Harvey-Marion County CDDO I/DD SERVICE TYPES

Targeted Case Management (TCM). Case Managers help the person and their support network navigate the world of services and supports to enhance the person's independence, integration, inclusion, and productivity. Case managers provide assessment of service needs; develop a person-centered support plan and plan of care based on needs, service and support options, choices, preferences, goals, and action steps; make referrals to link the person with programs, services and providers; and make necessary contacts to ensure the plan is implemented and meets the person's needs, identify changes in the person's status or needs, and make changes as necessary to meet the person's needs.

Respite Care for children. This temporary service is for children from ages birth-to-16 who live in the family or adoptive family home, to provide necessary relief for the primary unpaid caregiver for vacations, holidays, and scheduled periods of time off. Respite Care is provided in planned hourly segments. Respite care may not be provided more than 7 consecutive days.

Overnight Respite Care (ORC). This temporary service is for children or adults who live in the family or adoptive family home, to provide necessary relief for the primary unpaid caregiver for vacations, holidays, and scheduled periods of time off. HCBS IDD-funded Overnight respite care must be provided in the person's home, or in a licensed setting.

Personal Care Services (PCS) - Supportive Home Care. This service provides one-on-one attendant care necessary to meet daily living needs of individuals ages 5 and up who live in the birth or adoptive family home; or for individuals ages 5 – 21 who are in custody of State of Kansas, Department of Children and Family, and live with a licensed foster family; or individuals who self-direct their adult day or residential supports. Services include assisting with activities of daily living, instrumental activities of daily living related to the recipient and support services, assistance in obtaining necessary medical services, assistance in reporting changes in the individual's condition and needs, and accompanying or providing transportation to accomplish any of the tasks listed above. Services include assisting individuals in performing a variety of tasks promoting independence, productivity, integration, and inclusion.

Day Supports. For adults ages 18+, Day Supports include structured activities such as workplace training, socialization, recreation, and community inclusion. Participation in Day Supports is designed to help persons develop a sense of personal contribution, accomplishment or compensation.

Supported Employment – Kansas Rehabilitation Services. For adults 18+ who have a disability and want to work in competitive employment or self-employment. Apply by contacting Karolyn Kellogg, RS Counselor, at 620-663-5731.

Supported Employment – HCBS I/DD waiver. For adults 18+ to provide ongoing support to sustain paid employment in competitive work in an integrated setting. Cannot be provided in a sheltered work setting. Must not be provided simultaneously with activities directly reimbursed by Kansas Vocational Rehabilitation Services.

Residential Supports. For adults ages 18+ who live outside of their family or adoptive family home. Supports are provided in the individual's residential setting and include assistance, acquisition, retention and/or improvement in skills related to activities of daily living, such as, personal grooming and hygiene, bed making and household chores, eating and the preparation of food, and the social and adaptive skills to participate in community life.

Residential Supports for Children. For children ages 5 through 21 who are NOT in custody, and who are voluntarily placed in with a licensed resource (foster) family.

Enhanced Care Support (ECS). This service gives overnight assistance to individuals who live in their family or adoptive family home to assist with repositioning and other medical needs. Duties include calling a doctor, hospital, or providing assistance if an emergency occurs, turning and repositioning as well as reminding recipient of nighttime medication. No other personal care, training or household tasks are provided. Physician statement of need is required.

Specialized Medical Care (SMC) by RN or LPN. This service provides long-term nursing support for medically fragile or technologically dependent beneficiaries whose medical needs would otherwise require them to be cared for in a hospital. Recipients may not also receive Residential Supports or Personal Care Services.

Medical Alert Rental. Medical alert devices are a small instrument carried or worn by the individual, which, by the push of a button, automatically dials the telephone to a responder network. Medical Alert Rental service is provided to individuals who have a medical need that could become critical at any time.

Wellness Monitoring. A registered nurse visits the individual once every 60 days for monitoring including, but not limited to, vitals, medication adjustment, skin conditions, hygiene, and orientation to surroundings. The nurse evaluates the level of wellness of the individual to determine if medical services recommended by a physician are being utilized properly, and whether the individual needs skilled nursing intervention.

Assistive Services. Home Modifications/Equipment - A service providing equipment, modifications or improvements to an individual or their living environment to permit them to remain in their home and ensure safety, security, and accessibility.

Van Lifts - Vehicle modification provided for safe transportation to help an individual be involved in their community.

Communication Devices - These devices assist adults 18 years of age or older to communicate as clearly as possible to become more independent in the community. Wheelchair Modifications - This service provides necessary modifications to wheelchairs of adults 21 years of age and older to promote health, well-being and independence.

Limited License Services. Family members or friends with an established relationship with a person funded for licensed day and/or residential supports may apply for a limited license to serve that person. Capacity is limited to serving specific individuals for whom the license is requested. A maximum of two specific individuals may be served under a limited license.

Agency-Directed Services or Self-Directed Services?

Agency-Directed Services – Agency-directed means the service provider that you choose is responsible for hiring, training, scheduling, evaluating, and paying the staff who provide the services, in compliance with applicable laws, rules, regulations, policies, and funding requirements.

Self-Directed Services – Self-directing means taking on the activities of hiring, training, scheduling, arranging back-up staff, and evaluating/terminating staff, functions that are otherwise the responsibility of a service provider agency. HCBS IDD program services that can be self-directed include: personal care services, adult day supports, adult residential supports, overnight respite care, enhanced care support, and specialized medical care.

Self-directed personal care services, self-directed adult day supports, and self-directed adult residential supports are called "Personal Care Services." Personal Care Services are provided by a oneon-one attendant hired by the individual, or person self-directing on the individual's behalf. Personal Care Services include assisting with activities of daily living, independent activities of daily living related to the recipient and support services, assistance in obtaining necessary medical services, assistance in reporting changes in the individual's condition and needs, and accompanying or providing transportation to accomplish any of the tasks listed above. Individuals who choose any self-directed service are required to choose Financial Management Services (FMS) for information and assistance, as well as administrative functions including background checks for attendants, Medicaid billing, attendant payroll and required withholdings.

Financial Management Services (FMS) – For individuals who choose to self-direct their services, Financial Management Services (FMS) provides information and assistance, as well as background checks for attendants, Medicaid billing, attendant payroll, and required withholdings. FMS providers are required to obtain an approved provider agreement with State of Kansas, affiliate with CDDOs, and enroll with Kansas Medical Assistance to bill for specific HCBS DD waiver services that can be self-directed. FMS replaces what has previously been known as "payroll agent" services.