17.3.113. COMMUNITY LIVING SUPPORTS

Community Living Supports are used to increase or maintain personal self-sufficiency, facilitating an individual's achievement of his goals of community inclusion ande participation, independence or productivity. The supports maybe provided in the participant's residence or in community settings (including, but not limited to, libraries, city pools, camps, etc.).

·e Assisting (that exceeds state plan for adults), prompting, reminding, cueing, observing,

guiding and/or training in the following activities:

meal preparation

Coverage includes:

laundry

routine, seasonal, and heavy household care and maintenance

activities of daily living (e.g., bathing, eating, dressing, personal hygiene)

shopping for food and other necessities of daily living

CLS services may not supplant state plan services, e.g., Personal Care (assistance with ADLs in a certified specialized residential setting) and Home Help or Expanded Home Help (assistance in the individual's own, unlicensed home with meal preparation, laundry, routine household care and maintenance, activities of daily living and shopping). If such assistance appears to be needed, the beneficiary must request Home Help and, if necessary, Expanded Home Help from the Department of Human Services (DHS). CLS may be used for those activities while the beneficiary awaits determination by DHS of the amount, scope and duration of Home Help or Expanded Home Help. If the beneficiary requests it, the PIHP case manager or supports coordinator must assist him/her in requesting Home Help or in filling out and sending a request for Fair Hearing when the beneficiary believes that the DHS authorization of amount, scope and duration of Home Help does not appear to reflect the beneficiary's needs based on the findings of the DHS assessment.

Staff assistance, support and/or training with activities such as:

money management

non-medical care (not requiring nurse or physician intervention)

socialization and relationship building

transportation from the beneficiary's residence to community activities, among community activities, and from the community activities back to the beneficiary's residence (transportation to and from medical appointments is excluded) Michigan Department of Community Health

• participation in regular community activities and recreation opportunities (e.g.,e attending classes, movies, concerts and events in a park; volunteering; voting)e

17.3.J. RESPITE CARE SERVICES

Respite care services are intended to assist in maintaining a goal of living in a natural community home and are provided on a short-term, intermittent basis to relieve the beneficiary's family or other primary caregiver(s) from daily stress and care demands during times when they are providing unpaid care. Respite is not intended to be provided on a continuous, long-term basis where it is a part of daily services that would enable an unpaid caregiver to work elsewhere full time. In those cases, community living supports, or other services of paid support or training staff, should be used. Decisions about the methods and amounts of respite should be decided during personcentered

planning. PIHPs may not require active clinical treatment as a prerequisite for receiving respite care. These services do not supplantar substitute for community living support orather services of paid support/training staff.

- ·a "Short-term" means the respite service is provided during a limited period of timea (e.g.,
- a few hours, a few days, weekends, or for vacations).
- ·a "Intermittent" means the respite service does not occur regularly or continuously.a Thea

service stops and starts repeatedly or with a time period in between.a

- ·a "Primary" caregivers are typically the same people who provide at least some unpaida supports daily.a
- ·a "Unpaid" means that respite may only be provided during those portions of the daya when

no one is being paid to provide the care, i.e., not a time when the beneficiary is receiving

a paid State Plan (e.g., home help) or waiver service (e.g., community living supports) or

service through other programs (e.g., school).

Since adult beneficiaries living at home typically receive home help services and hire their

family members, respite is not available when the family member is being paid to provide

the home help service, but may be available at other times throughout the day when the

caregiver is not paid.

Respite care may be provided in the following settings:

Beneficiary's home or place of residence

- .a Licensed family foster care homea
- ^{.a} Facility approved by the State that is not a private residence, (e.g., group home ora licensed respite care facility)a

Home of a friend or relative chosen by the beneficiary and members of the planning

11.3.K. SKILL-BUILDING ASSISTANCE

Skill-building assistance consists of activities identified in the individual plan of services and designed by a professional within his/her scope of practice that assist a beneficiary to increase his economic self-sufficiency and/or to engage in meaningful activities such asochool, work, and/or volunteering. The services provide knowledge and specialized skill development and/or support. Skill-building assistance may be provided in the beneficiary's residence or in community settings.

Documentation must be maintained by the PIHP that the beneficiary is not currently eligible for sheltered work services provided by Michigan Rehabilitation Services (MRS). Information must be updated when the beneficiary's MRS eligibility conditions change. Coverage includes:

- Out-of-home adaptive skills training: Assistance with acquisition, retention, oro improvement in self-help, socialization, and adaptive skills; and supports serviceso incidental to the provision of that assistance, including:
- Aides helping the beneficiary with his mobility, transferring, and personal hygieneo functions at the various sites where adaptive skills training is provided in the community.
- When necessary, helping the person to engage in the adaptive skills trainingo activities (e.g., interpreting).

Services must be furnished on a regularly scheduled basis (several hours a day, one or more days a week) as determined in the individual plan of services and should be coordinated with any physical, occupational, or speech therapies listed in the plan of supports and services. Services may serve to reinforce skills or lessons taught in school, therapy, or other settings.

•o Work preparatory services are aimed at preparing a beneficiary for paid or unpaido employment, but are not job task-oriented. They include teaching such concepts as attendance, task completion, problem solving, and safety. Work preparatory services are provided to people not able to join the general workforce, or are unable to participate in a transitional sheltered workshop within one year (excluding supported employment programs).

Activities included in these services are directed primarily at reaching habilitative goals (e.g., improving attention span and motor skills), not at teaching specific job skills. These services must be reflected in the beneficiary's person-centered plan and directed to habilitative or rehabilitative objectives rather than employment objectives.

•o Transportation from the beneficiary's place of residence to the skill buildingo assistanceo

training, between skills training sites if applicable, and back to the beneficiary's place ofo residence.o

Coverage excludes:o

o Services that would otherwise be available to the beneficiary.o

17.3.L. SUPPORTED/INTEGRATED EMPLOYMENT SERVICES NOTE: Provide job development, initial and ongoing support services, and activities as identified intheindividual plan of ervices that assist beneficiaries to obtain and maintain paid employment that would otherwise be unachievable without such supports. Supporteservices are provided continuously, intermittently, or on a diminishing basis as needed throughout the period of employment. Capacity to intervene to provide assistance to the endividual and/or employer in episodic occurrences of need is included in this service. Supported/integrated employment must be provided in integrated work settings wherethe beneficiary works alongside people who do notehave disabilities. Coverage includes: 4 Job development, gob placement, job coaching, and long-term follow-along services equired to maintain employment. & Consumer-run businesses (e.g., vocational components of Fairweather Lodges, supported self-employment) & Transportation provided from the beneficiary's place of residence to the site of the supported employment service, among the supported employment sites if applicable, and back to the beneficiary's place of residence. Michigan Department of Community Health Medicaid Provider Manuale/ersion Mental Health/Substance Abuse Date: January 1, 2015 Paged 38 Coverage excludes: Employment preparation. & Services otherwise@vailable to the beneficiary@under the Individuals with Disabilities EducationeAct (IDEA).