

## **1915(i) Policy**

### **Prevocational Training 510-08-65-40**

**Service Title:** Prevocational Training Service

#### **Service Definition (Scope)**

Prevocational Training services are time-limited community-based services that prepare an individual for employment or volunteer work. This service specifically provides learning and work experiences where the individual can develop general, non-job-task-specific strengths and soft skills that contribute to employability in competitive work environment as well as in integrated community settings.

Prevocational services assist the member with achieving soft skills needed to attain future employment or volunteer work opportunities. Services are designed to be delivered in and outside of a classroom setting. Services must honor the individual's preferences (scheduling, choice of service provider, direction of work, etc.) and provide consideration for common courtesies such as timeliness and reliability.

A participant's need for initial and continued services shall be discussed at each 1915(i) person-centered plan of care meeting and formally evaluated during the WHODAS 2.0 functional needs assessment as part of the initial and annual reevaluation. The care coordinator must document a need for the service to support a participant's identified goals in the person-centered plan of care and document the participant's progress toward their goals.

The provider must provide a monthly update to the care coordinator.

Prevocational Training components include:

- Teach concepts such as: work compliance, attendance, task completion, problem solving, safety, and, if applicable, teach individuals how to identify obstacles to employment, obtain paperwork necessary for employment applications, and how to interact with people in the work environment.
- Coordinate scheduled activities outside of an individual's home that support acquisition, retention, or improvement in job-related skills related to self-care, sensory-motor development, daily living skills, communication community living, improved socialization, and cognitive skills. This could include financial skills including maintaining a bank account.
- Gain work-related experience considered crucial for job placement (e.g. volunteer work, time-limited unpaid internship, job shadowing) and career development

Enrolled Medicaid 1915(i) providers are required to provide the whole scope of service rather than only portions of the service. The activities contained in the service description is what CMS allows reimbursement for. The following are examples of what is not reimbursable to the provider:

- Services provided not included in the service description including associated costs incurred for providing the service, for example, checking a member's eligibility.
- *Client not present.* The client must always be present with the provider for reimbursement to occur.
- *Services provided to a non-eligible member.* Providers are responsible for confirming member eligibility prior to delivering each service.
- *Services provided by a non-qualified provider.* Group providers are responsible for ensuring their group and affiliated individual providers meet all qualifications.
- Services provided to a member not meeting the specific requirements of the service, such as age.
- Services provided without a valid service authorization.
- Non-valid claims.

## **Service Limits**

Services are available to individuals 6 months before their 18<sup>th</sup> birthday or receipt of a high school diploma or GED, whichever comes first.

Services are time limited. The staff providing services should ensure that services are needed and related to the goal that is in the person-centered plan. Prevocational services may be provided one-on-one or in a classroom setting.

The total combined hours are limited to no more than 8 hours per day and a total of 156 hours per calendar year.

Service authorization requests exceeding the maximum limit which are deemed necessary to prevent the member's imminent institutionalization, hospitalization, or out of home/out of community placement will be reviewed by the NDDHHS. All requests to exceed limits must initiate with the care coordinator.

Federal financial participation is not claimed for incentive payments, subsidies, or unrelated vocational training expenses, such as the following:

- Incentive payments made to an employer to encourage or subsidize the employer's participation in a supported employment program.
- Payments that are passed through to users of supported employment programs.
- Payments for training that is not directly related to an individual's supported employment program.

## **Service Duplication**

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. For the 1915(i) Pre-Vocational Service to be entered on the 1915(i) Plan of Care, the care coordinator must first verify that services are not duplicated.

### **Care Coordinator responsibility to ensure nonduplication with 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 (FFP) 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, FFP is not available for IEP special education and related services.

Pre-vocational services are available through the North Dakota Department of Public Instruction under the provisions of Individuals with Disabilities Education Improvement Act of 2004 (IDEA). 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, the 1915(i) Care Coordinator must coordinate efforts with the local educational system and North Dakota Department of Public Instruction.

Prior to entering the pre-vocational service 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.

*See the "Avoiding Service Duplication with Children's Education Services (IDEA)" section of the 1915(i) Service Duplication Policy for specific requirements.*

### **Care Coordinator responsibility to ensure nonduplication with the Rehabilitation Act of 1973 as amended.**

Pre-Vocational services are available through Vocational Rehabilitation under the provisions of the Rehabilitation Act of 1973 as amended.

Prior to the 1915(i) Pre-Vocational Training service being added to the 1915(i) Plan of Care for service authorization, the care coordinator must first verify that services are not duplicated through Vocational Rehabilitation by using the following process: Care coordinators must obtain a release of information from the 1915(i) member and forward to Vocational Rehabilitation by fax at 701-328-1884 or send by secure email

to [dhsvr@nd.gov](mailto:dhsvr@nd.gov). Vocational Rehabilitation will check their case management system to see if they have an open case.

If the individual is open with Vocational Rehabilitation, the care coordinator will be connected to the individual's Vocational Rehabilitation Counselor. If the individual is not open with Vocational Rehabilitation, the individual will be referred to Vocational Rehabilitation for pre-vocational services.

*See the "Avoiding Service Duplication with the Rehabilitation Act of 1973" section of the 1915i Service Duplication policy for specific requirements.*

### **Care Coordinator responsibility to ensure nonduplication with the 1915(c) Waivers.**

The state has identified the Prevocational 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) Waiver: ID/DD Waiver Pre-Vocational Services – Age 18+.

