

# TCM Affiliate Meeting

## 01.05.17

**Present:** Lisa Frazier, SDCMS; Tim Gorton, SLI; Cheryl Davenport, CDDO; Tracey Herman, TARC; Adrian Rivera, CDDO; Robert Smith, CDDO; Nancy Rhone, CDDO; Paula O'Brian, CDDO; Ann Barr, TARC; Minerva Michael, TARC; Billie Padilla, CDDO

### **CDDO Updates:**

- BCI passwords will be changing to meet specific criteria. Cheryl will send out an email and post on BCI when the change occurs.
- Discussion regarding the Crisis and Exception Policy (handout) effective Jan. 1, 2017. It was recommended that when you are submitting a Crisis Request or Exception Request make sure that an Assessment has been done within the last 365 days. If not, schedule an Assessment at the same time of submitting the request.
- The CDDO has been participating in a workgroup regarding Capacity. A survey was sent out in December. The CDDOs hope to capture the concerns and let the State know The concerns and issues. If you have any feedback, please email Robert Smith at [rsmith@sncddo.org](mailto:rsmith@sncddo.org).
- Assessments – Please remind providers and parents of documentation needed at the time of the Assessment. The CDDO will be sending out an official notification of the supporting documentation needed at the time of the Assessment soon.
- The CDDO will resume PAS Tool and Needs Assessment training in 2017.
- TCM Review will occur in 2017.
- The Council of Community Members is looking for persons served, parent and/or guardian and providers. Nomination form attached. If you know of anyone that would be interested email Coleen Hernandez at [chernandez@sncddo.org](mailto:chernandez@sncddo.org)

### **Guest Speaker:**

Jo Mach, Finding My Way books.

Jo is in her sixth year of writing books in collaboration with Vera Lynne Stroup-Rentier and Photographer Mary Birdsell. Jo was an Occupational Therapist for 17 years in TARC Children's Services. The books are true stories based on individuals. They are also available in Spanish.

There was a discussion on starting a book club.

Jo is working on writing a grant to provide agencies with books if there is an interest. The books can be purchased through Amazon or visit their website [www.findingmywaybooks.com](http://www.findingmywaybooks.com)

### **Upcoming:**

TARC training Room – Council of Community Member - Jan. 18 - Noon-1 pm

TARC Boardroom KDADS/CDDO/Stakeholder Call - Jan. 19 - 9:30 am-Noon

The next meeting is Thursday, March 2, 2017 at 3 pm.



<b>Policy Name:</b>	Crisis and Exception Policy	<b>Policy Number:</b>	E2016-119
<b>Division:</b>	Community Services and Programs Commission	<b>Date Established:</b>	1/1/2014
<b>Applicability:</b>	HCBS- IDD Program	<b>Date Last Revised:</b>	11/21/2016
<b>Contact:</b>	HCBS-IDD Program Manager	<b>Date Effective:</b>	01/01/2017
<b>Policy Location:</b>	<a href="https://www.kdads.ks.gov/commissions/home-community-based-services-(hcbs)/hcbs-policies">https://www.kdads.ks.gov/commissions/home-community-based-services-(hcbs)/hcbs-policies</a>	<b>Date Posted:</b>	11/22/2016
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**Purpose**

Formally establish the processes and procedures concerning crisis and exception requests for the Home and Community Based Services (HCBS) Intellectual/Developmental Disability (IDD) waiver program.

**Summary**

This policy provides clarification on the established criteria for the crisis and exception process for persons eligible for HCBS-IDD services. The policy establishes processes and procedures for submitting, managing and determining crisis and exception requests and to ensure access to the waiver program services that best meet the assessed needs of the individual.

**ENTITIES AFFECTED BY THIS POLICY**

- Kansas Department of Aging and Disability Services (KDADS)
- Managed Care Organizations (MCOs)
- Community Developmental Disability Organizations (CDDOs)
- HCBS-IDD Beneficiaries

**Policy**

**1. General**

- A. All persons requesting access to HCBS-IDD waiver program services must meet IDD eligibility determination standards and functional eligibility requirements.
- B. All requests for crisis or exceptions to the HCBS-IDD waitlist will be made through the CDDO in the area which they reside.
- C. All crisis and exception requests will be uploaded into the KDADS' "IDD Utility Upload" tool.

