

Attachment 1

1. **Adaptive aids** are controls or appliances that cannot be obtained through Wisconsin's approved MA State Plan. They are aids that enable persons to increase their abilities to perform activities of daily living or control the environment in which they live (including patient lifts, control switches, etc.). Adaptive aids are also services and material benefits that enable individuals to access, participate and function in their community. These include the purchase of vehicle modifications (such as van lifts, hand controls, equipment modifications etc. that allow the vehicle to be used by the participant to access the community), or those costs associated with the maintenance of these items.
2. **Adult day care services** are the provision of services for part of a day in a non-residential group setting to adults who need an enriched social or health-supportive experience or who need assistance with activities of daily living, supervision and/or protection. Services may include personal care and supervision, light meals, medical care, transportation to and from the day care site. Transportation between the individual's place of residence and the adult day health center may be provided as a component part of adult day health services. The cost of this transportation is included in the rate paid to providers of adult day health services.
3. **Care/case management services** (sometimes called support and service coordination) are provided by an interdisciplinary care management team (IDT). The participant is the center of the IDT. The IDT consists of, at minimum, a registered nurse and a social services coordinator, and may also include other professionals as appropriate to the needs of the participant and family or other informal supports requested by the participant. The IDT initiates and oversees the initial comprehensive assessment process and reassessment process, the results of which are used in developing the individual's participant-centered plan of care. The IDT identifies the participant's preferred outcomes and the services needed to achieve those outcomes and monitors the participant's health and welfare, the delivery of services, and progress in achieving identified outcomes. The IDT also carries out activities that help participants and their families identify other service needs and gain access to medical, social, rehabilitation, vocational, educational and other services identified.
4. **Communication aids** are devices or services needed to assist with hearing, speech or vision impairments in order to access and deliver services. These services assist the individual to effectively communicate with service providers, family, friends and the general public, decrease reliance on paid staff, increase personal safety, enhance independence, and improve social and emotional well-being. Communication aids include: communicators, speech amplifiers, aids and assertive devices, interpreters (as specified below), and cognitive retraining aids, (including repair) and are items not covered under the Medicaid state plan.

Interpreter services are usually considered, and should be reported as, an administrative expense.

Interpreter services may be considered services under communication aids only when the interpreter service is needed to assist the individual to participate in community activities that are authorized by the interdisciplinary team as part of the member's individualized service plan, and interpreter services are not otherwise available (e.g., any public and private organizations provide interpreter services upon request).

Communication aids does not include interpreter services:

- Needed to facilitate communication with MCO staff, in which case the interpreter service is an administrative cost of the MCO;
- Needed to facilitate communication with any subcontracted service provider, in which case the interpreter service is an administrative cost of the subcontracted service provider that may be included in the rate the MCO pays the provider; or

- Needed to facilitate communication with any Medicaid State Plan service provider, in which case the Medicaid State Plan service provider is expected to provide the interpreter service as an administrative cost under the rate paid by Medicaid.

5. **Consumer-directed supports** – called “self-directed supports” (SDS) in Family Care – is the provision of a flexible array of services provided to participants that include a specified portion of the participant’s authorized waiver services. This particular service includes only the cost of a service broker if the consumer chooses that assistance. Service brokers are subject to criminal background checks and must be independent of any other waiver service provider.

The cost of any direct services authorized and obtained by a consumer through an SDS plan is reported under the appropriate service definition. The cost of fiscal agent and other supportive services are provided and reported as financial management services. Care management services the MCO is required to provide to all members is excluded.

Each MCO must have a SDS plan, approved by the State. An approved MCO SDS plan will ensure that SDS is implemented through processes characterized by:

- Support for the consumer and those close to the consumer to assist in identifying the consumer’s desired outcomes and the means of achieving those outcomes, in a manner that reflects consumer preferences as closely as possible.
- Planning that occurs within the limits of an individualized budget that is based on typical service costs for waiver participants with similar needs in similar situations.
- An emphasis on identifying and strengthening networks of informal supports and on making use of generic community resources to the maximum extent possible.
- Identification of how participants will be supported in service planning, implementation, and how the participant’s SDS plan will be monitored to ensure participant health and welfare, including ensuring that SDS services are provided by individuals or entities that are qualified to meet the unique needs and preferences of the participant.

6. **Consumer education and training** are designed to help a person with a disability develop self advocacy skills, exercise civil rights, and acquire skills needed to exercise control and responsibility over other support services. Includes education and training for participants, their caregivers and/or legal representatives that is directly related to building or acquiring the skills described above. Excludes educationally related services available under IDEA or other relevant funding sources. Excludes education/training costs exceeding \$2500 per participant annually. Excludes payment for hotel and meal expenses while participants, or their legal representatives attend allowable training/education events. Local agencies will assure that information about educational and/or training opportunities is made available to participants and their caregivers and legal representatives.

