Supports Coordination

Information from:

A. Application for a §1915(c) Home and Community-Based Services Waiver (Consolidated)
   Appendix D, section 2a: Service Plan Implementation and Monitoring, p. 49-53

B. Application for a §1915(c) Home and Community-Based Services Waiver (PFDS) Appendix D, section 2a: Service Plan Implementation and Monitoring, p. 45-49

This document includes the following information:

- Supports Coordination Service Definition
- Supports Coordination assistance to help participants decide whether to select participant direction of services
- Activities are excluded from Supports Coordination as a billable Waiver service
- Requirements of a Supports Coordination Organization
- Minimum Qualifications for Supports Coordinators who provide services through a Supports Coordination Organization

Service Definition

Supports Coordination is a critical service that involves the primary functions of locating, coordinating, and monitoring needed services and supports for waiver participants.

Locating services and supports consists of assistance to the participant and his or her family in linking, arranging for, and obtaining services specified in an Individual Support Plan (ISP), including needed medical, social, habilitation, education, or other needed community services. Activities included under the locating function include all of the following, in addition to the documentation of activities:

- Participate in the ODP standardized needs assessment process to inform development of the ISP, including any necessary ISP updates;
Facilitate the completion of additional assessments, based on participants’ unique strengths and needs, for planning purposes and ISP development in order to address all areas of needs and the participant’s strengths and preferences;

- Coordinate the development of the ISP;
- Assist the participant in identifying people to serve as part of the ISP team, and offer support to invite other people who may contribute valuable information during the planning process;
- Assist the participant and his or her family in identifying and choosing willing and qualified providers;
- Inform participants about unpaid, informal, generic, and specialized services and supports that are necessary to address the identified needs of the participant and to achieve the outcomes specified in the ISP;
- Provide information to participants on fair hearing rights and assist with fair hearing requests when needed and upon request; and
- Assist participants in gaining access to needed services and entitlements, and to exercise civil rights.

Coordinating consists of development and ongoing management of the ISP in cooperation with the participant, his or her family, members of the ISP team, and providers of service. Activities included under the coordinating function include all of the following, in addition to the documentation of activities:

- Use a person centered planning approach and a team process to develop the participant’s ISP to meet the participant’s needs in the least restrictive manner possible;
- Use information from the ODP standardized needs assessment, as well as any additional assessments completed based on the unique needs of the participant, to develop the ISP to address all of the participant’s needs;
- Periodic review of the ISP with the participant, including update of the ISP at least annually and whenever a participant’s needs change;
- Periodic review of the standardized needs assessment through a face-to-face visit with the participant, at least annually or more frequently based on changes in a participant’s needs, to ensure the assessment is current;
- Coordinate support planning with providers of service to ensure consistency of services;
Coordinate with other program areas as necessary to ensure all areas of the participant’s needs are addressed;
Contact with family, friends, and other community members to coordinate the participant’s natural support network;
Facilitate the resolution of barriers to service delivery and civil rights; and
Disseminate information and support to participants and others who are responsible for planning and implementation of services.

Monitoring consists of ongoing contact with the participant and their family, and oversight, to ensure services are implemented as per the participant’s plan. Activities included under the monitoring function include all of the following, in addition to the documentation of activities:

Monitor the health and welfare of participants through regular contacts at the minimum frequency outlined in Appendix D-2-a of this Waiver;
Monitor ISP implementation through monitoring visits with the participant, at the minimum frequency outlined in Appendix D-2-a of this Waiver;
Visit with the participant’s family, when applicable, and providers of service for monitoring of health and welfare and support plan implementation;
Respond to and assess emergency situations and incidents and assure that appropriate actions are taken to protect the health and welfare of participants;
Evaluate participant progress;
Monitor participant and/or family satisfaction with services;
Arrange for modifications in services and service delivery, as necessary to address the needs of the participant, and modify the ISP accordingly;
Ensure that services are appropriately documented in HCSIS on the ISP;
Work with the authorizing entity regarding the authorization of services;
Communicate the authorization status to ISP team members, as appropriate;
Validate that service objectives and outcomes are consistent with the participant’s needs and desired outcomes;
Advocate for continuity of services, system flexibility and integration, proper utilization of facilities and resources, accessibility, and participant rights; and

Participate in activities related to Independent Monitoring for Quality, such as obtaining consent to participate from the participant, preparing survey information, and follow up activities ("closing the loop").

