Self-Determination

Module 5: My Services and Spending Plan

Overview of My Spending Plan

- ✓ Developing your spending plan
- ✓ Budget categories
- ✓ Jason and Sofia examples
- ✓ Thinking about your spending plan activity

Developing Your Spending Plan

Support:

- Family & friends
- Service Coordinator
- Independent facilitator
- Financial Management Service

Identify:

Services needed during **Person-Centered Planning** & documented on your **Individual Program Plan**.

Determine:

- Generic services. Ex: Medi-Cal, IHSS
- What services will **not** come from your Individual Budget

Determine:

- Who?
- How often?
- When?
- Length of time?
- Cost?

Service Covered in your Spending Plan

The services you pay for in your Spending Plan

- ✓ Must be an approved service.
- ✓ Must be with Providers that are qualified.
- ✓ Must support choice and inclusion.
- ✓ Can be vendored or non-vendored.

People who can help you create your plan & determine your services?

- Family members
- Friends
- Service Coordinator
- Independent Facilitator
- Financial Management Service (FMS)

Person Centered Planning and Your Individual Program Plan

Services identified during **Person-Centered Planning** will be documented on your **Individual Program Plan**. These will help you build your Spending Plan.

Before you create your Spending Plan you will:

- Develop a Person Centered Plan with your planning team
- Identify what's important *To* you and *For* you
- Identify how to best support you at home and in the community
- Document your goals in your Individual Program Plan (IPP)

What services will NOT be in your Spending Plan?

You and your team will identify which services or supports you can receive for free.

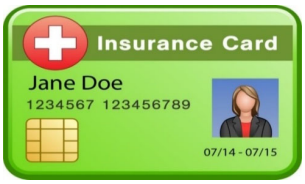
- These are **"generic services"** and they are free to anyone who qualifies to use them, not just people who receive services from the regional center.
- You **MUST** try to get other sources to pay first. Work with your Independent Facilitator to identify and help you pursue generic resources you may qualify for.
- Generic resources will allow you to stretch your funds.

Overview of Generic Resources to be used first

Here are some examples of Generic Resources

- School District

- Insurance or Medi-Cal



- In-Home Support Services
- Behavioral Health

- Department of Rehabilitation

DOR
DEPARTMENT of REHABILITATION
Employment, Independence & Equality

- Department of Social Services

CDSS
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

This is the **SAME** requirement as in the traditional regional center system.

According to the Lanterman Act, the regional center must exhaust all available generic resources before funding services in Self-Determination.

Generic Resources

What are Generic Resources?

What comes to mind when you think of the word "generic"?

- Generic resources are public sources of funding that are required to pay for services.
- Generic resources can help you save money and help you with your budget planning!
- You must access these public sources first.

What are the legal requirements for accessing generic resource in Self Determination?

- The **SAME** requirement as in the traditional regional center system.
- According to the Lanterman Act, the regional center must exhaust all available generic resources before funding services.
- You may have to show a letter from the public source that states they cannot provide you a service or cannot provide the amount of service you need to maintain your independence.
    - **Can you think of a time you had to produce a letter to show you pursued a generic resource?**
      (i.e. In-Home Support Services (IHSS) award letter to support the need for more personal assistance, a doctor's note, a denial letter from your private health insurance, a denial letter from Dept. of Rehabilitation, etc.)

Generic Resources

What are some examples of generic resources?

Lifelong:

- Private insurance serves as the primary source of medical coverage. Some examples are: Blue Shield, Kaiser, Blue Cross, Anthem, these are common in California and may help pay for medical expenses and treatments.
- Medi-Cal / Medi-Care: may serve as a primary or secondary type of insurance, it could help pay for medical equipment, behavioral services, medication, diapers, or any other medical related expense.
- In-Home Support Services (IHSS): may provide funding to pay a personal assistant to help you take care of your daily needs which could include grocery shopping, doing your laundry, housekeeping in your home or apartment, taking you to your doctor's appointments, or someone to help keep you or your family member safe in the home or community.
- Supplemental Security Income(SSI)/Social Security Administration(SSA): may assist with an income source if the child's family is low income OR if you're an adult and are unable to do work or do limited work: may provide income to help you with your groceries, living expenses, rent, and other personal expenses.
- Trusts (family): share with your Independent Facilitator or Service Coordinator a copy of your trust because there may be part of your trust to help you continue to live independently.

  > "we want to maximize your trust benefits to ensure we're secured in one area and then we may focus on other parts of your independent living"

- Transportation: parents, schools to and from school, community transportation, buses.
- CalABLE: It's a savings account that you can establish for you or your family member without affecting their public benefits (talk to your Independent Facilitator or service coordinator about CalABLE).

Generic Resources

What are some examples of generic resources?

Children:

- Early and periodic screening, diagnosis and treatment (EPSDT): can detect delays, minimize impact of delays through early detection, nursing care, it can go beyond what Medi-Cal usually covers. For any child from 0-18 years of age.
- School districts: your child from the age of 3-22 has the right to a free and public education (Independent Facilitator or service coordinator- discuss transition process).
- California Children Services (CCS): children are eligible for CCS up to the age of 21, it may help pay physical and occupational therapies, medical equipment, and other medical necessities (i.e. such as a wheelchair, hoyer lift or ramp for your home) (Independent Facilitator or Service Coordinator- discuss transition process).

Adults:

- Department of Rehabilitation (DOR): provides support to help you prepare for work by assisting you through identifying the skills you need for employment, finding employment, and provide job coaching in the work place to help you be successful (Independent Facilitator or Service Coordinator- discuss transition process).
- **What resources does your local community have?**
  - Some examples are: city recreation departments, YMCA, public library (free internet access), local churches (community groups, music programs), local Family Resource Centers (support groups, trainings, libraries, holiday events, dances, opportunities to make friends and share your story with other parents), community colleges and universities (lots to explore in this area).
  - **2-1-1**
- Tri-Counties Regional Center's brochure "Other Resources in the Community" hard copy or on the website at www.tri-counties.org

Generic Resources

Why do you want to use generic resources?

- Helps you save money in your Spending Plan for other services & supports to help you live an independent and the life you want to live!!

How do you find generic resources?

- Your service coordinator may help you explore and pursue generic resources you may qualify for. The regional center has a wealth of information about the availability of generic resources. ASK YOUR SERVICE COORDINATOR!!
- Your Independent Facilitator may help you discover and pursue generic resources you may qualify for.
- When identifying your Independent Facilitator, make sure they know the generic resources available to you and in your community, ASK!!

Talk with your team if a generic resource does not meet your needs.

Your Spending Plan in Three Budget Categories

Living Arrangement
Supports in your home

Employment & Community Participation
Supports in your community

Health & Safety *Services to help keep you healthy and safe*

- ✓Each service in your Spending Plan will be assigned a service code.
- ✓Each service code belongs to one of these three budget categories

Can you move funds across categories in your Spending Plan?

If your needs change, you may talk to your service coordinator, Independent Facilitator, and Financial Management Service agency to discuss transferring funds across categories.

Spending Plan changes will need to be documented in your Individulal Program Plan.

Allowable Spending Plan Changes:

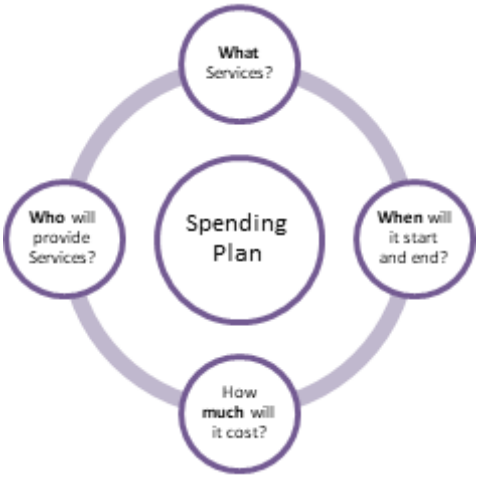
Transferring up to 10 % between categories

(approval not needed)

Transferring more than 10% between categories

(approval needed)

Creating your Spending Plan?



You will work with your team to figure out:

- What services will support your needs?
- What category will each service fall under?
- Who will provide the service?
- How often will that service be provided?
- When will it start and end within the next 12 month period?
- How much will it cost?
- Your team will work with you to complete the Provider Agreement Assessment for each service.

Self-Determination and the "Final Rule"

The Self-Determination Program is designed so that **you** are **included** in **YOUR** community.

