



Medicaid Provider Manual

Respite is not intended to be provided on a continuous, long-term basis where it is a part of daily services that would enable an unpaid caregiver to work full-time. In those cases, community living supports or other services of paid support or training staff should be used. The beneficiary's record must clearly differentiate respite hours from community living support services. Decisions about the methods and amounts of respite are decided during the person-centered planning process. Respite care may not be provided by a parent of a minor beneficiary receiving the service, the spouse of the beneficiary, the beneficiary's legal guardian, or the primary unpaid caregiver.

Respite services may be provided in the following settings:

- Waiver beneficiary's home or place of residence.
- Licensed foster care home.
- Facility approved by the State that is not a private residence, such as:
 - > Group home; or
 - Licensed respite care facility.
- Home of a friend or relative (not the parent of a minor beneficiary or the spouse of the beneficiary served or the legal guardian) chosen by the beneficiary; licensed camp; in community settings with a respite worker training, if needed, by the beneficiary or family. These sites are approved by the beneficiary and identified in the IPOS.

Cost of room and board must not be included as part of the respite care unless provided as part of the respite care in a facility that is not a private residence. Respite provided in an institution (i.e., ICF/IID, nursing facility, or hospital) or MDHHS approved day program site is not covered by the HSW. The beneficiary's record must clearly differentiate respite hours from community living support services.

Supports Coordination

Supports coordination works with the waiver beneficiary to assure all necessary supports and services are provided to enable the beneficiary to achieve community inclusion and participation, productivity, and independence in home- and community-based settings. Without the supports and services, the beneficiary would otherwise require the level of care services provided in an ICF/IID. Supports coordination involves the waiver beneficiary and others identified by the beneficiary (i.e., family member(s)) in developing a written individual plan of services (IPOS) through the person-centered planning process. The waiver beneficiary may choose to work with a supports coordinator through the provider agency, an independent supports coordinator, a supports coordinator assistant, or a services and supports broker. Functions performed by a supports coordinator, supports coordinator assistant, or services and supports broker include an assurance of the following:

- Assistance with access to entitlements and/or legal representation.
- Brokering of providers of services/supports.
- Developing an IPOS using the person-centered planning process, including revisions to the IPOS at the beneficiary's request or as the beneficiary's changing circumstances may warrant.
- Linking to, coordinating with, follow-up of, and advocacy with all supports and services, including the Medicaid Health Plan, Medicaid fee-for-service, or other health care providers.





Medicaid Provider Manual

- Monitoring of Habilitation Supports Waiver and other mental health services.
- Planning and/or facilitating planning using person-centered principles. This function may be delegated to an independent facilitator chosen by the beneficiary.

The role of the supports coordinator assistant is to perform the functions listed above, as they are needed, when the beneficiary selects an assistant in lieu of a supports coordinator. When a supports coordinator assistant is used, a qualified supports coordinator must supervise the assistant.

The beneficiary may select a services and supports broker to perform supports coordination functions. However, parents of a minor-aged beneficiary, spouse or legal guardian of an adult beneficiary may not provide services and supports broker services to the beneficiary. The primary roles are to assist the beneficiary in making informed decisions about what will work best for him, are consistent with his needs and reflect the beneficiary's circumstances. The services and supports broker helps the beneficiary explore the availability of community services and supports, housing, and employment and then makes the necessary arrangements to link the beneficiary with those supports. Services and supports brokerage services offer practical skills training to enable beneficiaries to remain independent, including the provision of information on recruiting/hiring/managing workers, effective communication and problem solving.

Whenever services and supports brokers perform any of the supports coordination functions, it is expected that the beneficiary will also have a supports coordinator or supports coordinator assistant employed by the PIHP or its provider network that assures the other functions above are in place, and that the functions assigned to the services and supports broker are being performed. The IPOS must clearly identify which functions are the responsibility of the supports coordinator, the supports coordinator assistant and the services and supports broker. The services and supports broker must work under the supervision of a qualified supports coordinator.

Many beneficiaries choose a services and supports broker rather than traditional case management services or supports coordination provided directly by a supports coordinator. If a beneficiary does not want case management or supports coordination services, the PIHP will assist the beneficiary to identify who will assist him in performing each of the functions, including the use of natural supports or other qualified providers, to assure the supports coordination functions are provided. The IPOS must reflect the beneficiary's choices, the responsible person(s) for each of the functions listed in this section, and the frequency at which each will occur.

