

1915(i) Policy

1915(i) Supported Employment 510-08-65-55

Service Title: 1915(i) Supported Employment Service

Service Definition (Scope)

1915(i) Supported Employment services assist 1915(i) eligible individuals to obtain and keep competitive employment at or above the minimum wage. After intensive engagement, ongoing follow-along support is available for an indefinite period as needed by the 1915(i) eligible individual to maintain their paid competitive employment position. 1915(i) Supported employment services are individualized, person-centered services providing supports to 1915(i) eligible individuals who need ongoing support to learn a new job and maintain a job in a competitive employment or self-employment arrangement.

1915(i) Supported Employment services can be provided through many different service models. Some of these models can include evidence-based supported employment or customized employment for individuals with significant disabilities. Supported employment services may be offered in conjunction with Assertive Community-based Treatment (ACT) models, Integrated Dual Diagnosis Treatment (IDDT), or with other treatment/therapeutic models that promote community inclusion and integrated employment.

1915(i) Supported Employment services may be furnished to eligible members that elect to receive support and demonstrate a need for the service. An individual'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 1915(i) service to support a individual's identified goals in the person-centered plan of care and document the individual's progress toward their goals.

The 1915(i) Supported Employment provider must provide a monthly update to the 1915(i) Care Coordinator. In the event the 1915(i) eligible member is receiving supported employment services through Vocational Rehabilitation (VR), and the plan is for the individual to eventually receive ongoing follow-along supports through the 1915(i) Supported Employment service, then the VR Supported Employment provider will need to keep both the 1915(i) Care Coordinator and the VR Counselor apprised in preparation for the client's transition from VR funded supported employment to 1915(i) Supported Employment.

Services must be provided in a manner which honors the individual's preferences (scheduling, choice of provider, direction of work) and consideration for common courtesies such as timeliness and reliability.

Supported employment services are individualized and may include any combination of the following services:

- vocational/job-related discovery or assessment,
- person-centered employment planning,
- job placement,
- rapid job placement,
- job development,
- negotiation with prospective employers,
- job analysis,
- job carving,
- support to establish or maintain self-employment (including home-based self-employment),
- training and systematic instruction,
- job coaching,
- benefits planning support/referral,
- guidance on income reporting,
- training and planning,
- asset development and career advancement services,
- education and training on disability disclosure,
- education and training on reasonable accommodations as defined by ADA,
- assistance with securing reasonable accommodations as defined by ADA, and/or
- other workplace support services including services not specifically related to job skill training that enable the individual to be successful in integrating into the job setting.

Prior to an individual's first day of employment, the provider will work with the individual and members of the individual's team to create a plan for job stabilization. The provider will continue to coordinate team meetings when necessary, follow-up with the individual once they are employed, and provide monthly progress reports to the entire team.

Ongoing follow-along support services are available to an individual once they are employed and are provided periodically to address work-related issues as they arise. The goal of follow-up support services is to identify any problems or concerns early to provide the best opportunity for long lasting work opportunities. Examples of follow-along support services include, but are not limited to assistance with:

- understanding employer leave policies
- scheduling
- time sheets
- tax withholding
- addressing issues and barriers in the work environment including:
 - accessibility
 - employee – employer relations
 - conflict with coworkers
 - attendance
 - dress code
 - supervisory issues

Also included are supports to address any barriers that interfere with employment success/maintaining employment which may include providing support to the employer.

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 which are 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 14 years of age or older.

There is a daily maximum of 8 hours (32 units) and an annual maximum of 156 hours per calendar year.

Once an individual has maintained employment for 6 months, the individual may receive ongoing follow-along support. Ongoing support services are billed in 15-minute units and may not exceed a maximum of 20% of hours worked by the individual per week.

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.

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 client to be authorized for 1915(i) Supported Employment services, the care coordinator must first verify that services are not duplicated.

See 1915(i) Service Duplication Policy.

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

Supported Employment services are available through Vocational Rehabilitation (VR) beginning when the individual is in their last year of high school under the provisions of the Rehabilitation Act of 1973 as amended.

Vocational Rehabilitation does not provide supported employment services until the individual's last year of high school; however, Vocational Rehabilitation does provide "work experiences" to those still in high school. In these situations, the 1915(i) Care Coordinator will obtain an Authorization to Disclose Information for Vocational Rehabilitation and follow up by telephone to VR State Administrators at 701-328-8950 to discuss best course of action for the individual.

Prior to adding the 1915(i) Supported Employment service on the 1915(i) Plan of Care for service authorization, the care coordinator must first verify the individual's status through Vocational Rehabilitation. Care coordinators will obtain an Authorization to Disclose Information from the 1915(i) individual and either fax to Vocational Rehabilitation at 701-328-1884 or send by secure email to dhsvr@nd.gov.

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

If the individual requires supported employment services to obtain, maintain, or advance in employment, the 1915(i) Care Coordinator will provide Vocational Rehabilitation with an email or other form of written documentation that there is reasonable expectation that follow-along supports through the 1915(i) Supported Employment service will be available once the individual is stable in employment, providing the individual maintains 1915(i) eligibility.

1915(i) eligible individuals who are receiving supported employment services through Vocational Rehabilitation will transition to the 1915(i) Supported Employment service for ongoing follow-along supports once they are stabilized in employment. The VR counselor will schedule a team meeting to occur prior to the transition to review stability in employment and the transition to 1915(i) Supported Employment ongoing follow-along supports. The team should include the VR Counselor, 1915(i) Care Coordinator, supported employment provider, individual, etc. The individual will

remain open with Vocational Rehabilitation for 90 days after the individual transitions to 1915(i) Supported Employment follow-along supports.

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

Care Coordinator Responsibility for ensuring nonduplication with 1915(c) Waivers.

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+; and HCBS Aged/Disabled Waiver – Age 18+.

Individuals receiving supported employment services through the HCBS ID/DD Waiver cannot receive the same 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) Waivers 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.

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.

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 the supported employment service being added to 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.

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) Supported Employment 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, individual 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 employed by an enrolled ND Medicaid provider or enrolled billing group of this service; and
2. be at least 18 years of age; and
3. 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
4. have a high school diploma or GED; and
5. 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
6. 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
7. 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
8. supervisors of individual providers must meet the individual provider requirements and have two or more years of experience working in an educational setting.

Verification of Provider Qualifications

Provider Type: ND Medicaid enrolled agency provider of Supported Employment 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.

Supported Employment and ongoing support services are 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>

Once an individual has maintained employment for 6 months, the individual may receive ongoing follow-along support. Ongoing support services are billed 15-minute units and may not exceed a maximum of 20% of hours worked by the individual per week.

Quality Assurance

See 1915(i) Quality Assurance Policy.

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

Documentation requirements applying to Supported Employment providers:

Once an individual has maintained employment for 6 months, the individual may receive ongoing follow-along support. Ongoing support services are billed 15-minute units and may not exceed a maximum of 20% of hours worked by the individual per week. The provider must document in the individual’s chart on the date the individual has maintained employment for 6 months and the ongoing support services begin. Documentation for ongoing support services must include the number of hours the individual worked per week and the number of hours billed for support hours. Billable hours per week can’t exceed 20% of the number of hours the individual worked for the week.

See 1915(i) Medical Records Policy for additional documentation requirements.

Person Centered Service Delivery

Supported Employment 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.