- ✓ You make your own choices.
- ✓ You live in neighborhoods of your own choosing.
- ✓ You have the opportunity to work and volunteer.
- ✓ You are able to make friends with people with and without disabilities.

HOME AND COMMUNITY BASED SERVICES AND THE "FINAL RULE"

FOR INDIVIDUALS AND FAMILIES:

People with intellectual and developmental disabilities are provided many services because of the Lanterman Act. Many services people receive are paid for with state and federal money from the federal Centers for Medicare and Medicaid Services (CMS). Therefore, California must comply with what is called the Home and Community-Based Services (HCBS) Final Rule. This rule sets requirements for HCBS settings, which are places where people live or receive services. Each state has until March 2022 to help providers comply with the HCBS Final Rule.

The HCBS Final Rule Applies to:

- Residential and non-residential settings; including certified and licensed homes
- Day programs, and other day-type services
- Employment options and work programs

The HCBS Final Rule Does NOT Apply to:

- Nursing homes
- Hospitals
- Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)
- Institutions for mental diseases (IMD)

What is the Goal of the HCBS Final Rule?

To enhance the quality of services provided by:

- Maximizing opportunities and choices for individuals
- Promoting community integration by making sure individuals have full access to the community
- Making sure individuals have the opportunity to work and spend time with other people in their community who do not have disabilities
- Ensuring individual preferences are supported and rights are protected
- Establishing person-centered service planning requirements, which includes a process driven and directed by the individual to identify needed services and supports

All Settings

The Final Rule requires that you can:

- Spend time in, and being a part of, your community
- Work alongside people who do not have disabilities
- Have choices regarding services and supports, and who provides them
- Have control of your schedule and activities

Residential Settings

Provider Owned or Controlled

In addition to the requirements applicable to all settings, the Final Rule requires that you have:

- Choice about your roommates
- Privacy in your room, including a lock on your door
- Control of your schedule and activities
- The ability to have visitors of your choosing, at any time
- Freedom to furnish and decorate your room
- A lease or other legal agreement, protecting you from eviction

HOME AND COMMUNITY BASED SERVICES AND THE "FINAL RULE"

FOR PROVIDERS:

How will your service as a provider change?

If you are a service provider who provides services to multiple consumers in the same location, we have to make sure these services do not isolate individuals from the community. The Final Rule says that settings must be integrated and support full access to the community. As a provider, you may need to modify where and how your service is delivered to meet the HCBS Final Rule. Policies and program designs may need to be changed and training to your staff may be necessary to assure their understanding of the new expectations.

Assessing Provider Settings

All providers will soon be required to complete a self-assessment survey that will help determine whether or not a setting complies with the HCBS Final Rule or if modifications are needed. For settings that require changes, there will be time to develop transition plans. Training will be provided on the self-assessment process and expectations, and additional information will be posted on the DDS webpage.

Where can I find more information?

To ask a question, make a comment, or get more information about the HCBS Final Rule, email HCBSregs@dds.ca.gov.

For more detailed information on the HCBS Final Rule and California's Statewide Transition Plan, please visit:
http://www.dds.ca.gov/HCBS/

http://www.dhcs.ca.gov/services/ltc/Pages/HCBSStatewideTransitionPlan.aspx

https://www.medicaid.gov/medicaid/hcbs/index.html

Centers for Medicare and Medicaid Services' (CMS) Home and Community-Based Services (HCBS) Final Rule Requirements

The setting:

1. Is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community to the same degree of access as individuals not receiving Medicaid HCBS.

2. Is selected by the individual from among setting options including non-disability-specific settings and an option for a private unit in a residential setting.

3. Ensures an individual's rights of privacy, dignity and respect, as well as freedom from coercion and restraint.

4. Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to: daily activities, physical environment, and with whom to interact.

5. Facilitates individual choice regarding services and supports, and who provides them.

In provider-owned or controlled residential settings:

6. The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services.

7. Each individual has privacy in their sleeping or living unit; including doors lockable by the individual, choice of a roommate if sharing a unit, and the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.

8. Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

9. Individuals are able to have visitors of their choosing at any time.

10. The setting is physically accessible to the individual.

Setting Assessment and Process

1.
The provider will complete a self-assessment of the setting

2.
The selected provider, the regional center and **YOU** will conduct an onsite assessment.

3.
If the provider **passes** you can use this service

4.
If the provider **does not pass**, you can work with them towards change. If not, you can **NOT** have services in this setting.

5.
The Financial Management Service verifies the **completion** of the assessment process.

*Setting assessments are required when you're using a service with other individuals with developmental disabilities to ensure they meet the "Final Rule" requirement

TRI-COUNTIES REGIONAL CENTER
SELF-DETERMINATION PROGRAM

Jason's Spending Plan

Date Prepared	
Participant's Name	JASON
Participant's UCI#	

SPENDING PLAN

BUDGET CATEGORY	SERVICE	SERVICE CODE	FREQUENCY	AMOUNT
Living Arrangement	Community Living Supports	320	6 hours/week of home skills coaching for 12 months at $27/hour including taxes	**$8,424**
Living Arrangement	Financial Management Services (FMS)	316	Co-Employer Model @ $165/month (7 services)	**$1,980**
TOTAL FOR LIVING ARRANGMENT CATEGORY				**$10,404**
Employment & Community Participation	Employment Supports	335	40 hours/month for a gardening coach at the job site for 12 months at $27/hour (including taxes & benefits)	**$12,960**
Employment & Community Participation	Community Integration Supports	331	100/hours per month of staff support towards apartment, church, gym and during transportation to these activities for 12 months @ $24/hour including taxes & benefits	**$28,800**
Employment & Community Participation	Non-Medical Transportation	338	Uber, public transportation and ACCESS @ $100/month	**$1,200**
Employment & Community Participation	Community Integration Supports	331	12 hours/month of social coaching for 12 months at $30/hour including taxes	**$4,320**
Employment & Community Participation	Community Integration Supports	331	$10/month to pay for YMCA gym membership for 12 months	**$120**
Employment & Community Participation	Independent Facilitator	340	Facilitate PCP, Finding services	**$1,000**
TOTAL FOR EMPLOYMENT & COMMUNITY PARTICIPATION CATEGORY				**$48,400**
Health & Safety				
Health & Safety				
TOTAL FOR HEALTH AND SAFETY CATEGORY				**$0**

TOTAL SPENDING PLAN AMOUNT	**$58,804**

Participant's Individual Budget Amount	**$63,100**

Parent/Legal Representative _____ Date _____

Service Coordinator _____ Date _____

Services and Supports Manager _____ Date _____

Financial Management Service Cost for Jason

Number of Services Received

Self-Determination Program
Maximum Financial Management Services (FMS) Rates

FMS Model	Number of Services	Max Rate Per Month
FMS as Bill Payer	1-3	$50
	4-6	$75
	7+	$100
Participant as Sole Employer	1-2	$110
	3-4	$125
	5+	$150
Participant & FMS as Co-Employers	1-2	$125
	3-4	$140
	5+	$165

TRI-COUNTIES REGIONAL CENTER
SELF-DETERMINATION PROGRAM

Sofia's Spending Plan

Date Prepared	
Participant's Name	SOFIA
Participant's UCI#	

SPENDING PLAN

BUDGET CATEGORY	SERVICE	SERVICE CODE	FREQUENCY	AMOUNT
Living Arrangement	Respite Services Summer Camp	310 & 311	$2000 to pay for Summer Camp	**$2,000**
Living Arrangement	Financial Management Services (FMS)	315	Bill Payer Model @ $75/month (4 services)	**$900**
TOTAL FOR LIVING ARRANGMENT CATEGORY				**$2,900**
Employment & Community Participation	Community Integration Supports	331	Art Class	**$200**
Employment & Community Participation	Community Integration Supports	331	5/hours a week of staff support after school and during art class 32 weeks/year @ $20/hour	**$3,200**
Employment & Community Participation	Community Integration Supports	331	20/hours a week of staff support in the summer 4 weeks @ $20/hour	**$1,600**
Employment & Community Participation	Independent Facilitator	340	Facilitate PCP, Access to IPP, IEP and Public Benefits Agencies	**$1,000**
TOTAL FOR EMPLOYMENT & COMMUNITY PARTICIPATION CATEGORY				**$6,000**
Health & Safety				
Health & Safety				
TOTAL FOR HEALTH AND SAFETY CATEGORY				**$0**