7. **Counseling and therapeutic resources** are services that are needed to treat a personal, social, behavioral, cognitive, mental or alcohol or drug abuse disorder. Services are usually provided in a natural setting or service office. Services include: counseling to assist in understanding capabilities and limitations or assist in the alleviation of problems of adjustment and interpersonal relationships, recreational therapy, music therapy, nutritional counseling, medical and legal counseling, and grief counseling.

8. **Financial management services** are the provision of services to assist waiver participants and their families to manage service dollars or manage their personal finances. This service includes a person or agency paying service providers after the participant, guardian or family authorizes payment to be made for services included in the participant’s approved individualized service plan. Financial Management Services

providers, sometimes referred to as fiscal intermediaries, are organizations or individuals that write checks to pay bills for personnel costs, tax withholding, worker's compensation, health insurance and other taxes and benefits appropriate for the specific provider consistent with the individual's ISP or budget for services. Financial management services are purchased directly by the MCO and made available to the participant/family to insure that appropriate compensation is paid to providers of services. Also includes the provision of assistance to waiver participants who are unable to manage their own personal funds to assist them manage their personal resources. Includes assistance to the participant to effectively budget the participant's personal funds to ensure sufficient resources are available for housing, board and other essential costs. The costs of the housing and board are not covered by the waiver. Includes paying bills authorized by the participant or their guardian, keeping an account of disbursements and assisting the participant ensure that sufficient funds are available for needs. This service is necessary to prevent institutionalization. Excludes payments to court appointed guardians or court appointed protective payees if the court has directed them to perform any of these functions.

9. **Habilitation** is the delivery of services 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. Transportation may be provided between the individual's place of residence and the site of the habilitation services or between habilitation sites (in cases where the individual receives habilitation services in more than one place) as a component part of habilitation services. The cost of this transportation is included in the rate paid to providers of the appropriate type of habilitation services. Habilitation includes:
- a) **Daily living skills training** is the provision of training in activities of daily living such as child-rearing skills, money management, home care maintenance, food preparation and accessing and using community resources. Daily living skills training are provided in a residential setting and are intended to improve the participant's ability to perform routine daily living tasks, improve ability to utilize greater independence by either training the participant or the caregiver to perform activities with greater independence.
 - b) **Day center service/treatment** is the provision of regularly scheduled activities in a non-residential setting (day center) to enhance social development and to develop skills in performing activities of daily living and community living. Day services include services primarily intended for disabled adults. Transportation may be provided between the individual's place of residence and the site of the habilitation services or between habilitation sites (in cases where the individual receives habilitation services in more than one place) as a component part of habilitation services. The cost of this transportation is included in the rate paid to providers of the appropriate type of habilitation services. Day center services may be provided to supplement, but may not duplicate services provided under vocational futures planning provided under the waiver.
 - c) **Day services for children** are the provision of services that provide children with regularly scheduled activities for part of the day. Services include training, coordination and intervention directed at skill development and maintenance, physical health promotion and maintenance, language development, cognitive development, socialization, social and community integration and domestic and economic management. This includes services not otherwise available through public education programs that provide after school supervision, daytime services when school is not in session, and services to pre-school age children. Services are typically provided up to five days per week in a non-residential setting and may occur in a single physical environment or in multiple environments, including natural settings in the community. Training activities may involve children and their families. Coordination activities may involve the implementation of components of the child's family-centered and individualized service plans and may involve family, professionals, and others involved with the child as directed by the child's plan. Day Services for children also include the provision of supplementary staffing necessary to meet the child's exceptional care needs. Day Services for children also include the provision of supplementary staffing necessary to meet the child's exceptional care needs. Excludes any services

available through public education programs. Excludes the basic cost of day care unrelated to a child's disability (i.e., the rate paid for children who do not have special needs). Excludes any service that falls under the definition of daily living skills training, prevocational services, or respite care. Excludes services provided to children under the age of 17 years and 9 months.

For children with physical or personal care needs, the types of activities that may be applied include direct personal care provision beyond those age activities expected for a child, skilled tasks such as tube or gavage feedings, catheterization, close supervision and monitoring of a child with complex medical needs, follow through on specific therapeutic interventions, and frequent positioning or specialized skin care.

Providers are required to have criminal background checks and specialized training related to the child's unique needs in order to effectively address the needs and to ensure the health safety and welfare of each child served. If these unique needs are generally related to physical, medical and personal care the provider is responsible for implementing specific activities or treatments as outlined in a medical plan of care.