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D. Prior to submission of a crisis or exception request, the person must have a current functional eligibility assessment performed within the past 365 days. If the person requesting crisis has a functional eligibility assessment greater than 365 days, a functional eligibility assessment shall be performed prior to the crisis or exception request submission.

## 2. Crisis Requests and Required Documentation

- A. The person requesting access to HCBS-IDD waiver program services, who is in crisis or imminent risk of crisis, may submit a crisis request for review based on the process provided in this policy.
- B. Persons shall be determined to be in crisis under the following conditions:
1. Documentation from law enforcement or DCF supporting the need for the person's protection from confirmed abuse, neglect, or exploitation (ANE);
  2. Documentation substantiating the person is at significant, imminent risk, and is capable of performing serious harm to self or others.
- C. CDDOS are responsible for providing all supporting documentation necessary to render a determination for a crisis request. This documentation includes but is not limited to the following:
1. CDDO Notification form;
  2. Person centered support plan (PCSP) which demonstrates need;
    - a. If the person requesting services does not currently have a PCSP, a PCSP shall be completed within 30 days of approval for waiver access.
  3. Behavior assessment, behavior support plan or behavior management plan as applicable;
  4. Law enforcement or Department of Children and Families (DCF) documentation for requests based on ANE;
    - a. Documentation on ANE substantiated by DCF will be provided to the appropriate CDDO by KDADS Program Integrity.
  5. CDDO crisis review documentation from the CDDO crisis review committee;
  6. Documentation that community resources have been exhausted prior to submission of crisis to KDADS;
  7. Consumer/consumer representative's signature of consent for crisis request;

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8. Any documentation available from the MCO (if applicable) pertinent to rendering a determination for a crisis request.

### 3. Exception Requests

A. Exceptions may be provided to persons in the following situations:

1. Persons in the custody of the Department of Children and Families (DCF) may access I/DD waiver program services for the purpose of addressing non-supervision support needs related specifically to a person's I/DD diagnosis. In the event services are provided, the services shall not duplicate services already being provided, or services that should be provided, by the foster parent;
2. Persons who have been determined to be at imminent risk of coming into the custody of DCF. In such cases services shall be provided to help assure the person avoids DCF custody. Documentation from DCF or the courts will be required in order to justify this exception;
3. Persons under the age of 18 transitioning from DCF custody. Documentation from DCF or the courts will be required in order to justify this exception;
4. Persons transitioning from DCF custody age 18 or older. Documentation from DCF or the courts will be required in order to justify this exception;
5. Persons transitioning from Vocational Rehabilitation Services (VRS) which require ongoing support to maintain employment and self-sufficiency. Documentation from VRS will be required in order to justify this exception;
6. Persons meeting the criteria set forth in the KDADS "Military Inclusion" policy. Please refer to the Military Inclusion policy for documentation requirements;
7. Persons transferring from a psychiatric residential treatment facility (PRTF). Documentation of the impending transfer from the PRTF will be required in order to justify this exception.
8. Persons previously on the IDD waiver transferring back to the IDD waiver from the WORK program.

### 4. Transitions to the I/DD Waiver

- A. The following HCBS programs shall transition to HCBS IDD waiver program if they meet HCBS IDD functional eligibility:

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1. Persons determined no longer eligible for the HCBS Traumatic Brain Injury (TBI) waiver;
2. Persons determined no longer eligible for the HCBS Technology Assisted (TA) Waiver;
3. Children determined no longer eligible for the HCBS Autism Waiver;
4. Persons accessing services via the Money Follows the Person (MFP) program.
5. Upon approval by KDADS, an exception can be made when it is determined that the I/DD waiver is the most appropriate considering the person's health and safety.