Individuals receiving prevocational services through the HCBS ID/DD Waiver cannot receive the service through the 1915(i). If an individual is enrolled in both the 1915(i) and a 1915(c) Waiver and is in need of this service which is offered in both, the individual is required to access the service through the 1915(c) rather than the 1915(i).

*See the "Avoiding Service Duplication with 1915(c) Waivers" section of the 1915(i) Service Duplication Policy for specific requirements.*

### **Conflict of Interest**

*See 1915(i) Conflict of Interest Standards Policy.*

### **Remote Support**

Remote support may be utilized for up to 25% of all services provided in a calendar month.

*See 1915(i) Remote Support Service Delivery Policy for requirements.*

### **Provider Qualifications**

### **Provider Type: Group**

North Dakota Medicaid enrolled group provider of 1915(i) Prevocational Training Services.

A group provider of this service must meet all of the following:

1. be licensed under NDAC 75-04-01; or have accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF) or the Council on Accreditation (COA) or the Council on Quality Leadership (CQL); or if the group provider cannot meet the licensure or accreditation requirements, they may enroll as a 1915(i) group provider provided the individual service providers and their supervisors meet the individual requirements; licensing or accreditation requirements do not apply to North Dakota schools enrolled as Medicaid 1915(i) group providers of the service; however, schools must ensure that the individual service providers affiliated with their group and their supervisors meet individual requirements;

and,

2. have a North Dakota Medicaid provider agreement and attest to all of the following:
  - individual practitioners meet the required qualifications
  - services will be provided within their scope of practice
  - individual practitioners will have the required competencies identified in the service scope
  - agency conducts training in accordance with state policies and procedures
  - agency adheres to all 1915(i) policies and procedures, including but not limited to, participant rights, abuse, neglect, exploitation, use of restraints, and reporting procedures are written and available for NDDHHS review upon request
  - agencies not licensed as a DD Provider under NDAC 75-04-01, or accredited, or a school, will ensure each individual provider affiliated with their group possesses one of the required individual certifications identified in the individual provider qualification section.

### **Provider Type: Individual**

The individual practitioner providing the service must:

1. be at least 18 years of age; and
2. be employed by an enrolled ND Medicaid provider or enrolled billing group of this service; and

2. complete Mental Health First Aid Training for Youth and/or Mental Health First Aid Training for Adults, depending on scope of services/target population; and
3. have a High School Diploma or GED; and
4. have one of the following certifications:
  - Employment Specialist or
  - Brain Injury Specialist or
  - Qualified Service Provider (QSP) or
  - Direct Support Provider (DSP) or
  - Career Development Facilitator; and
5. in addition to the requirements listed above, and in lieu of one of the approved certifications, a staff providing services may instead be employed by a school in North Dakota who is an enrolled group provider of the service, as a paraeducator/education specialist and be trained in Mental Health First Aid Training for Youth and/ or Adults depending on the scope of services/targeted population; and
6. in addition to the requirements listed above, and in lieu of one of the approved certifications, an individual service provider may enroll if: They are employed by a 1915(i) enrolled group provider who meets the aforementioned licensure or accreditation requirements; and
7. supervisors of individual providers must meet the individual provider requirements and have two or more years of experience working in an educational setting.

\* Which version of the Mental Health First Aid Training required is determined by the higher percentage of the adult or child population being served by the individual provider. If an individual provider is serving 60% children and 40% adults, the child version is required. Individual providers who currently have Mental Health First Aid training at the time of enrollment have a waiver period of 6 months to obtain the required version.

### **Verification of Provider Qualifications**

Provider Type: ND Medicaid enrolled agency provider of Prevocational Training Services

Entity Responsible for Verification: Medical Services Provider Enrollment

Frequency of Verification: Provider will complete an "Attestation" as part of the provider agreement process upon enrollment and at revalidation. Providers are required to revalidate their enrollments at least once every five (5) years.

Service Delivery Method: Provider Managed

### **Payment Rate**

The client must be present to bill for this service.

Prevocational Training is a 15-minute rate. The rates are published on the Department's website.

<https://www.hhs.nd.gov/medicaid-provider-information/medicaid-provider-fee-schedules>

This service can be billed for individual or group setting. If group setting is provided, modifier UA must be appended to the line and reimbursement will be 25% of the allowed amount

### **Quality Assurance**

*See 1915(i) Quality Assurance Policy.*

### **Medical Records Requirements including Documentation Guidelines, Signatures, Confidentiality, and Availability of Records**

*See 1915(i) Medical Records Policy.*

### **Person Centered Service Delivery**

Prevocational training service delivery must be person-centered.

Agencies must have records available for NDDHHS review documenting that individual providers have knowledge of and competency in the following:

- o Person-Centered Plan Implementation

*See 1915(i) Person- Centered Care Policy.*

### **Person-Centered Plan of Care**

*See 1915(i) Plan of Care Policy.*

### **HCBS Settings Rule Compliance Verification**

Settings must be compliant with the HCBS Settings Rule.

*See 1915(i) HCBS Settings Rule Policy.*

### **Service Authorizations**

All 1915(i) services must receive prior authorization.

*See 1915(i) Service Authorization Policy.*

### **Claims**

*See 1915(i) Claims Policy.*