

Residential Habilitation

Definition

Residential Habilitation means personal care, assistance with activities of daily living, supervision, behavior supports, and skills training provided to a HASCI Waiver participant through a licensed residential program. Individually tailored supports and training assist the participant to reside in the most integrated setting appropriate to his or her needs. Supports may include direct care, nursing to the extent permitted by State law, hands-on assistance, direction and/or cueing, and supervision. Training is focused on acquisition, retention, or improvement in skills for living in the community with maximum independence. Supports may also include social and leisure activities and community inclusion opportunities.

Transportation may be provided between the participant's place of residence and other sites as a component of Residential Habilitation. The cost of this transportation is included in the rate paid to the residential provider.

Service Unit

The service unit for Residential Habilitation is one (1) day if the participant is the resident of a CTH I, CTH II, SLP II, or CRCF as documented on the facility's daily census.

The service unit for Residential Habilitation is one (1) hour if the participant is a resident of a SLP I as documented on the participant's Individual Service Report.

Refer to the current HASCI Waiver rate table for reimbursement amounts. *This can be accessed via the SCDDSN Application Portal >R2D2 >View Reports >Waiver >Service Rates >HASCI.*

Service Limit / Restrictions

Residential Habilitation funded by the HASCI Waiver must be provided within a residential facility or program contracted by SCDDSN. These include:

- Community Training Home I or II (CTH-I or CTH-II) licensed by SCDDSN or its contracted QIO
- Supervised Living Program I or II (SLP-I or SLP-II) licensed by SCDDSN or its contracted QIO

- Community Residential Care Facility (CRCF) licensed by South Carolina Department of Health and Environmental Control (SCDHEC).

Payment for Residential Habilitation does not include the cost of room and board or building maintenance, upkeep, and improvement, other than costs for modifications or adaptation required to assure the health and safety of residents or meet requirements of the applicable life safety code.

Payment for Residential Habilitation will not be made for activities or supervision for which a payment is made by a source other than Medicaid.

Payment for Residential Habilitation will not be made, directly or indirectly, to members of the participant's immediate family.

Providers

HASCI Waiver Residential Habilitation must be provided by a SCDDSN-contracted provider of residential services for persons with traumatic brain injury, spinal cord injury, and similar disability. The provider has the option to directly enroll with SCDHHS as a Medicaid provider of Residential Habilitation for the HASCI Waiver.

Arranging and Authorizing the Service

If a HASCI Waiver participant resides in a SCDDSN-contracted residential facility or program (or is scheduled to be admitted) and is determined to need Residential Habilitation, his or her Support Plan must clearly document the need for personal care, assistance with activities of daily living, supervision, behavior supports, and/or skills training.

Choice must be offered among all SCDDSN-contracted residential providers approved to serve people with traumatic brain injury, spinal cord injury, and similar disability that have a funded vacancy appropriate for the participant. It must be clearly documented in Service Notes that choice (if available) was offered and the residential provider selected (or accepted) by the participant.

After need for Residential Habilitation has been documented and a provider identified, the participant's Support Plan must be updated to clearly reflect the name of the service and payer, the amount, frequency, and duration of the service, and the provider type. Budget information for the service must then be entered into the Waiver Tracking system (WTS).

- Residential Habilitation funded by the HASCI Waiver must be entered into the Service Tracking System (STS) before budget information can be entered into WTS.

To initiate the service following WTS processing, the provider must be authorized using *Authorization for Residential Habilitation* (HASCI Form 12A). *This can be accessed via the SCDDSN Application Portal >Business Tools >Forms >HASCI Waiver.* A copy must be maintained in the participant's file.

Billing

Residential Habilitation must be Board-billed to the participant's SCDDSN Financial Manager agency; no prior authorization number is required.

The Financial Manager agency must follow *Procedures to Report and Bill for Board-Based Services Provided to HASCI Waiver Recipients* to receive reimbursement from SCDDSN.

This can be accessed via the SCDDSN Application Portal >Business Tools >Forms >Finance Manual Chapter 10, Section 10-14.

Monitorship

The Service Coordinator must monitor provision of each HASCI Waiver service received by a participant to:

- verify the service is being provided as authorized,
- assure the usefulness and effectiveness of the service,
- determine the participant's and/or representative's satisfaction with the service and service provider(s), and
- confirm health status and safety of the participant.

Monitorship includes:

- Contact with the participant and/or representative within two (2) weeks after beginning the service or beginning with a new provider of the service,
- Contact with the participant and/or representative at least bi-monthly (every other month),
- Contact with service providers as necessary to confirm health status and safety of the participant and appropriate provision of authorized services,
- Face-to-face visit with the participant at least every six (6) months (180 days), and
- Review of the participant's Support Plan as often as needed, but at least every six (6) months (180 days).

Monitoring contacts, face-to-face visits, and review of the participant's Support Plan must be documented in Service Notes.

Information obtained during monitoring may lead to changes in authorized HASCI Waiver services, such as increased/decreased units, change of provider, or change to a more appropriate service.

Service Denial, Reduction, Suspension, and Termination

If a HASCI Waiver participant is denied a service that was requested or denied an increase in units of a service already authorized, the Service Coordinator must provide written notification to the participant or legal guardian, including reason for denial. Information concerning SCDDSN Reconsideration and SCDHHS Appeal must also be provided.

If a participant's authorized units of a HASCI Waiver service must be reduced, temporarily suspended, or indefinitely terminated, the Service Coordinator must provide written notification to the participant or legal guardian, including reason for the action. Information concerning SCDDSN Reconsideration and SCDHHS Appeal must also be provided.

Except when the action was requested by the participant or legal guardian or if the action is due to the participant's death, admission to a hospital or nursing facility, or loss of Medicaid and/or HASCI Waiver eligibility, there must be at least 10 calendar days between the date of notification and effective date of the action.

Written notification to the participant or legal guardian is made using the following forms, which are also used to notify each affected service provider of the action:

- *Notice of Denial of Service* (HASCI Form 11C)
- *Notice of Reduction of Service* (HASCI Form 11A)
- *Notice of Suspension of Service* (HASCI Form 11B)
- *Notice of Termination of Service* (HASCI Form 11)

These can be accessed via the SCDDSN Application Portal>Business Tools>Forms>HASCI Waiver.

When the action becomes effective, the participant's Support Plan must be updated and budget information in the Waiver Tracking System (WTS) must be adjusted accordingly. For service reduction or termination, excess or unused units must be deleted from the budget. Service information in the Service Tracking System (STS) must be updated as necessary.