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## Procedures

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### I. Crisis/Exception Request Process

#### A. Requests to CDDO

1. The person/person's representative requests a crisis or exception to the CDDO.
2. Prior to submission of a crisis or exception request, the person must have a current functional assessment on file performed within the past 365 days;
3. CDDO completes and obtains all required and applicable documentation required for the request in accordance with this policy.
4. CDDO crisis review team recommends approval or denial of request;
  - a. If request is approved, all documentation will be forwarded to KDADS via the I/DD Utility Upload tool;
  - b. If the request is denied, the CDDO will provide notification with appeal rights;
    - i. If the denial is appealed, the CDDO will follow their local dispute resolution process consistent with K.A.R. 30-64-32 and render a written decision within 20 days. The committee reviewing the appeal shall not consist of the same membership of the original crisis review team. Upon completion of the secondary review the following will occur: If the denial is reversed, the CDDO shall submit the crisis request and supporting documentation to KDADS via the I/DD Utility Upload.
    - ii. If the denial is upheld, the CDDO shall provide notice of the decision and appeal rights, consistent with K.A.R 30-64-32, to the

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person, family (if applicable), DCF if the person is in the custody of DCF, the TCM (if applicable) and the MCO.

c. Copies of the request and denial will be provided to the MCO.

5. If the denial is appealed again all documentation, including both denial determinations will be provided to KDADS for review and will then follow the KDADS review process.

## B. KDADS Review process

### 1. Request Review

- a. The IDD program manager reviews all uploaded documentation provided by the CDDO.
- b. All documentation will be reviewed within 10 business days
- c. Crisis requests will not be considered until all required supporting documentation has been uploaded into the KDADS IDD Utility Upload tool.

### 2. Determinations

- a. Approval/denial documentation will be mailed to the address on file and emailed to the CDDO, DCF if the person is in the custody of DCF, and MCO, if applicable. Form 3160 shall be completed and forwarded for all approvals.
- b. If the request is denied
  - i. KDADS will provide the person and/or guardian, CDDO, MCO (if applicable), and DCF if the person is in the custody of DCF with a formal Notice of Action (NOA) indicating the services were denied and providing the person with their appeal rights.
  - ii. The person/parent/guardian may request administrative reconsideration of the crisis denial by submitting a reconsideration request, within 30 days, and providing additional documentation to KDADS.

### 3. If the request is approved:

- a. KDADS communicates its approval to the KDHE Clearinghouse, CDDO, and MCO via the ES-3160.
- b. The KDADS IDD program manager sends a Notice of Action (NOA) of approval to the person. A copy is also emailed to the CDDO and MCO, if applicable.

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## II. Transition to the IDD waiver program

A. The following HCBS programs shall transition to HCBS IDD wavier program if they meet HCBS IDD functional eligibility.

1. Person is determined no longer eligible for the TA, Autism, or TBI waiver program.
2. The respective program manager sends NOA to person of their ineligibility. The IDD waiver program manager, the MCO, and DCF for persons in the custody of DCF are emailed a copy of the NOA.
3. The IDD waiver program manager coordinates with CDDO to determine if person is eligible to transition to IDD waiver program.
4. If a person is eligible for the IDD waiver program, a functional assessment is scheduled if current assessment is more than 365 days old.
5. Upon completion of functional assessment the CDDO will notify the IDD program manager and the MCO of the functional eligibility determination.
6. Upon functional eligibility determination, the IDD waiver program manager sends the NOA of approval for IDD waiver program to the person. For children in the custody of the Secretary of the Kansas Department for Children and Families, the NOA shall also be forwarded to DCF.
7. 3160 sent to CDDO, KDHE Clearinghouse, and MCO. I/DD services must begin within forty-five (45) days of issuances of the 3160.

## III. Documentation and Quality Assurance

A. The CDDO shall submit a quarterly report to KDADS by the 20<sup>th</sup> of the quarter due. This report will be sent to the [HCBS-KS@kdads.ks.gov](mailto:HCBS-KS@kdads.ks.gov) mailbox with the subject line “[INSERT APPROPRIATE quarter AND YEAR] [INSERT CDDO] Crisis Request Report. Example: Quarter 1 2016 ABC CDDO Crisis Request Report.

B. This report shall include the following information:

1. Total number of crisis requests submitted to CDDO during the quarter;
2. Total number of crisis requests submitted KDADS for review;
3. Total number of crisis requests returned by KDADS to CDDO for more information;
4. Total number of crisis requests denied by CDDO;

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## Authority

### 1915(c) HCBS Waiver –

KS.0224.R05.01 (IDD) – effective March 1, 2016

### Federal Authority

42 CFR Part 441.301 Contents of request for a waiver

### State Authority

K.A.R. 30-64-30 – Statewide service access list.