TOTAL SPENDING PLAN AMOUNT	**$8,900**

Participant's Individual Budget Amount	**$12,000**

Parent/Legal Representative _____ Date _____

Service Coordinator _____ Date _____

Services and Supports Manager _____ Date _____

Financial Management Service Cost for Sofia

Number of Services Received

Self-Determination Program
Maximum Financial Management Services (FMS) Rates

FMS Model	Number of Services	Max Rate Per Month
FMS as Bill Payer	1-3	$50
	4-6	$75
	7+	$100
Participant as Sole Employer	1-2	$110
	3-4	$125
	5+	$150
Participant & FMS as Co-Employers	1-2	$125
	3-4	$140
	5+	$165

Your Spending Plan Activity

1. **Think about one of your goals.**

2. **Think about how a service could help you reach that goal.**

3. **What category would that fall under?**

4. **How much might that service cost?**

5. **How often? Hour? Month? Year?**

6. **When will the service start and end?**

TRI-COUNTIES REGIONAL CENTER
SELF-DETERMINATION PROGRAM

Date Prepared	
Participant's Name	
Participant's UCI#	

SPENDING PLAN

BUDGET CATEGORY	SERVICE	SERVICE CODE	FREQUENCY	AMOUNT
Living Arrangement				
TOTAL FOR LIVING ARRANGMENT CATEGORY				**$0**
Employment & Community Participation				
TOTAL FOR EMPLOYMENT & COMMUNITY PARTICIPATION CATEGORY				**$0**
Health & Safety				
TOTAL FOR HEALTH AND SAFETY CATEGORY				**$0**

TOTAL SPENDING PLAN AMOUNT	**$0**

Participant's Individual Budget Amount	**$0**

Parent/Legal Representative _____ Date _____

Service Coordinator _____ Date _____

Serves and Supports Manager _____ Date _____

My Notes & Next Steps

Self-Determination Program Service Codes by Budget Category

Budget Category	SDP Services	Service Code	Description/Providers
Living Arrangement (310 - 330)	Respite Services	310	Respite (Individual and Agency) In -home
		311	Respite Facility - Out-of-Home
	Live-In Caregiver	312	Live-In Caregiver
	Homemaker	313	Homemaker
	Housing Access Supports	314	Housing Access Supports
	Financial Management Service	315	FMS Fiscal Agent
		316	FMS Co-Employer
		317	FMS Fiscal/Employer Agent
	Community Living Supports	320	Community Living Supports (Individual and Agency)
		321	Residential Facility
Employment & Community Participation (331 - 355)	Community Integration Supports	331	Community Integration Supports
	Participant-Directed Goods and Services	333	Participant-Directed Goods and Services
	Individual Training and Education	334	Individual Training and Education
	Employment Supports	335	Employment Supports
	Technology Services	336	Technology Supports
	Transition/Set Up Expenses	337	Transition Set-Up Expenses
	Non-Medical Transportation	338	Non-Medical Transportation
	Prevocational Supports	339	Prevocational Supports
	Independent Facilitator	340	Independent Facilitator
Health and safety (356 - 399)	Environmental Accessibility Adaptation	356	Environmental Accessibility
	Acupuncture Services	357	Acupuncture Services
	Personal Emergency Response Systems (PERS)	358	Personal Emergency Response Systems
	Home Health aide	359	Home Health Aide
	Communication Support	360	Communication Support
	Skilled Nursing	361	Skilled Nursing
	Nutritional Consultation	362	Nutritional Consultation
	Crisis Intervention and Supports	363	Crisis Intervention and Supports
	Behavioral Intervention Services	364	Behavioral Intervention Services
	Specialized Medical Equipment and Supplies	365	Specialized Medical Equipment and Supplies
	Family/Consumer Training	366	Family/Consumer Training
	Dental Services	367	Dental Services
	Lenses and Frames	368	Lenses and Frames
	Optometric-Optician Services	369	Optometric-Optician Services
	Psychology Services	370	Psychology Services
	Training and Counseling Services for Unpaid Caregivers	371	Training and Counseling Services for Unpaid Caregivers
	Speech - Hearing and Language	372	Speech - Hearing and Language
	Chriopractic Services	373	Chiropractor
	Massage Therapy	374	Massage Therapist
	Occupational Therapy	375	Occupational Therapy
	Physical Therapy	376	Physical Therapy
	Vehicle Modifications and Adaptations	377	Vehicle Modifications and Adaptations
	Family Support Services	378	Child Day Care Facility

Self-Determination Program Service Definitions

Living Arrangement

Community Living Supports

Community Living Supports are services that facilitate independence and promote community integration for participants, regardless of the community living arrangement. Services include support and assistance with socialization, personal skill development, community participation, recreation and leisure, and home and personal care, among others, as further described below. Payments for Community Living Supports do not include the cost for room and board.

Community Living Supports are provided to a participant in his/her home and community to achieve, improve, and/or maintain social and adaptive skills necessary to enable the participant to reside in the community and to participate as independently as possible. Services are provided in environments that support participant comfort, independence, preferences and the use of technology. The participant's choices are incorporated into the services and supports received. The participant has unrestricted access, and the participant's essential personal rights of privacy, dignity and respect, and freedom from coercion are protected.

The service settings are integrated in, and facilitate each participant's full access to the greater community, which includes opportunities for each participant to engage in community life, control personal resources, and receive services in the community.

The specific services provided to each participant will vary based on the individual, the individual's preferences and the community setting chosen. The specific types and mix of supports that an individual receives as well as any special provider qualifications shall be specified in the Individual Program Plan.

The following items describe the types of possible Community Living Supports:

1. Support with socialization includes development or maintenance of self-awareness and self-control, social responsiveness, social amenities, interpersonal skills, and personal relationships.

2. Support with personal skill development includes activities designed to improve the participant's own ability to accomplish activities of daily living, including eating, bathing, dressing, personal hygiene, mobility, and other essential activities.

3. Support with community participation includes assistance that enables the individual to more fully participate in

Self-Determination Program Service Definitions

community activities. Assistance may include, but is not limited to, the acquisition, use, and care of canine or other animal companions specifically trained to provide personal assistance, or devices to facilitate immediate assistance when threats to health, safety, or well-being occur.

4. Support to facilitate participation in post-secondary education, religious, recreation or leisure activities.

5. Support with home and personal care includes services needed to maintain the home in a clean, sanitary and safe environment and provide essential care to the individual. Services include support with household activities, such as planning and preparing meals, money management (personal finances, planning, budgeting and decision making), and laundry. It also includes heavy household chores such as washing floors, windows and walls, securing loose rugs and tiles, moving heavy items or furniture in order to provide safe access and egress, as well as minor repairs such as those which could be completed by a handyman. Heavy household chores and services that can be provided by a handyman are only available when the individual or anyone else in the household is unable to do the service. Services will be provided only in cases where neither the individual, nor anyone else in the household, is capable of performing or financially providing for them, and where no other relative, caregiver, landlord, community/volunteer agency, or third party payer is capable of or responsible for their provision. In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, will be examined prior to any authorization of service. There will be no duplicate billing of homemaker or other similar personal care/assistance service.

6. Support includes the provision of medical and health care services that are integral to meeting the daily needs of the participant (e.g., routine administration of medications or tending to the needs of a participant who is ill or requires attention to medical needs on an ongoing basis.). Medical and health care services such as physician services that are not routinely provided to meet the daily needs of the participant are not provided.

7. Support and training for infant and childcare for participants who are, or will become parents.

Settings where Community Living Supports are provided must have all of the following qualities:

1. The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.
2. The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting.

Self-Determination Program Service Definitions

3. Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
4. Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.
5. Facilitates individual choice regarding services and supports, and who provides them.

In a provider-owned or controlled residential setting, in addition to the qualities specified above, the following additional conditions must be met:

• The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity.

1. Each individual has privacy in their sleeping or living unit:
• Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors.
• Individuals sharing units have a choice of roommates in that setting.
• Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.

2. Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

3. Individuals are able to have visitors of their choosing at any time.

4. The setting is physically accessible to the individual.

5. The unit or dwelling may be shared by no more than four waiver participants.

6. Any modification of the additional conditions specified in items 1 through 4 above, must be supported by a specific assessed need and justified in the individual program plan (IPP). The following requirements must be documented in the (IPP):

• Identify a specific and individualized assessed need.
• Document the positive interventions and supports used prior to any modifications to the IPP.
• Document less intrusive methods of meeting the need that have been tried but did not work.
• Include a clear description of the condition that is directly proportionate to the specific assessed need.