**Assistance to help participants decide whether to select participant direction of services**

In addition to locating, coordinating, and monitoring, Supports Coordination also includes providing information and assistance in order to help participants decide whether to select participant direction of services, and assistance for participants who opt to direct services. Activities include all of the following, in addition to the documentation of activities:

- Provide participants with information on participant direction, including the potential benefits and risks associated with directing services, during the planning process and upon request;
- Assist with the transition to the participant direction service delivery model if the participant is interested in this model, and ensure continuity of services during transition;
- Assist the participant in designating a surrogate, as desired, as outlined in Appendix E-1-f of this Waiver; and
- Provide support to participants who are directing their services, such as assistance with managing participant-directed services specified in the ISP.

**The following activities are excluded from Supports Coordination as a billable Waiver service:**

- Outreach that occurs before an individual is enrolled in the Waiver;
- Intake for purposes of determining whether an individual has mental retardation and qualifies for Medical Assistance;
- Direct Prevention Services, which are used to reduce the probability of the occurrence of mental retardation resulting from social, emotional, intellectual, or biological disorders;
General information to participants, families, and the public that is not on behalf of a waiver participant;

Travel expenses of the Supports Coordinator may not be billed as a discrete unit of service;

Services otherwise available under Medicaid and Early Intervention;

Services that constitute the administration of foster care programs;

Services that constitute the administration of another non-medical program such as child welfare or child protective services, parole and probation functions, legal services, public guardianship, and special education;

Direct delivery of medical, educational, social, or other services

Delivery of medical treatment and other specialized services including physical or psychological examinations or evaluations;

The actual cost of the direct services other than Supports Coordination that the Supports Coordinator links, arranges, or obtains on behalf of the participant;

Transportation provided to participants to gain access to medical appointments or direct Waiver services other than Supports Coordination;

Representative payee functions;

Conducting Medicaid eligibility certification or recertification, intake processing, Medicaid pre-admission screening for inpatient care, prior authorization for Medicaid services, and Medicaid outreach (methods to inform or persuade individuals to enter into care through the Medicaid system); and

Assistance in locating and/or coordinating burial or other services for a deceased participant.

Supports Coordination services may not duplicate other direct Waiver services.

Supports Coordination services are limited to 200 units per participant per fiscal year. This unit limitation may be waived based on the unique needs of a participant through written approval of the ODP Regional Office.

**A Supports Coordination Organization**

1. [Must be] in compliance with 55 PA Code Chapter 6201.12 (b)(3), (5), (6), (7), and (10)(ii), (iii), and (iv).
2. Function as a conflict free entity. A conflict-free Supports Coordination Organization, for purposes of this service definition, is an independent, separate, or self-contained agency. To be conflict free, an Organization may not provide direct services to individuals with mental retardation. The following are direct services:

- All licensed and unlicensed Mental Retardation residential services provided to individuals with mental retardation;
- All non-residential services provided to individuals with mental retardation, except Supports Coordination and Targeted Service Management, and the administration of Family Driven Support Service funds;
- All services, provided under the Consolidated and Person/Family Directed Support Waivers, to individuals with mental retardation, with the exception of Supports Coordination; and
- All services related to Health Care Quality Units, Independent Monitoring Teams, Intermediary Service Organizations for Waiver participants, and the Statewide Needs Assessment. 3. Board composition may only include a maximum of 25% of members who may have a formal relationship with a direct provider of Consolidated, P/FDS, or MR Base Services other than Supports Coordination or TSM.