K.A.R. 60-64-32 – Dispute resolution.

K.S.A. 39-1801 et. seq.--- DDRA

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## Definitions

**Behavior assessment** – a component of the functional eligibility assessment measuring the frequency in exhibiting certain behaviors (e.g. damages own or others property, is self-injurious, resists supervision) to determine the level and type of supervision needed to meets the individual’s needs.

**Behavior support plan--** a plan that assists a member in building positive behaviors to replace or reduce a challenging/dangerous behavior. This plan may include teaching, improved communication, increasing relationships, and using clinical interventions, etc.

**Crisis Request** – a request to bypass the IDD waiting list submitted through a CDDO for persons who are in crisis or at imminent risk of crisis and whose needs can only be met through immediate access to services available through the HCBS-IDD Program.

**Exception Request** – a request to bypass the IDD waiting list submitted through a CDDO for pre-identified groups of individuals as defined by this policy.

**Functional eligibility assessment** – evaluation of the medical, adaptive, and behavioral needs and functional capacities of an individual to determine the level of care required to meet his or her needs in the least restrictive setting.

**IDD eligibility requirement** – the individual must either have substantial limitations in present functioning that is manifested during the period from birth to age 18 years and is characterized by significantly sub average intellectual functioning existing concurrently with deficits in adaptive behavior including related limitations in two or more of the following applicable adaptive skill areas: Communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure and work, or has a severe, chronic disability, which:



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- (A) Is attributable to a mental or physical impairment, or multiple sensory impairments, a combination of mental and physical impairments, physical and sensory impairments, mental and sensory impairments or a condition which has received a co-occurring intellectual/developmental disability and mental disorder;
- (B) Is manifest before 22 years of age;
- (C) Is likely to continue indefinitely;
- (D) Results, in the case of a person five years of age or older, in a substantial limitation in three or more of the following areas of major life functioning: Self-care, receptive and expressive language development and use, learning and adapting, mobility, self-direction, capacity for independent living and economic self-sufficiency;
- (E) Reflects a need for a combination and sequence of special interdisciplinary or generic care, treatment, specialized communications techniques or other services which are lifelong, or extended in duration and are individually planned and coordinated; and
- (F) Does not include individuals who are solely and severely emotionally disturbed or seriously or persistently mentally ill or have disabilities solely as a result of the infirmities of aging.

**Person centered service plan** – process required by Federal regulation led by the individual requiring waiver services or their representative that documenting the services, supports, and settings that are important for the individual to meet the needs identified through an assessment of functional need, as well as what is important to the individual with regard to preferences for the delivery of such services and supports.

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**Contact Information**

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**HCBS Programs**  
**503 S. Kansas Ave**  
**Topeka, Kansas 66603**

**Email:** HCBS-ks@kdads.ks.gov  
**Phone:** 785-296-4986  
**Fax:** 785-296-0256

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**Related Information**

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Date: \_\_\_\_\_  
Re: Recruitment of members for the Council of Community Members  
From: Coleen Hernandez, Quality Management Coordinator

The Council is in the process of recruiting additional members. If you would like to nominate a person who is eligible for I/DD services or who is receiving I/DD services, a parent or guardian complete the information below.

Name: \_\_\_\_\_

Person receiving or waiting for services \_\_\_ Parent \_\_\_ Guardian \_\_\_ Other \_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email (optional): \_\_\_\_\_

List comments about why this person would be a good candidate to serve on the Council of Community Members:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Council meetings are held at a minimum of four and maximum of six meetings per year on the 3<sup>rd</sup> Wednesday every other month from 12-1 pm at 2701 SW Randolph.

Send your nomination(s) to Coleen Hernandez at 2701 SW Randolph Ave., Topeka, KS 66611 or email [chernandez@sncddo.org](mailto:chernandez@sncddo.org) by Friday, December 30, 2016.

*2017 TCM Meeting Dates*

*January 5<sup>th</sup>*

*March 2<sup>nd</sup>*

*May 4<sup>th</sup>*

*July 6<sup>th</sup>*

*September 7<sup>th</sup>*

*November 2<sup>nd</sup>*

# 2017 CCM/QOC

January 18

March 15

May 17

July 19

September 20

November 15