Self-Determination Program Service Definitions

• Include regular collection and review of data to measure the ongoing effectiveness of the modification.
• Include established time limits for periodic reviews to determine if the modification is still necessary or can be terminated.
• Include the informed consent of the individual.
• Include an assurance that interventions and supports will cause no harm to the individual.
Additionally, provider owned or leased facilities where these services are furnished must be compliant with the Americans with Disabilities Act.

The method by which the costs of room and board are excluded from the payment for this service is specified in Appendix I-5.

Financial Management Services

This service assists the family or participant to: (a) manage and direct the disbursement of funds contained in the participant's individual budget, and ensure that the participant has the financial resources to implement his or her Individual Program Plan (IPP) throughout the year; (b) facilitate the employment of service providers by the family or participant, as either the participant's fiscal agent or co-employer, by performing such employer responsibilities including, but not limited to, processing payroll, withholding federal, state, and local tax and making tax payments to appropriate tax authorities; and, (c) performing fiscal accounting and making expenditure reports to the participant or family and others as required.

This service includes the following activities to assist the participant in their role as either the employer or co-employer:
1. Assisting the participant in verifying worker's eligibility for employment and provider qualifications
2. Ensuring service providers employed by the participant meet criminal background checks as required and as requested by the participant.
3. Collecting and processing timesheets of workers.
4. Processing payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance.
5. Tracking, preparing and distributing reports (e.g., expenditure) to appropriate individual(s)/entities.
6. Maintaining all source documentation related to the authorized service(s) and expenditures.
7. Maintaining a separate accounting for each participant's participant-directed funds.
8. Providing the participant and the regional center service coordinator with a monthly individual budget statement that describes the amount of funds allocated by budget category, the amount spent in the previous 30-day period, and the amount of funding that remains available under the participant's individual budget.

Self-Determination Program Service Definitions

9. Ensuring payments do not exceed the amounts outlined in the participant's individual budget.
10. Fulfilling other FMS responsibilities as mandated by local, state and federal laws and regulations.

Homemaker

Services consisting of general household activities (meal preparation and routine household care) provided by an individual that has the requisite skills to perform homemaker duties specified in the participant's IPP when the individual regularly responsible for these activities is temporarily absent or unable to manage the home and care for him or herself or others in the home.

Housing Access Supports

Housing Access Services includes two components:
A) Individual Housing Transition Services. These services are:

1. Conducting a tenant screening and housing assessment that identifies the participant's preferences and barriers related to successful tenancy. The assessment may include collecting information on potential housing transition barriers, and identification of housing retention barriers.
2. Developing an individualized housing support plan based upon the housing assessment that addresses identified barriers, includes short and long-term measurable goals for each issue, establishes the participant's approach to meeting the goal, and identifies when other providers or services, both reimbursed and not reimbursed by Medicaid, may be required to meet the goal.
3. Assisting the individual with the housing application process. Assisting with the housing search process.
4. Assisting the individual with identifying resources to cover set-up fees for utilities or service access, including telephone, electricity, heating and water, and services necessary for the individual's health and safety, consisting of pest eradication and one-time cleaning prior to occupancy.
5. Assisting the individual with coordinating resources to identify and address conditions in the living environment prior to move-in that may compromise the safety of the consumer.
6. Assisting the individual with details of the move including communicating with the landlord to negotiate a move-in date, reading and understanding the terms of the lease, scheduling set-up of utilities and services, and arranging the move of consumers' belongings.
7. Developing a housing support crisis plan that includes prevention and early intervention services when housing is jeopardized.

Self-Determination Program Service Definitions

B) Individual Housing & Tenancy Sustaining Services - This service is made available to support individuals to maintain tenancy once housing is secured. The availability of ongoing housing-related services in addition to other long term services and supports promotes housing success, fosters community integration and inclusion, and develops natural support networks. These tenancy support services are:

1. Providing the individual with early identification and intervention for behaviors that may jeopardize housing, such as late rental payment and other lease violations.
2. Providing the individual with education and training on the role, rights and responsibilities of the tenant and landlord.
3. Coaching the individual on developing and maintaining key relationships with landlords/property managers with a goal of fostering successful tenancy.
4. Assisting the individual in resolving disputes with landlords and/or neighbors to reduce risk of eviction or other adverse action.
5. Providing the individual with advocacy and linkage with community resources to prevent eviction when housing is, or may potentially become jeopardized.
6. Assisting the individual with the housing recertification process.
7. Coordinating with the tenant to review, update and modify their housing support and crisis plan on a regular basis to reflect current needs and address existing or recurring housing retention barriers.
8. Providing the individual with continuous training in being a good tenant and lease compliance, including ongoing support with activities related to household management.

Housing Access Services do not include payment for room and board.

Persons receiving Health Homes or California Community Transitions services will not receive this service unless additional Housing Access through the waiver is necessary to maintain the consumers' health, safety and wellbeing in the home and/or community.

Live-In Caregiver

Live-in caregiver service provides the payment for the additional costs of rent and food that can be reasonably attributed to an unrelated live-in personal caregiver who resides in the same household as the participant. This payment is available only in the case of participants who receive personal care support and live in homes that they rent, lease, or own. A legal guardian may not furnish this service. The way the amount is paid is determined as specified in Appendix I-6. Payment is not made when the participant lives in the caregiver's home or in a residence that is owned or leased by the provider of Medicaid services.

Self-Determination Program Service Definitions

Respite Services

Respite Services are provided to participants who require intermittent temporary supervision. The services are provided on a short-term basis because of the absence or need for relief of those persons who normally care for and/or supervise them and are non-medical in nature, with the exception of colostomy, ileostomy, catheter maintenance, and gastrostomy.

Respite can be any of the following:
1. Services provided by the hour on an episodic basis because of the absence of or need for relief for those persons normally providing the care to individuals.

2. Services provided by the day/overnight on a short-term basis because of the absence of or need for relief for those persons normally providing the care to individuals.

3. Services that attend to the participant's basic self-help needs and other activities of daily living, including interaction, socialization, and continuation of usual daily routines that would ordinarily be performed by those persons who normally care for and/or supervise them.

Respite services may be purchased from qualified agencies or individuals. The participant may employ individual respite workers. In all cases, the IPP must specify the necessary training and skills that such workers or other providers must possess.

Respite Services may be provided in the following locations:
• Private residence.
• Residential facility approved by the State.
• Other community settings that are not a private residence, such as:
• Adult Family Home/Family Teaching Home
• Certified Family Homes for Children
• Adult Day Care Facility
• Camp
• Licensed Preschool
FFP will not be claimed for respite services provided beyond 30 consecutive days in a facility.

Self-Determination Program Service Definitions

Respite Services cannot be provided by the primary care provider or his/her spouse under this definition. Respite providers are required to develop and implement a back-up plan for times when they are scheduled, but are unable to come and provide the services.

Respite Services do not duplicate services provided under the Individuals with Disabilities Education Act (IDEA) of 2004. These services may only be provided when the care and supervision needs of a consumer exceed that of a person of the same age without developmental disabilities and will not be claimed for the cost of room and board except when provided as part of respite care furnished in a facility approved by the State that is not a private residence.

Employment and Community Participation

Community Integration Supports

This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to prepare and support the participant for community participation, interdependence, and independence.

This service supports the full access to engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving these services. In addition, this service assists the participant to learn the skills needed to participate in the community during integrated activities with individuals who are non-disabled.

The participant selects this service from among service options including non-disability specific settings. The service options are based on the participant's individualized needs and preferences.
The participant receives this service in settings that are integrated in and supports full access to the greater community, and allows for participant comfort, interdependence, independence, preferences, and use of any technology. The participant's choices are incorporated into the services and supports and his/her essential personal rights of privacy, dignity and respect, and freedom from coercion are protected. The service settings must allow the participant to control personal resources and his/her schedule and activities. In addition, the settings must allow the participant to receive breaks in the same manner as a non-disabled individual.

Self-Determination Program Service Definitions

Community Integration Supports are provided in the manner specified by the planning team to assist participants with acquisition, retention, or improvement in self-help, socialization and adaptive skills through therapeutic and/or physical activities to achieve the participant's personally defined outcomes. These services and supports may take place in a wide variety of community-based settings that promote community integration. These settings may include those nonresidential settings identified in Appendix C-5, but only if the setting is determined to meet the HCB settings requirements, using the process described in Appendix C-5. Services may be provided on a regularly scheduled basis, for one or more days per week. These services are not provided in the participant's residence.