- d) **Prevocational services** is the provision of services intended to prepare an individual for paid or unpaid employment but which are not job task oriented. Services include teaching an individual such concepts as following directions, attending to tasks, task completion problem solving, safety and mobility training. Prevocational services furnished under the waiver are not available under a program funded under section 110 of the Rehabilitation Act of 1973 or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)). Prevocational services may be provided to supplement, but may not duplicate services provided under vocational futures planning provided under the waiver. Transportation may be provided between the individual's place of residence and the site of the habilitation services or between habilitation sites (in cases where the individual receives habilitation services in more than one place) as a component part of habilitation services. The cost of this transportation is included in the rate paid to providers of the appropriate type of habilitation services.
- e) **Supported employment services** is the provision of support to maintain paid, competitive employment in an integrated work setting to individuals who, because of their disabilities, need intensive on-going support to perform in a work setting. Supported employment services include supervision, training, transportation services needed to provide intensive ongoing support, and any activity needed to sustain paid work by the participant, i.e., supported employment assessment, supported employment job placement, supported employment training, and supported employment follow-up. Supported employment services furnished under the waiver are not available under a program funded by either the Rehabilitation Act of 1973 or P.L. 94-142. Supported employment services may be provided to supplement, but may not duplicate services provided under vocational futures planning provided under the waiver.
- f) **Vocational futures planning (VFP)** is a consumer-directed, team based comprehensive employment service that supports waiver program participants to obtain, maintain or advance in employment. The agency providing vocational futures planning services will ensure that it includes: identification of the barriers to work, including an assistive technology pre-screen and, if required, an in-depth comprehensive assessment; benefits analysis; resource team coordination; career exploration; job seeking support; and ongoing support. Vocational futures planning must be done by a team of qualified professionals that includes, at a minimum, an employment specialist, a benefits counselor and an assistive technology consultant. Vocational futures planning furnished under the waiver are not available under a program funded under section 110 of the Rehabilitation Act of 1973 or section 602 (61) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401 (16 and 17)). When this service is provided the member record must contain activity reports, completed by the VFP Team and filed within thirty (30) days of completing each of the six required activities, and monthly ongoing support reports

from the VFP Team. Vocational futures planning excludes services that could be provided as supported employment or prevocational sheltered employment and work activity services.

10. **Home delivered meals** or "meals on wheels" include the costs associated with the purchase and planning of food, supplies, equipment, labor and transportation to deliver one or two meals a day to recipients who are unable to prepare or obtain nourishing meals without assistance. This service will be provided to persons in natural or supportive service settings to promote socialization and adequate nutrition.
11. **Home modifications** are services and items that assess the need for, arrange for and provide modifications and or improvements to a participant's living quarters to allow for community living, provide safe access to and within the home, reduce the risk of injury, facilitate independence and self-reliance, allow the individual to perform more ADLs or IADLs with less assistance and decrease reliance on paid staff. Home modifications must be necessary to increase self-reliance and independence, or to ensure safe, accessible means of ingress/ egress to a participant's living quarters, or to otherwise provide safe access to rooms, facilities or equipment within the participant's living quarters, or adjacent buildings that are part of the residence. Home modifications may include ramps; stair lifts, wheelchair lifts, or other mechanical devices to lift persons with impaired mobility from one vertical level to another; kitchen/bathroom modifications; specialized accessibility/safety adaptations; voice-activated, light-activated, motion-activated and electronic devices that increase the participant's self-reliance and capacity to function independently. Modifications which increase the square footage, or that enhance the general livability and value, of a privately owned residence are excluded.
12. **Housing counseling** is a service which provides assistance to a recipient when acquiring housing in the community, where ownership or rental of housing is separate from service provision. The purpose of the housing counseling is to promote consumer choice and control of housing and access to housing that is affordable and promotes community inclusion. Housing counseling includes exploring both home ownership and rental options, and both individual and shared housing situations, including situations where the individual lives with his or her family. Services include counseling and assistance in identifying housing options, identifying financial resources and determining affordability, identifying preferences of location and type of housing, identifying accessibility and modification needs, locating available housing, identifying and assisting in access to housing financing, and planning for ongoing management and maintenance. A qualified provider must be an agency or unit of an agency that provides Housing Counseling as a regular part of its mission. Counseling must be provided by staff with specialized training and experience in housing issues and shall be available to anyone in the general public who needs assistance with housing. Waiver funds may not be used to purchase this service if it is otherwise provided free to the general public. Excludes reimbursement if this service is provided by an agency that also provides residential support services or support/service coordination to the waiver participant. Excludes funding for physical alterations of a person's home to address accessibility, which are included under Home Modifications. Excludes funds to pay for items necessary for housing start up expenses, which are include under Relocation Services.
13. **Personal emergency response system (PERS)** is a device which provides a direct telephonic or other electronic communications link between someone living in the community and health professionals to secure immediate assistance in the event of a physical, emotional or environmental emergency.
14. **Relocation services** includes the payment of certain costs associated with relocation from an institution (any nursing facility including nursing homes, the State centers for developmentally disabled individuals or an ICF-MR). Costs may include the initial fees to establish utility service and the purchase of essential items and services needed to establish a community living arrangement. Relocation related housing start up services includes person-specific services, supports or goods that may be arranged, scheduled, contracted or purchased, and that will be put in place in preparation for the participant's relocation to a safe, accessible community living arrangement. There is no institutional length of stay requirement that must be met in order to access this service. Services may be provided up to 180 days prior to discharge. May include payment of