When the beneficiary chooses a supports coordinator assistant, a services and supports broker, or a natural support to perform any of the functions, the IPOS must clearly identify which functions are the responsibility of the supports coordinator, the supports coordinator assistant, the services and supports broker or the natural support. The PIHP must assure that it is not paying for the supports coordinator or supports coordinator assistant and the services and supports broker to perform the same function. Likewise, when a supports coordinator or supports coordinator assistant facilitates a person-centered planning meeting, it is expected that the PIHP would not "double count" the time of any services and supports broker who also attends. During its on-site visits, MDHHS will review the IPOS to verify that there is no duplication of service provision when both a supports coordinator or supports coordinator assistant and a services and supports broker are assigned supports coordination responsibilities in a beneficiary's plan of service.





Medicaid Provider Manual

Supports strategies will incorporate the principles of empowerment, community inclusion, health and safety assurances, and the use of natural supports. Support coordinators, supports coordinator assistants, or services and supports brokers will work closely with the beneficiary to assure his ongoing satisfaction with the process and outcomes of the supports, services, and available resources.

Supports Coordination is reported only when there is face-to-face contact with the beneficiary. Related activities, such as telephone calls to schedule appointments or arrange supports, are functions that are performed by a supports coordinator but not reported separately. Supports coordination functions must assure:

- Activities are documented.
- Appointments and meetings are scheduled.
- Housing and employment issues are addressed.
- Income/benefits are maximized.
- Information is provided to assure the beneficiary (and his representative(s), if applicable) is informed about self-determination.
- Monitoring of individual budgets (when applicable) for over- or under-utilization of funds is provided.
- Natural and community supports are used.
- Person-centered planning is provided and independent facilitation of personcentered planning is made available.
- Persons chosen by the beneficiary are involved in the planning process.
- Plans of supports/services are reviewed at such intervals as are indicated during planning.
- Social networks are developed.
- The desires and needs of the beneficiary are determined.
- The quality of the supports and services, as well as the health and safety of the beneficiary, is monitored.
- The supports and services desired and needed by the beneficiary are identified and implemented.

Additionally, the supports coordinator, supports coordinator assistant, or services and supports broker coordinates with, and provides information as needed to, the qualified intellectual disability professional (QIDP) on the process of evaluation and reevaluation of beneficiary level of care (e.g., supply status and update information, summarize input from supports providers, planning committee members, etc.).





Medicaid Provider Manual

While supports coordination as part of the overall plan implementation and/or facilitation may include initiation of other coverages and/or short-term provision of supports, it shall not include direct delivery of ongoing day-to-day supports and/or training, or provision of other Medicaid services. Supports coordination does not include any activities defined as Out-of-Home Non-Vocational Habilitation, Prevocational Services, Supported Employment, or CLS. Supports coordinators, supports coordinator assistants, and services and supports brokers are prohibited from exercising the agency's authority to authorize or deny the provision of services. Supports coordination may not duplicate services that are the responsibility of another program.

The supports coordination functions to be performed and the frequency of face-to-face and other contacts are specified in the beneficiary's plan. The beneficiary's record must contain sufficient information to document the provision of supports coordination, including the nature of the service, the date, and the location of contacts, including whether the contacts were face-to-face. The frequency and scope of supports coordination contacts must take into consideration health and safety needs of the beneficiary.

Supported Employment

Supported employment is the combination of ongoing support services and paid employment that enables the beneficiary to work in the community. For purposes of this waiver, the definition of "supported employment" is:

- Community-based, taking place in integrated work settings where workers with disabilities work alongside people who do not have disabilities.
- For beneficiaries with severe disabilities who require ongoing intensive supports such as job coach, employment specialist, or personal assistant.
- For beneficiaries who require intermittent or diminishing amounts of supports from a job coach, employment specialist or personal assistant.

Supported employment includes activities needed to sustain paid work by individuals receiving waiver services, including supervision and training, job coach, employment specialist services, personal assistance and consumer-run businesses. Supported employment services cannot be used for capital investment in a consumer-run business. When supported employment services are provided at a work site in which persons without disabilities are employed, payment will be made only for the adaptations, supervision and training required by individuals receiving waiver services as a result of their disabilities, and will not include payment for the supervisory activities rendered as a normal part of the business setting or for any services that are the responsibility of another agency, such as Michigan Rehabilitation Services (MRS) or the Bureau of Services for Blind Persons (BSBP).

FFP may not be 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 vocational training that is not directly related to an individual's supported employment program.

Date: April 1, 2018