These services and supports enable the participant to attain or maintain his or her maximum functional level, interdependence, and independence, including the facilitation of connections to community events and activities. In addition, these services and supports may serve to reinforce skills or lessons taught in school, therapy, or other settings, enabling the participant to integrate into the community.
Services and supports to assist the participant to increase and improve self-help, socialization, community integration, and adaptive skills, may include:

a. Socialization and community awareness.
b. Communication skills.
c. Visual, auditory and tactile awareness, and perception experiences.
d. Development of appropriate peer interactions and self-advocacy skills.
e. Art and recreation programs.
f. Continuing Education i.e., classes that help participants explore interests or improve academic skills or complete a high school equivalency (GED) diploma while in an inclusive setting
g. Senior and faith-based groups.
h. Peer mentoring.
i. Mobility services, i.e., the access and use of public transportation or other modes of transportation, including access to peer-to-peer ride sharing.
j. Friendship and relationship building

Self-Determination Program Service Definitions

Employment Supports

This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to prepare and support the participant for community participation, interdependence, independence, and/or community integrated work.
This service supports the full access of participants receiving services in the community to seek employment and work in competitive integrated settings.

The participant selects this service from among service options including non-disability specific settings. The service options are based on the participant's individualized needs and preferences. The participant receives this service in settings that are integrated in and support full access to the greater community, and allows for participant comfort, interdependence, independence, preferences, and use of any technology. The participant's choices are incorporated into the services and supports and his/her essential personal rights of privacy, dignity and respect, and freedom from coercion are protected. The service settings must allow the participant to control personal resources. In addition, the settings must allow the participant to receive breaks in the same manner as a nondisabled individual.

Employment supports are individually designed and provided in the manner specified by the planning team to assist participants to gain and retain employment, including self-employment, in community integrated work environments to achieve the participant's personally defined outcomes. The intended outcome of this service is sustained paid employment at or above minimum wage in an integrated setting in the general workforce, in a job that meets personal career goals. This service does not include payment for supervision training, support and adaptations typically available to other workers without disabilities working in similar positions in the business. These services and supports also include activities related to job discovery, self-employment, and retirement.

The participant may receive any combination of Employment Supports, including:

a. Physical capacities development, i.e., health concerns.
b. Psychomotor skills development.
c. Interpersonal, communicative/social and adaptive skills development, e.g., responding appropriately to supervisors/coworkers.
d. Work habits development, e.g., attendance and punctuality, focusing on tasks.
e. Development of vocationally appropriate dress and grooming.
f. Productive skills development, i.e., the achievement of productivity standards and quality results.

Self-Determination Program Service Definitions

g. Work-practices training, e.g., following directions, completing tasks.
h. Work-related skills development, e.g., problem solving, path planning to future employment opportunities.
i. Money management and income reporting skills.
j. Development and use of natural job supports.
k. Workforce integration techniques.
l. Community integration development/relationship building.
m. Safety skills and training.
n. Job discovery, job-seeking, and interviewing skills.
o. Self-advocacy training, participant counseling, peer vocational counseling, career counseling, and peer club participation.
p. Volunteerism to assist the person in identifying job or career interests.
q. Individualized assessment.
r. Job analysis, job development and placement that produce an appropriate job match for the participant and employer.
s. Direct supervision or training while the participant is engaged in integrated work.
t. Job coaching provided on or off the worksite.
u. Counseling with a participant/family and/or authorized representative to ensure support of the participant in job adjustment or planning for retirement.
v. Counseling on benefits planning to ensure a consumer understands the relationship between earned income and receiving public benefits such as SSI, SSA, Medi-Cal, and PASS Plans.
w. Consultation with employer's Human Relations staff.
x. Assessment of need for technology and facilitating acquisition of communication aides and technology.
y. Job customization, e.g., modifications to work materials, procedures, and protocols.
z. Self-employment and business development, i.e., identification of potential business opportunities, business plan development, identification of needed supports, ongoing assistance and support.

Transportation from the participant's residence to their place of employment is not a component of this service. The above described services and supports cannot be provided when available under a program funded under §110 of the Rehabilitation Act of 1973 (29 U.S.C. 730) or §602(16) and (17) of the Individuals with Disabilities Education Act (IDEA.)(20 U.S.C. 1401 (16 and 17)).

Self-Determination Program Service Definitions

Independent Facilitator

Independent Facilitator means a person, selected and directed by the participant, who is not otherwise providing services to the participant pursuant to his or her IPP. The service or function is intended to assist the participant to plan for and access services to implement needed services identified in the participant's IPP. The services may include, but are not limited to:

1. Participate in the person-centered planning process.
2. Identify immediate and long-term needs, preferences, goals and objectives of the participant for developing the IPP.
3. Make informed decisions about the individual budget.
4. Develop options to meet the identified immediate and long-term needs and access community services and supports specified in the IPP.
5. Advocate on behalf of the participant in the person-centered planning process and development of the IPP, obtaining identified services and supports.

The participant/family may hire, or contract with an IF, and shall specify in the IPP the activities which the IF will conduct. A participant may elect to use his or her regional center service coordinator to fulfill the functions of an IF, instead of contracting with, or using the service of an independent facilitator. This service does not duplicate services provided by the participant's service coordinator.

Individual Training and Education

Individual Training and Education Services includes training programs, workshops and conferences that assist the participant in acquiring and building skills related to his or her responsibility as an employer, relationship building, problem solving and decision making. This service helps the participate acquire skills that facilitate the participant's self-advocacy skills, exercise the participant's human and civil rights, and exercise control and responsibility over their SDP services and supports.

This service includes enrollment fees, books and other resource/reference materials required for participation in the individual training and education, and transportation expenses, excluding airfare, that are necessary to enable participation in the individual training and education. This service does not include the cost of meals or overnight lodging. Individual Training and Education supports needs or goals identified in the participant's IPP.

This service is not provided when funding can be accessed through Public Education as required in IDEA (P.L. 105-17, the IDEA). Prior to accessing funding for this service, all other available and appropriate funding sources, including those

offered by the Departments of Rehabilitation or Education must be explored and exhausted. These efforts must be documented in the participant's file.
This service does not duplicate the activities provided by the Independent Facilitator waiver service or Case Management. Neither case management nor the Independent Facilitator waiver service include the provision of training or the cost of enrollment fees. Furthermore, Independent Facilitator providers may not provide additional services to a participant. The Financial Management Services provider ensures compliance with this requirement.

Non-Medical Transportation

Service offered in order to enable individuals served to gain access to the Self-Determination Program waiver and community services, employment, activities and resources, and participate in community life as specified by their Individual Program Plan. This service is offered in addition to medical transportation required under 42 CFR 431.53 and transportation services under the State plan, defined in 42 CFR 440.170(a) (if applicable), and shall not replace them. Transportation services under the waiver shall be offered in accordance with the individual's plan of care and shall include transportation aides and such other assistance as is necessary to assure the safe transport of the recipient. Private, specialized transportation will be provided to those individuals who cannot safely access and utilize public transportation services (when available). Whenever possible, the use of natural supports, such as family, neighbors, friends, or community agencies which can provide this service without charge will be utilized. All SDP participants will work with a regional center service coordinator and a Financial Management Services provider. Some will choose to also work with an Independent Facilitator. The SDP participant, and one or all of these entities will determine when the use of natural supports, such as family, neighbors, and friends have been exhausted and paid services begin.

Participant-Directed Goods and Services

Participant-Directed Goods and Services consist of services, equipment or supplies not otherwise provided through the SDP Waiver or through the Medicaid State plan that address an identified need in the IPP (including accommodating, improving and maintaining the participant's opportunities for full membership in the community) and meet the following requirements: the item or service would decrease the need for other Medicaid services; promote interdependence, and inclusion in the community; and increase the person's safety in the home environment; and the participant does not have the personal funds to purchase the item or service and the item or service is not available through another funding source. The participant-directed goods and services must be documented in the participant's Individual Program Plan and purchased from the participant's Individual Budget. Experimental or prohibited treatments are excluded.