initial utility (heating, electric, water and telephone) connection costs and or fees; the purchase of essential home furnishings, such as necessary basic furniture and kitchen appliances not furnished in the housing arrangement; telephone(s), cooking/ serving utensils, basic cleaning equipment and household supplies as well as basic bathroom and bedroom furnishings; payment of a security deposit; services to move personal belongings and to prepare the selected community living arrangement, including general cleaning and the organization of household supplies and furnishings. Excludes purchase of food, the payment of rent, or the purchase of leisure or recreational devices or services (e.g., television or video equipment, cable or satellite service, etc); and excludes the use of waiver funds to purchase service agreements or extended warranties for appliances or any other home furnishings. Criminal, caregiver and licensing background checks are required for providers of relocation services who meet the definition of a caregiver.

15. **Residential Care.** Nursing services under the following residential services are provided in accordance with the standards of Wisconsin's Nurse Practice Act.

- a) **Adult family homes for 1-2 beds** are residences in which the owner of the residence provides care and maintenance above the level of room and board, but not including nursing care to one or two residents.
- b) **Adult family homes for 3-4 beds** are small congregate care settings where 3-4 adults who are not related to the operator reside and receive care, treatment, support, supervision and training that is provided as needed for support in one or more aspects of living such as: health care, personal care, supervision, behavior and social supports, daily living skills training and transportation when transportation is part of providing the services and that may include several hours per week of nursing care per resident. Room and board costs are not included in the services the person receives.
- c) **Children's foster homes/treatment foster homes** are family oriented residences operated by a person licensed under s.48.62 Wis. Stats. and HFS 56 Wis. Adm. Code as a foster home or residences operated by a provider licensed under HFS 38 Wis. Adm. Code as a treatment foster home. Children's foster homes and treatment foster homes provide care and maintenance for no more than four foster children, with exceptions for more children if all the foster children are siblings. Services provided by these homes are for children who need support in one or more aspects of their lives including : health care, personal care, supervision, behavior and social supports, daily living skills training, and transportation.

Excludes the cost of room and board provided by the foster home provider. Excludes the cost of basic support and supervision provided by the foster care provider. Excludes home modifications, adaptive equipment or communication aids.

Excludes services provided to children under the age of 17 years and 9 months.

Includes supplementary intensive supports and supervision services to address exceptional physical or personal care needs. Examples to illustrate the range and scope of children's exceptional physical or personal care needs include: uncontrolled seizures; orthotic devices or appliances for drainage, a colostomy, or other similar device; requires direct assistance with personal cares, exhibits eating or feeding problems including tube or gavage feedings, requires specialized skin and positioning care to treat or prevent serious skin conditions such as pressure sores, requires follow-through on a therapy plan in excess of 2 hours per day, requires persistent monitoring of complex medical needs, or is non-ambulatory.

For children with physical or personal care needs, the types of activities that may be applied include direct personal care provision beyond those age activities expected for a child, skilled tasks such as tube or gavage feedings, catheterization, close supervision and monitoring of a child with complex medical needs, follow through on specific therapeutic interventions, and frequent positioning or specialized skin care.

Providers are required to have specialized training related to the child's unique needs in order to effectively address the needs of each child served in a particular home and to ensure their health, safety and welfare. If these unique needs are generally related to physical, medical and personal care the provider is responsible for implementing specific activities or treatments as outlined in a medical plan of care.

- d) **Community-based residential facilities (CBRF)** are larger congregate care settings where 5 or more adults who are not related to the operator or administrator reside and receive care, treatment, support, supervision and training that is provided as needed for support in one or more aspects of living such as: health care, personal care, supervision, behavior and social supports, daily living skills training and transportation when transportation is part of providing the services and that may include several hours per week of nursing care per resident. Room and board costs are not included in the services the person receives.

