in the community. 1. Self-advocacy training may include training to assist in expressing personal preferences, self-representation, self-protection from and reporting of abuse, neglect and exploitation, individual rights and to make increasingly responsible choices. 2. Independent living training may include personal care, household services, infant and childcare (for parents who have a developmental disability), and communication skills such as using the telephone. 3. Cognitive services may include training involving money management and personal finances, planning and decision making. 4. Implementation of recommended follow-up counseling, behavioral or other therapeutic interventions by residential staff, under the direction of a professional. Services are aimed at increasing the overall effective functioning of the participant. 5. Medical and health care services that are integral to meeting the daily needs of participants (e.g., routine administration of medications or tending to the needs of participants who are ill or require attention to their medical needs on an ongoing basis). 6. Emergency assistance training includes developing responses in case</p>			

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December, 2011	<p>of emergencies; prevention planning and training in the use of equipment or technologies used to access emergency response systems. 7. Community access services that explore community services available to all people, natural supports available to the participant, and develop methods to access additional services/supports/activities needed by the participant. 8. Travel services may include providing, arranging, transporting, or accompanying the participant to services and supports identified in the Service Plan. 9. Supervision services which ensure the health and welfare of the participant and/or utilizing technology for the same purpose. All direct case staff not otherwise licensed to administer medications must complete a training class approved by the Colorado Department of Public Health and Environment, pass a written test and a practical/competency test.</p>	N/A		

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Specialized Medical Equipment and Supplies	1. Devices, controls, or appliances that enable participants to increase their ability to perform activities of daily living. 2. Devices, controls, or appliances that enable the participant to perceive, control or communicate with the environment in which they live. 3. Items necessary for life support or to address physical conditions along with ancillary supplies and equipment necessary to the proper functioning of such items. 4. Such other durable and non-durable medical equipment not available under the State Plan that is necessary to address participant functional limitations; and, 5. Necessary medical supplies in excess of State Plan limitation or not available under the State Plan. Specialized Medical Equipment and Supplies are in addition to any medical equipment and supplies furnished under the State Plan and exclude those items that are not of direct medical or remedial benefit to the participant. All items shall meet applicable standards of manufacture, design and installation	1-700	<ul style="list-style-type: none"> • General Considerations • Is the requested service more appropriately delivered through the RHSS definition and rate? 	<ul style="list-style-type: none"> • Is covered through the RHSS definition • State Plan Benefits <ul style="list-style-type: none"> • Orthopedic Shoes/Inserts • Chucks/Bed Pads • Gloves • Diapers • Grab Bars • Wheel Chair Adaptations <p style="text-align: center;"><i>Please Refer to current Provider Bulletin for a complete listing</i></p>
		701-1000		
		>1000		

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Supported Employment	<p>Supported Employment services consists of intensive, ongoing supports that enable participants, for whom competitive employment at or above the minimum wage is unlikely absent the provision of supports, and who, because of their disabilities, need supports, to perform in a regular work setting. Supported Employment may include assessment and identification of vocational interests and capabilities in preparation for job development, assisting the participant to locate a job or job development on behalf of the participant. Supported Employment is conducted in a variety of settings in which participants interact with non-disabled individuals (other than those individuals who are providing services to the participant) to the same extent that individuals employed in comparable positions would interact. Persons must be involved in work outside of a base site. Included are persons in community jobs, in enclaves, and on mobile crews. Group Employment (e.g. mobile crews and enclaves) shall not exceed eight persons. Supported Employment includes activities needed to sustain paid work by participants, including supervision and training. When Supported Employment services are provided at a work site where persons without disabilities are employed, payment is made only for the adaptations, supervision and training required by participants receiving waiver services as a result of their disabilities. This does not include payment for the supervisory activities rendered as a normal part of the business setting.</p> <p>Participants are required to apply for services through the Division of Vocational Rehabilitation (DVR). Supported Employment does not take the place of nor is it</p>	<p>1-4992</p> <p>Includes up to 4800 units for DHSS and Prevocational Services</p>	<ul style="list-style-type: none"> • General Considerations • Has the client been referred to the DVR? • Supported Employment is conducted in a variety of settings in which participants interact with non-disabled individuals. • If there isn't interaction with the community, would that be consistent with the nature of the job? • If DVR denies the service, the team must demonstrate why Supported Employment is the appropriate service for the participant. • Job Development through the waiver is available when a participant is on the waitlist for Vocational Rehabilitation Services. • When an agency agrees to provide job development within the specified amount, reimbursement is available 	<ul style="list-style-type: none"> • If DVR has determined that an individual is not employable. • Placement onto an enclave/mobile crew without going through DVR • Placement in a community job without going through DVR • Supported Employment combined with Supported Community Connections, Specialized Habilitation and Prevocational Services cannot exceed 7,112 units.

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Supported Employment Continued	<p>duplicative of services received through the Division of Vocational Rehabilitation. Documentation is maintained in the file of each participant 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 (20 U.S.C. 1401 et seq.).</p> <p>Federal financial participation is not claimed for 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 program; payments that are passed through to users of Supported Employment programs; or payments for training that are not directly related to an individual's Supported Employment program.</p>	<p>4993-7112</p> <p>Includes up to 4800 units for DHSS and Prevocational Services</p>	<p>only once until the job is found regardless of length of time.</p>	

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Vision	These 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 10 CCR 2505 10, 8.011.11 or available through a third party resource. Vision services are provided by a licensed Optometrist or physician and include eye exams and diagnosis, glasses, contacts, and other medically necessary methods used to improve specific dysfunctions of the vision systems. Lasik and other similar types of procedures are prior approved and only allowable when the procedure is necessary due to documented specific behavioral complexities (i.e. constant destruction of eye glasses) associated with the participant that make other more traditional remedies impractical.	1-500	<ul style="list-style-type: none"> • General Considerations • Is there a current need for vision services? • Is this required by a physician? • Amount of service is based on need not threshold • Is the treatment plan consistent with need? • Lasik: Is it cost effective? Participant's age? • Both eyes vs. one at a time • Lasik must be prior authorized by the Waiver Administrator 	<ul style="list-style-type: none"> • Not Medically Necessary • Services available under EPSDT for 18-21 year olds.
		501-1000		
		>1000		