Self-Determination Program Service Definitions

Prevocational Supports

This service is provided to participants tailored to their specific personal outcomes related to the acquisition, improvement and/or retention of skills and abilities to support and prepare the participant for community participation, interdependence, independence, and/or community integrated work.

The participant selects this service from among service options including non-disability specific settings. The service options are based on the participant's individualized needs and preferences.
The participant receives this service in settings that are integrated in and support full access to the greater community, and allows for participant comfort, interdependence, independence, preferences, and use of any technology. The participant's choices are incorporated into the services and supports and his/her essential personal rights of privacy, dignity and respect, and freedom from coercion are protected. The service settings must allow the participant to control personal resources. In addition, the settings must allow the participant to receive breaks in the same manner as a non-disabled individual.

Prevocational supports are individually designed and provided in the manner specified by the planning team to assist participants to gain employment, including self-employment or volunteer work, in community integrated environments to achieve the participant's personally defined outcomes. These services and supports also include activities related to job discovery, self-employment, and retirement. The intended outcome of this service is to further habilitation goals that will lead to greater opportunities for competitive integrated employment and career advancement at or above minimum wage.

The participant may receive any combination of Prevocational Supports, including:

• Physical capacities development, i.e., health concerns.
• Psychomotor skills development.
• Interpersonal, communicative/social and adaptive skills development, e.g., responding appropriately to supervisors/coworkers.
• Work habits development, e.g., attendance and punctuality, focusing on tasks.
• Development of vocationally appropriate dress and grooming.
• Productive skills development, i.e., the achievement of productivity standards and quality results.
• Work-practices training, e.g., following directions, completing tasks.
• Work-related skills development, e.g., problem solving, path planning to future employment opportunities.

Self-Determination Program Service Definitions

• Money management and income reporting skills.
• Volunteerism to assist the person in identifying job or career interests.

Prevocational supports are designed to prepare individuals in non-job-task-specific strengths and skills that contribute towards obtaining a competitive and integrated employment, as opposed to vocational services whose sole purpose is to provide employment without habilitation goals geared towards skill building.

Transportation from the participant's residence is not a component of this service. The above described services and supports cannot be provided when available under a program funded under §110 of the Rehabilitation Act of 1973 (29 U.S.C. 730) or §602(16) and (17) of the Individuals with Disabilities Education Act (IDEA.)(20 U.S.C. 1401 (16 and 17)).

Technology

Technology is an item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to promote community integration, independence, and increase, maintain, or improve functional capabilities of participants. Allowable technology services, as specified in the participant's IPP include:
1. Evaluation of technology needs of a participant, including a functional evaluation of the impact of the provision of appropriate technology and appropriate services to the participant in the customary environment of the participant;
2. Purchasing, leasing, or otherwise providing for the acquisition of any technology device: cell phones (monthly bill, cell phone apps), iPads, tablets, and laptops. Service includes insurance and training on the use of any technology device.
3. Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing technology devices;
4. Training or technical assistance for the participant, or where appropriate, their family members, guardians, advocates, or authorized representatives of the participant; and
5. Training or technical assistance for professionals or other individuals who provide services to, employ, or are otherwise substantially involved in the major life functions of participant.
Technology may only be purchased under the SDP Waiver if it is not available through the state plan.

Self-Determination Program Service Definitions

Transition/Set Up Expenses: Other Services

Transition/Set Up Expenses are one-time, non-recurring set-up expenses to assist individuals who are transitioning from an institution to their own home in the community. These expenses fund some of the initial set-up costs that are associated with obtaining and securing an adequate living environment and address the individual's health and safety needs when he or she enters a new living environment. "Own home" is defined as any dwelling, including a house, apartment, condominium, trailer, or other lodging that is owned, leased, or rented by the individual. This service includes necessary furnishings, household items and services that an individual needs for successful transition to community living and may include:

• Security deposits that are required to obtain a lease on an apartment or home;
• Moving expenses;
• Health and safety assurances, such as pest eradication, allergen control or one-time cleaning prior to occupancy;
• Set up fees or non-refundable deposits for utilities (telephone, electricity, heating by gas);
• Essential furnishings to occupy and use a community domicile, such as a bed, table, chairs, window blinds, eating utensils, food preparation items, etc.

These services exclude:

• Items designed for diversionary/recreational/entertainment purposes, such as hobby supplies, television, cable TV access, or VCRs and DVDs.
• Room and board, monthly rental or mortgage expense, regular utility charges, household appliances, and food. Items purchased through this service are the property of the individual receiving the service and the individual takes the property with him/her in the event of a move to another residence. Some of these expenses may be incurred before the individual transitions from an institution to the community. In such cases, the Transition/Set Up expenses incurred while the person was institutionalized are not considered complete until the date the individual leaves the institution and is enrolled in the waiver. Transition/Set Up expenses included in the individual's plan of care may be furnished up to 180 days prior to the individual's discharge from an institution. However, such expenses will not be considered complete until the date the individual leaves the institution and is enrolled in the waiver.

Self-Determination Program Service Definitions

Health and Safety

Acupuncture Services

Acupuncture services are covered to prevent, modify, or alleviate the perception of severe, persistent chronic pain resulting from a generally recognized medical condition. Acupuncture is defined in the Business and Professions Code, Section 4927 as “the stimulation of a certain point or points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions, including pain control, for the treatment of certain diseases or dysfunctions of the body and includes the techniques of electroacupuncture, cupping, and moxibustion.” Acupuncture services (with or without electric stimulation of the needles) are limited to two services in any one calendar month, although additional services can be provided based upon medical necessity. All acupuncture services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Acupuncture services in this waiver are only provided to individuals age 21 and over and only when the limits of services furnished under the approved state plan are exhausted.

Behavioral Intervention Services

Behavior intervention services include the use and development of intensive behavioral intervention programs to improve the participant’s development and behavior tracking and analysis. The intervention programs are restricted to generally accepted, evidence-based, positive approaches. Depending on the participant’s needs, behavioral intervention services may be provided in multiple settings, including the participant’s home, workplace, etc. Behavioral intervention services are designed to assist individuals in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. Services may be provided to family members if they are for the benefit of the participant. Services for family members may include training and instruction about treatment regimens, including training on the use of medications, and risk management strategies to enable the family to support the participant.

The participation of parent(s) of minor children is critical to the success of a behavioral intervention plan. The person-centered planning team determines the extent of participation necessary to meet the individual’s needs. "Participation" includes the following meanings: Completion of group instruction on the basics of behavior intervention; Implementation of

intervention strategies, according to the intervention plan; If needed, collection of data on behavioral strategies and submission of that data to the provider for incorporation into progress reports; Participation in any needed clinical meetings; provision of suggested nominal behavior modification materials or community involvement if a reward system is used. If the absence of sufficient participation prevents successful implementation of the behavioral plan, other services will be provided to meet the individual's identified needs.

This service in the HCBS Waiver is only provided to individuals age 21 and over. All medically necessary Behavioral Intervention Services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit.

Chiropractic Service

Chiropractic services include the manual manipulation of the spine to prevent, modify, or alleviate the perception of severe, persistent chronic pain resulting from a generally recognized medical condition. A chiropractor may use all necessary mechanical, hygienic, and sanitary measures incident to the care of the body, including, air, cold, diet, exercise, heat, light, massage, physical culture, rest, ultrasound, water, and physical therapy techniques in the course of chiropractic manipulations and/or adjustments. All medically necessary Chiropractic services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Chiropractic services in this waiver are only provided to individuals age 21 and over and only when the limits of services furnished under the approved state plan are exhausted.

Communication Support

Communication support services includes communication aides necessary to facilitate and assist persons with hearing, speech, or vision impairment, including individuals who do not speak English as their primary language and who have a limited ability to read, write, speak or understand English (Limited English Proficient or LEP skills). The purpose of this service is to assist individuals to effectively communicate with service providers, family, friends, co-workers, and the general public. The following are allowable communication aides, as specified in the participant's IPP:

2. Facilitators;
3. Interpreters and interpreter services;
4. Translators and translator services; and
5. Readers and reading services.

This service also includes supports for the participant to use computer technology to assist in communication. Such supports include training in the use of the technology, assessment of need for ongoing training and support, and identification of resources for the support. This service is limited to personnel providing assistance and does not include

the purchase of equipment or supplies.
Communication support services include evaluation for, and training in the use of, communication aides, including for individuals with LEP skills, as specified in the participant's IPP.