For persons with developmental disabilities, a variance must be obtained from the Department of Health and Family Services for the individuals on the waiver to live in a CBRF. Variances will be granted only for facilities with 5 to 8 beds.

For elders and persons with physical disabilities no bed size limit is imposed because FHFS has determined that, although bed size has historically been used as a proxy for whether a facility is really "community-based," the interdisciplinary case management team which includes the consumer, can more effectively monitor the nature and quality of facilities, rather than continuing to administratively impose bed size limits. Among the factors to be considered in such monitoring is the importance of privacy to the individual consumer and in larger facilities the extent to which the consumer's "residence" is physically separated from that of others (e.g. separate lockable door, bathroom, kitchen facilities etc.). Each MCO network is required to include facilities that offer such physical separateness in various residential service settings including CBRFs, adult family homes, RCACs and nursing homes.

- e) **Residential care apartment complexes (RCAC)** are services provided in a homelike, community-based setting where 5 or more adults reside in their own living units that are separate and distinct from each other. Persons who reside in the facility also receive the following services: supportive services, personal assistance, nursing services, and assistance in the event of an emergency.

16. **Respite care services** are services provided to a waiver eligible participant on a short-term basis to relieve the participant's family or other primary caregiver(s) from daily stress and care demands. Respite care may be provided in an institution such as a certified Medicaid setting (hospital, nursing home) or other licensed facility. Respite care may also be provided in a residential facility such as a certified or licensed Adult Family Home, licensed CBRF, Child Caring Institution, children's foster home, children's treatment foster home, children's group home, certified Residential Care Apartment Complex, in the participant's own home or the home of a certified respite care provider. FFP 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 or a residential care apartment complex.

17. **Specialized medical equipment and supplies** are those items necessary to maintain the participant's health, manage a medical or physical condition, improve functioning or enhance independence. Items or devices provided may be in excess of the quantity of medical equipment or supplies covered under the Medicaid state plan when coverage of the additional items or devices has been denied. Items or devices provided must be of direct medical or remedial benefit to the participant. Allowable items devices or supplies may include incontinence supplies, wound dressings, IV or life support equipment, orthotics, nutritional supplements, vitamins, over the counter medications and skin conditioning lotions/lubricants. Additionally allowable items may include books and other therapy aids that are designed to augment a

professional therapy or treatment plan. Room air conditioners, humidifiers and water treatment systems may be allowable when needed to support a participant's health and safety outcomes. Excludes separate additional charges for shipping, handling, mailing or delivery of items.

18. **Specialized transportation services** assist in improving an individual's general mobility and ability to perform tasks independently and to gain access to waiver and other community services, activities and resources. Services can consist of material benefits such as tickets or other fare medium needed as well as direct conveyance of participants and their attendants to destinations.
19. **Supportive home care (SHC) services** are services to provide necessary assistance for eligible persons in order to meet their daily living needs and to insure adequate functioning at home, in small integrated alternate care settings and in the community. Supportive home care services differ from the State plan services in that they are monitored by case managers and provide services as indicated in a plan of care. Services include:
- a) Intermittent major household tasks that must be performed seasonally or in response to some natural or other periodic event. They include: outdoor activities such as yard work and snow shoveling; indoor activities such as window washing, cleaning of attics and basements, cleaning of carpets, rugs and drapery, and refrigerator/freezer defrosting; and the necessary cleaning of vehicles, wheelchairs and other adaptive equipment and home modifications such as ramps.
 - b) Hands-on assistance with activities of daily living such as dressing/undressing, bathing, feeding, toileting, assistance with ambulation (including the use of a walker, cane, etc.), care of hair and care of teeth or dentures. Can also include preparation and cleaning of areas used during personal care activities such as the bathroom and kitchen.
 - c) Routine housecleaning and housekeeping activities performed for a participant that are not associated with the provision of personal care services. Routine home care consists of housework tasks that take place on a daily, weekly or other regular basis, including: washing dishes, laundry, dusting, vacuuming, meal preparation and shopping for food (where no feeding of the participant is involved); other shopping and similar activities that do not involve hands-on care of the participant.
 - d) Services that provide observation of the participant to assure safety, oversight direction of the participant to complete activities of daily living, instrumental activities of daily living, or companionship for the participant (does not include hands-on care as provided under personal care).

Providers may be members of the individual's family. Family members must meet the same standards as other supportive home care providers.

- e) Skilled nursing services identified as needed in a participant's plan of care, but that exceed the level of services that have been prior authorized for or are otherwise unavailable to the participant under the state plan.