1915(i) Policy

Service Duplication 510-08-99

1915(i) services cannot be provided to an individual at the same time as another service that is the same in nature and scope regardless of source including Federal, state, local, and private entities.

Medicaid can only reimburse for one individual provider delivering the same service for the same time period. Medicaid cannot reimburse a second individual provider delivering the same service at the same time to the same individual.

Avoiding Service Duplication with 1915(c) Waivers

Individuals eligible for multiple Medicaid funded authorities cannot access 1915(i) services in more than one Medicaid authority and are required to utilize the service through the alternate authority rather than the 1915(i). For example, if an individual is enrolled in both the 1915(i) and a 1915(c) Waiver and is in need of a service which is offered in both, the individual is required to access the service through the 1915(c) rather than the 1915(i). An eligible 1915(i) individual can receive services under SPED and Ex-SPED, but cannot receive PACE services.

To avoid service duplication with 1915(c) Waiver services, the care coordinator will contact the State Medicaid Office to inquire if the member has any eligibility spans for any of the C Waivers in MMIS. If yes, the care coordinator will reach out to the C Waiver authority and do due diligence to ensure the plan of care will not include services the member could receive through the 1915(c) Waiver.

The State has identified the following duplicative services between the 1915(i) and 1915(c) Waivers:

1. Community Transition Service

The State has identified the community transition service within the 1915(i) is duplicative of the following services within the HCBS 1915(c) Waivers:

- ID/DD Waiver Age 0+
- HCBS Aged/Disabled Waiver Age 18+

Individuals currently or previously receiving community transition services through the HCBS Aging/Disabled or DD Waivers are not eligible to receive community transition services through the 1915(i).

2. Respite Care

The State has identified the respite service, Age 0 to 20, within the 1915(i) is duplicative of the respite/in-home supports services within the following HCBS 1915(c) Waivers:

- ID/DD Waiver Age 0+
- Medically Fragile Waiver Age 3 to 18
- Autism Waiver Age 0 to 16
- Children's Hospice Waiver Age 0 to 22
- HCBS Age/Disable Waiver Ages 18+

3. Non-Medical Transportation

The State has identified the non-medical transportation service, Age 0+, within the 1915(i) is duplicative of the following services within the HCBS 1915(c) Waivers:

- Medically Fragile Waiver Age 3 to 18
- HCBS Aged/Disable Waiver Age 18+
- Technology Dependent Waiver Age 18+
- 4. Pre-Vocational Services

The State has identified the pre-vocational service, Age 17.5+ or receipt of a high school diploma or GED, whichever comes first, within the 1915(i) is duplicative of the following services within the HCBS 1915(c) Waivers:

- ID/DD Waiver Pre-Vocational Services Age 18+.
- 5. Supported Employment

The State has identified the supported employment service, Age 14+, within the 1915(i) is duplicative of the following services within the HCBS 1915(c) Waivers:

- ID/DD Waiver Supported Employment/Individual Employment Supports – Age 18+
- HCBS Aged/Disabled Waiver Age 18+

6. Care Coordination/Case Management

The State's 1915(i) State Plan Amendment will offer care coordination for Ages 0+, and the following ND HCBS 1915(c) Waivers currently offer case management:

- ID/DD Waiver Age 0+
- Medically Fragile Waiver Age 3 to 18
- Autism Waiver Age 0 to 16

- Children's Hospice Waiver Age 0 to 22
- HCBS Age/Disable Waiver Age 18+
- Technology Dependent Waiver Age 18+

It is allowable for 1915(i) participants involved in multiple systems, waivers, and state plan targeted case management services, etc., to receive continued specialized case management from each. For example, the participant involved in the 1915(i) to address behavioral health needs may be enrolled in the HCBS 1915(c) Waiver due to a developmental disability, be in the foster care system, and also receiving special education services. Each of these systems offer case management in their areas of expertise and serve an essential role in the individual's care.

While the individual may receive case management from several areas, the state will allow only one Medicaid funded case manager to bill a specific participant for the care coordination/case management service delivered while both are present_for the same activity during the same time period. For example, if multiple Medicaid funded case managers, i.e. 1915(i) care coordinator, 1915(c) Waiver case manager, and targeted case manager attend the same team meeting, they will need to decide amongst themselves which one of them will bill for the specific participant.