Crisis Intervention and Support

Crisis Intervention and Support is a specialized service that provides short-term care and behavior intervention to provide relief and support of the caregiver and protection for the participant or others living with the participant. This service may include the use and development of intensive behavioral intervention programs to improve the participant's development and behavior tracking and analysis. This service is restricted to generally accepted, evidence-based, positive approaches.

This service is designed to assist participants in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. The service may be provided to family members if they are for the benefit of the participant. The service for family members may include training and instruction about treatment regimens, including training on the use of medications, and risk management strategies to enable the family to support the participant. The participation of parent(s) of minor children is critical to the success of a behavioral intervention program.

The person-centered planning team determines the extent of participation necessary to meet the participant's needs. Crisis Intervention and Support includes mobile crisis intervention in the participant's home, and/or community or where crisis intervention services are needed. Mobile crisis intervention means immediate therapeutic intervention on a 24-hour emergency basis to a participant exhibiting acute personal, social, and/or behavioral problems. Mobile crisis intervention provides immediate and time-limited professional assistance to a participant who is experiencing personal, social or behavioral problems which, if not ameliorated, will escalate and require that the participant be moved to a setting where additional services are available.

As necessary, Crisis Intervention and Support is composed of the following participant-specific activities:
1. Assessment to determine the precipitating factors contributing to the crisis.
2. Development of an intervention plan in coordination with the planning team.
3. Consultation and staff training to the service provider as necessary to ensure successful implementation of the participant's specific intervention plan.
4. Collection of data on behavioral strategies and submission of that data to the caregiver or provider for incorporation into progress reports.

Self-Determination Program Service Definitions

5. Participation in any needed clinical meetings.
6. Development and implementation of a transition plan to aid the participant in returning home if out-of-home crisis intervention was provided.
7. Ongoing technical assistance to the caregiver or provider in the implementation of the intervention plan developed for the participant.
8. Provision of recommendations to prevent or minimize future crisis situations in order to increase the likelihood of maintaining the participant in the community.

Dental Services

Dental services are defined in Title 22, California Code of Regulations, Section 51059 as professional services performed or provided by dentists including diagnosis and treatment of malposed human teeth, of disease or defects of the alveolar process, gums, jaws and associated structures; the use of drugs, anesthetics and physical evaluation; consultations; home, office and institutional calls.

All medically necessary dental services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Dental services in this waiver are only provided to individuals age 21 and over and only when the limits of dental services furnished under the approved state plan are exhausted. Dental services in the approved state plan are limited to $1800 annually or by the amount that is determined medically necessary.

Environmental Accessibility Adaptations

Those physical adaptations to the participant's home, required by the individual's IPP, which are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home, and without which, the individual would be at risk for institutionalization. These services are allowed only when another entity (i.e. landlord) is not responsible for making the needed adaptation(s).
Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems which are necessary to accommodate the medical equipment and supplies which are necessary for the welfare of the individual. Provided that they are allowable, other environmental accessibility adaptations and repairs may be approved on a case-by-case basis as technology changes or as a participant's physical or environmental needs change.
Excluded are those adaptations or improvements to the home which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc.. All services shall be

provided in accordance with applicable State or local building codes.
• It may be necessary to make environmental modifications to an individual's home before he/she transitions from an institution to the community. Such modifications may be made while the person is institutionalized. Environmental modifications, included in the individual's plan of care, may be furnished up to 180 days prior to the individual's discharge from an institution. However, such modifications will not be considered complete until the date the individual leaves the institution and is enrolled in the waiver.

Family/Consumer Training

Family/consumer support and training services are provided, as needed, in conjunction with extended state plan services in this waiver. These services include training by licensed providers to maintain or enhance the long-term impact of treatment provided. This includes support or counseling for the consumer and/or family to ensure proper understanding of the treatment provided and what supports are needed in the recipient's home environment to enhance the treatments. These services will be provided to individuals age 21 and older.

Family Support Services

Regularly provided care and supervision of children, for periods of less than 24 hours per day, while the parents/primary non-paid caregiver are out of the home. This service is provided in the recipient's own home or in an approved out of home location to do all of the following:

1. Assist family members in maintaining the recipient at home;
2. Provide appropriate care and supervision to protect the recipient's safety in the absence of family members;
3. Relieve family members from the constantly demanding responsibility of caring for a recipient; and
4. Attend to the recipient's basic self-help needs and other activities of daily living, including interaction, socialization, and continuation of usual daily routines which would ordinarily be performed by family members.

Payment for family support services may only be made when the cost of the service exceeds the cost of providing services to a person of the same age without disabilities.

Self-Determination Program Service Definitions

Home Health Aide

Home health aide services defined in 42 CFR §440.70 are provided to individuals age 21 and over and only when the limits of home health aide services furnished under the approved State plan limits are exhausted. Home health aide services under the state plan are limited to the amount that is determined medically necessary. All medically necessary home health aide services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. The scope and nature of these services do not differ from home health aide services furnished under the State plan. Services are defined in the same manner as provided in the approved State plan. The provider qualifications specified in the State plan apply.

Lenses and Frames

This service covers prescription lenses and frames for consumers over 21 as prescribed by a physician and only when the limits of prescription lenses and frames furnished under the approved state plan are exhausted. All medically necessary Prescription Lens/Frames for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Prescription Lens/Frames under the state plan are limited to beneficiaries under 21 years old and residents of a nursing home. The provider qualifications listed in the plan will apply, and are hereby incorporated into this waiver request by reference. Prescription lenses and frames will not supplant services available through the approved Medicaid State plan or the EPSDT benefit.

Massage Therapy

Massage Therapy is the scientific manipulation of the soft tissues of the body for the purpose of normalizing those tissues and consists of manual techniques that include applying fixed or movable pressure, holding, and/or causing movement of or to the body. Massage therapy would be provided to a participant as part of an effective continuum of care throughout the course of a medical condition.

Nutritional Consultation

Nutritional consultation includes the provision of consultation and assistance in planning to meet the nutritional and special dietary needs of participants. These services are consultative in nature and do not include specific planning and shopping for, or preparation of meals for participants.

Self-Determination Program Service Definitions

Occupational Therapy

Occupational Therapy services are defined in Title 22, California Code of Regulations, Sections 51085, and 51309 as services designed to restore or improve a person's ability to undertake activities of daily living when those skills are impaired by developmental or psychosocial disabilities, physical illness or advanced age. Occupational therapy includes evaluation, treatment planning, treatment, instruction and consultative services.
All medically necessary occupational therapy services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Occupational therapy in this waiver is only provided to individuals age 21 and over and only when the limits of occupational therapy services furnished under the approved state plan are exhausted. Occupational therapy services in the approved state plan are limited to a maximum of two services in any one calendar month or any combination of two services per month from the following services: audiology, acupuncture, chiropractic, psychology, podiatry, and speech therapy or the amount determined medically necessary.

Optometric/Optician Services

Optometric/Optician Services are defined in Title 22, California Code of Regulations, Sections 51093 and 51090, respectively. Optometric services means any services an optometrist may perform under the laws of this state. Dispensing optician means an individual or firm which fills prescriptions of physicians for prescription lenses and kindred products and fits and adjusts such lenses and spectacle frames. A dispensing optician is also authorized to act on the advice, direction and responsibility of a physician or optometrist in connection with the fitting of a contact lens or contact lenses.

All medically necessary Optometric/Optician services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Optometric/Optician services in this waiver are only provided to individuals age 21 and over and only when the limits of Optometric/Optician services furnished under the approved state plan are exhausted. Optometric/Optician Services under the state plan are limited to one eye exam every 24 months, however, this limit can be exceeded based on medical necessity. The provider qualifications listed in the plan will apply, and are hereby incorporated into this request by reference.

Self-Determination Program Service Definitions

Personal Emergency Response Systems (PERS)

PERS is a 24-hour emergency assistance service which enables the recipient to secure immediate assistance in the event of an emotional, physical, or environmental emergency. PERS are individually designed services to meet the needs and capabilities of the participant and includes training, installation, repair, maintenance, and response needs. The allowable service includes the following:

1. 24-hour answering/paging;
2. Beepers;
3. Med-alert bracelets;
4. Intercoms;
5. Life-lines;
6. Fire/safety devices, such as fire extinguishers and rope ladders;
7. Monitoring services;
8. Light fixture adaptations (blinking lights, etc.);
9. Telephone adaptive devices not available free of charge from the telephone company;
10. Other devices/services designed for emergency assistance.