4. Has at least one key management or executive personnel who qualify as a Qualified Mental Retardation Professional.

5. Utilizes a 24-hour response system that ensures access to organization personnel for response to emergency situations.

6. Conducts a standard ODP customer satisfaction survey with a representative sample of participants as specified by ODP and takes corrective action based on results.

7. Has an agreement with the local intake entity to ensure consistent referrals of eligible individuals and a smooth transition to the Supports Coordination Organization, unless this function is provided by a unit of the Supports Coordination Organization as a non-covered service.

8. Has a signed Medical Assistance Provider Agreement with ODP.

9. Meets the requirements for operating a not-for-profit, profit, or governmental organization in Pennsylvania.
10. [Has] Commercial General Liability Insurance

11. [Has] Professional Liability Errors and Omissions Insurance

12. [Has] Automobile insurance for all automobiles owned, leased, and/or hired used as a component of the habilitation service

13. [Has] Workers’ Compensation Insurance, when required by Pennsylvania statute

14. Has a process for utilizing the Home and Community Services Information System (HCSIS) to document and perform Supports Coordination activities.

15. Agrees to enter and update provider-related information in HCSIS and PROMISe for the Supports Coordination Organization.

16. Agrees to comply with rate setting and billing requirements for Supports Coordination services, which includes utilizing a process for reconciliation of claims and rebilling.

17. Accepts the current Supports Coordination reimbursement rate as payment in full, and will not charge the individual or any other public funding source for Supports Coordination services.

18. Has a signed standard Waiver Provider Contract with the applicable Administrative Entity(ies) until June 30, 2009 as per the current AE Operating Agreement.

19. Complies with HIPAA.

20. Cooperates with provider monitoring conducted by the applicable Administrative Entity(ies) or ODP or its agents.

21. Cooperates with and assists, as needed, ODP and any state and federal agency charged with the duty of identifying, investigating, sanctioning, or prosecuting Medicaid fraud and abuse.

22. Has a process to review the utilization of Supports Coordination services.
23. Has a Quality Management strategy consistent with the approved waiver.

24. Complies with the ODP Incident Management policy.

25. Complies with all applicable ODP policy bulletins.

26. Agrees to immediately notify the applicable administrative entity(ies) and ODP in writing of any noncompliance or failure to meet any of these qualification criteria.

27. Cooperates with Health Care Quality Units, independent monitoring teams, and other external monitoring conducted by ODP business agents.

28. Agrees to commit to transition planning in the event of termination by the Supports Coordination Organization or termination of qualification by ODP.

**Minimum Qualifications for Supports Coordinators who provide services through a Supports Coordination Organization:**


2. Effective January 1, 2008, Supports Coordinators and Supports Coordinator Supervisors with a caseload receive a minimum of 40 hours of training each calendar year, comprised of the required annual ODP-sponsored training sessions and local training.

3. Effective January 1, 2008, Supports Coordinator Supervisors without a caseload receive the required annual ODP-sponsored training.

4. Supports Coordinators conduct monitoring at the minimum frequency requirements outlined in D-2-a of this Waiver.

5. Supports Coordinators and Supports Coordinator Supervisors with a caseload meet the following minimum requirements:
   - Have criminal background check that complies with 6 Pa Code Chapter 15;
   - Have child abuse clearances under Act 33 and Act 73; and
- Meet the following minimum educational and experience requirements:
  - A bachelor’s degree, which includes or is supplemented by at least 12 college credits in sociology, social welfare, psychology, gerontology, criminal justice, or other related social science; or
  
  ii. Two years experience as a County Social Service Aide 3* and two years of college level course work, which include at least 12 college credits in sociology, social welfare, psychology, gerontology, criminal justice, or other related social service; or
  
  iii. Any equivalent combination of experience and training which includes 12 college credits in sociology, social welfare, psychology, gerontology, criminal justice, or other related social service and one year of experience as a County Social Services Aide 3 or similar position performing paraprofessional case management functions.

*The nature of the work and job requirements for County Social Service Aide 3 positions can be found at www.scsc.state.pa.us.