At this time the state has identified no duplication between the following 1915(i) services and services offered in the State's HCBS 1915(c) Waivers:

- Training and Supports for Unpaid Caregiver
- Peer Support
- Family Peer Support
- Benefits Planning
- Supported Education
- Housing Supports

The following contains all of the duplicative services listed above in a table format for ease of viewing:

	*Case Management/Care Coordination *Duplication	Non-Medical Transportation Duplication	Respite/In- Home Supports Duplication	Community Transition Services Duplication	Supported Employment /Individual Employment Supports Duplication	Pre- Vocational Services Duplication
1915(i) SPA	0+	0+	0 to 20	0+	17.5+	14+
ID/DD Waiver	0+		0+	0+	18+	18+
Medically						
Fragile Waiver	3 to 18	3 to 18	3 to 18			

Autism Waiver	0 to 16		0 to 16			
Children's						
Hospice Waiver	0 to 22		0 to 22			
HCBS						
Aged/Disabled						
Waiver	18+	18+	18+	18+	18+	
Technology						
Dependent						
Waiver	18+	18+				

*It is allowable for the same member to receive care coordination/case management services from various sources. However, only one Medicaid-funded care coordinator/case manager can bill when both are present for the same activity during the same time period.

Avoiding Service Duplication with Money Follows the Person

See the 1915(i) Community Transition Service (CTS) Policy 510-08-65-10 which provides instruction on avoiding service duplication with Money Follows the Person CTS.

Avoiding Service Duplication with Children's Education Services (IDEA)

1915(i) funding may not be used to pay for special education and related services that are included in a child's Individualized Educational Plan (IEP) under the provisions of Individuals with Disabilities Education Improvement Act of 2004 (IDEA). The funding of such services is the responsibility of state and local education agencies. §1903(c)(3) of the Act provides that federal financial participation is available for services included in an IEP when such services are furnished as basic Medicaid benefits. 1915(i) services are not considered to be basic Medicaid services; therefore, federal financial participation is not available for IEP special education and related services.

Services provided through Medicaid 1915(i) must not be duplicated by services provided in the IDEA (20 U.S.C. 1400 et seq.). To ensure duplication does not occur, 1915(i) care coordination providers must coordinate efforts with the local educational system and North Dakota Department of Public Instruction. Prior to entering any 1915(i) services offered through the IDEA on the 1915(i) Plan of Care, justification that services are not otherwise available to the individual through the IDEA (20 U.S.C. 1400 et seq.) must be documented in the individual's record and kept on file.

1915(i) services likely to be available to members through the North Dakota Department of Public Instruction include Supported Education, Supported Employment, and Pre-Vocational Services.

Avoiding Service Duplication with Children's Foster Care Services

1915(i) services may be furnished to children in foster care living arrangements but only to the extent that 1915(i) services supplement maintenance and supervision services furnished in such living arrangements and 1915(i) services are necessary to meet the identified needs of children. 1915(i) funds are not available to pay for maintenance (including room and board) and supervision of children who are under the state's custody, regardless of whether the child is eligible for funding under Title IV-E of the Act. The costs associated with maintenance and supervision of these children are considered a state obligation.

When 1915(i) services are furnished to children in foster care who are eligible for Title IV-E funding, the state must ensure that the claim for federal financial participation does not include costs that are properly charged as Title IV-E administrative expenses.

Avoiding Service Duplication with the Rehabilitation Act of 1973

Services furnished through Medicaid 1915(i) must not be duplicated by services funded under Section 110 of the Rehabilitation Act of 1973. To ensure duplication does not occur, care coordination providers must coordinate efforts with the Vocational Rehabilitation Agency. Justification that services are not otherwise available to the individual through these agencies under Section 110 of the Rehabilitation Act of 1973 must be documented in the individual's record and kept on file.

1915(i) services potentially available to members through Vocational Rehabilitation include Benefits Planning, Supported Employment, and Pre-Vocational Services.

See the individual service policies for Benefits Planning, Supported Employment, and Pre-Vocational Services.

Avoiding Service Duplication with Housing Supports

Services furnished through Medicaid 1915(i) must not be duplicated by other housing support services. To ensure duplication does not occur, 1915(i) care coordination providers must coordinate efforts with the state's housing support services. Justification that services are not otherwise available to the individual must be documented in the individual's record and kept on file.

ND Housing Stability, ND Rent Help, and housing facilitation are considered a duplication of the 1915(i) Housing Support service and can not be rendered at the same time.

See the individual service policy for Housing Supports.