PERS services are limited to those individuals who have no regular caregiver or companion for periods of time, and who would otherwise require a greater amount of routine supervision. By providing immediate access to assistance, PERS services prevent institutionalization of these individuals and allow them to remain in the community. All Items shall meet applicable standards of manufacture, design, and installation. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealers where possible.

Physical Therapy

Physical Therapy services are defined in Title 22, California Code of Regulations, Sections 51081, and 51309 as services of any bodily condition by the use of physical, chemical, and or other properties of heat, light, water, electricity or sound, and by massage and active, resistive or passive exercise. Physical therapy includes evaluation, treatment planning, treatment, instruction, consultative services, and application of topical medications.
All medically necessary physical therapy services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Physical therapy in this waiver is only provided to individuals age 21 and over and only when the limits of physical therapy services furnished under the approved state plan are exhausted. Physical therapy services in the approved state plan are limited to six month treatments and may be renewed if determined medically necessary.

Self-Determination Program Service Definitions

Psychology Services

Psychology Services are defined in Title 22, California Code of Regulations, Section 51099 as the services of a person trained in the assessment, treatment, prevention, and amelioration of emotional and mental health disorders.

All medically necessary psychology services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Psychology services in this waiver are only provided to individuals age 21 and over and only when the limits of psychology services furnished under the approved state plan are exhausted. The approved state plan limits this service to the amount that is medically necessary.

Skilled Nursing

Services listed in the plan of care which are within the scope of the State's Nurse Practice Act and are provided by a registered professional nurse, or licensed practical or vocational nurse under the supervision of a registered nurse, licensed to practice in the State.

Skilled nursing is only provided to individuals age 21 and over. All medically necessary skilled nursing services for children under the age of 21 are covered in the state plan pursuant to EPSDT benefit. Skilled nursing services will not supplant services available through the approved Medicaid State plan under the home health benefit or the EPSDT benefit.

Specialized Medical Equipment and Supplies

Specialized medical equipment and supplies include: (a) devices, controls, or appliances, specified in the IPP, that enable participants to increase their ability to perform activities of daily living; (b) devices, controls, or appliances that enable the participant to perceive, control, or communicate with the environment in which they live; (c) items necessary for life support or to address physical conditions along with ancillary supplies and equipment necessary to the proper functioning of such items; (d) such other durable and non-durable medical equipment and supplies not available under the State plan that is necessary to address participant functional limitations; and, (e) necessary medical supplies not available under the State plan. The repair, maintenance, installation, and training in the care and use, of these items is also included. Items reimbursed with waiver funds 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, and must meet Underwriter's Laboratory or Federal Communications Commission codes, as applicable. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealer where possible.

Speech, Hearing and Language Services

Speech, Hearing and Language services are defined in Title 22, California Code of Regulations, Sections 51096, 51098, and 51094.1 as speech pathology audiology services, and hearing aids, respectively. Speech pathology services means services for the purpose of identification, measurement and correction or modification of speech, voice or language disorders and conditions, and counseling related to such disorders and conditions. Audiological services means services for the measurement, appraisal, identification and counseling related to hearing and disorders of hearing; the modification of communicative disorders resulting from hearing loss affecting speech, language and auditory behavior; and the recommendation and evaluation of hearing aids. Hearing aid means any aid prescribed for the purpose of aiding or compensating for impaired human hearing loss.

All medically necessary speech, hearing and language services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit. Speech, hearing and language services in this waiver are only provided to individuals age 21 and over and only when the limits of speech, hearing and language services furnished under the approved state plan are exhausted. Speech, hearing and language services in the approved state plan are limited to two services in any one calendar month or any combination of two services per month; Hearing aid benefits are subject to a $1,510 maximum cap per beneficiary per fiscal year or the amount determined medically necessary.

Training and Counseling Services for Unpaid Caregivers

Training and counseling services for individuals who provide unpaid support, training, companionship or supervision to participants. For purposes of this service, "individual" is defined as any person, family member, neighbor, friend, companion or co-worker who provides uncompensated care, training, guidance, companionship or support to a person served on the waiver. This service may not be provided to train paid caregivers. Training includes instruction about services and supports included in the IPP, use of equipment specified in the IPP, and updates as necessary to safely maintain the participant at home. Counseling must be aimed at assisting the unpaid caregiver in meeting the needs of the participant. All training for individuals who provide unpaid support to the participant must be included in the IPP. The service includes the cost of registration and training fees associated with formal instruction in areas relevant to participant

needs identified in the IPP. The costs for travel, meals and overnight lodging to attend a training event or conference are not covered under this service definition. This service does not duplicate the services provided under the waiver service Family/Consumer Training.

Vehicle Modifications and Adaptations

Vehicle adaptations are devices, controls, or services which enable participants to increase their independence, enable them to integrate more fully into the community, and to ensure their health and safety. The repair, maintenance, installation, and training in the care and use of these items are included. Vehicle adaptations must be performed by the adaptive equipment manufacturer's authorized dealer. Repairs to and maintenance of such equipment shall be performed by the manufacturer's authorized dealer where possible.
Vehicle adaptations include, but are not limited to, the following:
1. Door handle replacements;
2. Door widening;
3. Lifting devices;
4. Wheelchair securing devices;
5. Adapted seat devices;
6. Adapted steering, acceleration, signaling, and braking devices; and
7. Handrails and grab bars

Adaptations to vehicles shall be included if, on an individual basis, the cost effectiveness of vehicle adaptations, relative to alternative transportation services, is established. Adaptations to vehicles are limited to vehicles owned by the recipient, or the recipient's family and do not include the purchase of the vehicle itself. The recipient's family includes the recipient's biological parents, adoptive parents, stepparents, siblings, children, spouse, domestic partner (in those jurisdictions in which domestic partners are legally recognized), or a person who is a legal representative of the recipient. Vehicle adaptations will only be provided when they are documented in the individual plan of care and when there is a written assessment by a licensed Physical Therapist or a registered Occupational Therapist. The vehicle may be owned by the participant or a family member with whom he or she lives or has consistent and ongoing contact, who provides primary long-term support to the participant, and who is not a paid provider of such services.

Self-Determination Program
Maximum Financial Management Services (FMS) Rates

FMS Model	Number of Services	Max Rate Per Month
Financial Management Service as Bill Payer	1-3	$50
	4-6	$75
	7+	$100
Participant as Sole Employer	1-2	$110
	3-4	$125
	5+	$150
Participant & Financial Management Service as Co-Employers	1-2	$125
	3-4	$140
	5+	$165

Note: If the Financial Management Service provides payments through more than one of the models above for a participant, then the maximum rate for that participant cannot exceed the highest cost model for the total number of services. For example, if a participant is using five services, and the Financial Management Service is a "bill payer" for two services and a "co-employer" for three services, the maximum rate charged to the participant cannot exceed $165 per month. **In all cases, the participant and Financial Management Service can agree to rates lower than the maximum rates above.**

Tri-Counties Regional Center

Self-Determination Program
Service Provider/Participant Agreement

TEMPLATE

Participant Name _____ UCI Number _____

Birthdate _____

Regional Center Tri-Counties Regional

Center Address _____ Phone _____

Service Provider Name or Company _____

Address _____

Phone _____

List agreed upon services:

_____

_____

_____

Start date of this agreement _____

Days and times of agreed schedule _____

Hours of work per week _____

Rate of pay _____

The service provider and participant agree and acknowledge:

- To provide _____ (hours/days) advance notice to cancel/reschedule appointments.

Tri-Counties Regional Center

- Service provider agrees to accommodate changes in schedule if possible. If this is a permanent change, a new agreement should be created.

- Service provider agrees to provide a report of progress or a brief summary of services provided, if requested. The report or summary should be provided to the participant weekly/monthly/quarterly/every year (circle all that apply).

- When working with an agency or vendor for services, the participant has the right to choose which worker will provide services to them.

- Participant has the right to change service providers at any time.

This agreement will remain in effect until it is cancelled by the participant or the service provider. All parties understand that the participant has voluntarily enrolled in the Self-Determination Program and may decide to leave the program at any time. If the participant exits the Self-Determination Program, this agreement will end. Any changes to this agreement must be made in writing.

_____ _____

Participant Date

_____ _____

Service Provider/Company representative Date

_____ _____

Legal guardian/conservator (if applicable) Date

Received by: Regional Center ☐ Date_____

Received by: FMS ☐ Date_____

My Notes & Next Steps