

# **Anoka County Consumer Directed Community Supports (CDCS) Guidelines and Expenditures**



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## General Guidelines:

<p><b>Definition</b></p>	<p><a href="#">Consumer Directed Community Supports (CDCS)</a> is a service option available to people on the home and community-based services (HCBS) waivers and Alternative Care (AC) program. CDCS gives a person flexibility in service planning and responsibility for self-directing his or her services, including hiring and managing support workers. CDCS may include traditional services and goods, and self-designed services.</p> <p>The Minnesota Department of Human Services (DHS) developed the <a href="#">Community Based Service Manual (CBSM)</a> and the <a href="#">CDCS Policy Manual</a> based on State and Federal Statutes. Anoka County Guidelines are based on the CBSM and the CDCS Policy Manual to provide further direction. Specific sections in these guidelines may be linked directly to their related pages in the CBSM and CDCS Policy Manual for further information.</p> <p>Participants considering CDCS can watch a DHS <a href="#">Video</a> for more information, they will also attend an orientation training, meet regularly with their case manager and a support planner (optional), coordinate employment and payment activities through a Financial Management Service (FMS) and receive electronic Newsletters several times a year. All CDCS forms can be found on <a href="#">Anoka County CDCS Webpage</a>.</p> <p><b>Following are definitions used to clarify expense requests throughout this document:</b> CDCS follows <a href="#">person centered planning practices</a> to ensure that a participant’s needs, interests, preferences and desired outcomes are identified as a way to develop a meaningful personalized service plan, the Community Support Plan (CSP). Anoka County will consider personal preferences within the parameters of Waiver statutes and CDCS guidelines.</p> <p>CDCS is a <a href="#">self-directed option</a>. Self-direction is an alternative way to deliver services that gives people more choice, control, and flexibility in how their services are provided.</p> <p><b>Other Key Definitions:</b></p> <ul style="list-style-type: none"> <li>• <b>Assistive and/or Adapted</b> - “any product, device, or equipment whether acquired commercially, modified, or customized that is used to maintain, increase, or improve the functional capabilities of individuals with disabilities.” (<a href="#">Assistive Technology Act of 1998</a>)</li> <li>• <b>Community Integration</b> - utilizing personal assistance and support(s) necessary to fully participate in the community in the areas of recreation, employment, transportation and education.</li> <li>• <b>Customary and Reasonable</b> - The usual amount paid for a same or similar service or product based on what providers charge in a geographic area.</li> <li>• <b>Duplication</b> – Excessive request for more than one of the same or similar product(s) or service(s) addressing the same assessed need.</li> </ul> <p><b>Least costly AND most effective (“cost efficient”)</b> – the lowest cost quality service(s) and/or product(s) that will be most likely to produce positive desired outcome(s)/goal(s)</p>
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<p><b>Eligibility</b></p>	<p><i>Consumer directed community supports (CDCS) is a service option available to a person who already receives services on or is eligible for one of the following HCBS programs:</i></p> <ul style="list-style-type: none"> <li>• <i>Alternative Care (AC) program</i></li> <li>• <i>Brain Injury (BI) Waiver</i></li> <li>• <i>Community Alternative Care (CAC) Waiver</i></li> <li>• <i>Community Access for Disability Inclusion (CADI) Waiver</i></li> <li>• <i>Developmental Disabilities (DD) Waiver</i></li> <li>• <i>Elderly Waiver (EW)</i></li> </ul> <p><i>A person must also have a CDCS Community Support Plan (CSP) that identifies:</i></p> <ul style="list-style-type: none"> <li>• <i>The goods and services he/she choose to purchase to meet his/her assessed needs</i></li> <li>• <i>Safeguards that are required to reasonably maintain his/her health and safety</i></li> <li>• <i>His/her emergency needs and how they will be met</i></li> </ul>
<p><b>Limitations</b></p>	<p><i>A person is not eligible for CDCS in the following scenarios. See <a href="#">CDCS Policy Manual</a> for more information.</i></p> <ul style="list-style-type: none"> <li>• <i>Receives services in a licensed or registered setting (i.e. Foster care or jail)</i></li> <li>• <i>Is on the Minnesota Restricted Recipient Program (MRRP)</i></li> <li>• <i>Exits the waiver or AC program more than once during the service plan year</i></li> </ul> <p><i>Lead Agency has the authority to determine whether the CDCS plan meets the health and safety needs of the person.</i></p>
<p><b>Waiver Criteria for allowable &amp; unallowable expenditure</b></p>	<p>Good and services must be approved <b>prior</b> to purchasing of goods or accessing service(s). Anoka County is responsible for ensuring all goods and services meet Waiver and CDCS Criteria.</p> <p><u><a href="#">Allowable expenditure</a></u></p> <p><i>Since covered CDCS goods and services are paid for with waiver funds, they must meet waiver criteria for allowable expenditures. A good or service is an allowable waiver expenditure if it is:</i></p> <ul style="list-style-type: none"> <li>• <i>For the direct benefit of the person</i></li> <li>• <i>Included in the person’s CDCS community support plan (CSP)</i></li> <li>• <i>Necessary to meet one of the person’s assessed needs</i></li> <li>• <i>Related to the person’s disability and/or condition (BI, CAC, CADI and DD only).</i></li> </ul> <p><i>Waiver funds cover only those goods and services in the person’s CSP that collectively represent a feasible alternative to institutional care. Goods and Services must be prior approved and written into the plan before the good or service is utilized/purchased.</i></p> <p><i>All Services and goods should be cost efficient or may have suggested limits. Suggested limits are included as a guide to what is the least costly and most effective way to meet the participants assessed needs. Requested amounts beyond what is suggested will require additional written documentation at the discretion of Lead Agency.</i></p> <p><i>Waiver funds may be used to promote community integration. This includes paying for extra support and expertise to ensure participants can live as independently as possible in their homes and communities.</i></p>

<p><b>Waiver Criteria for allowable &amp; unallowable expenditure continued...</b></p>	<p><b>Services outside of Minnesota:</b></p> <ul style="list-style-type: none"> <li>Utilizing CDCS in bordering states is allowed. Direct support staffing while on a vacation in any State is allowed.</li> <li>CDCS cannot be utilized outside of the United States.</li> <li>If you are going to be out of state for an extended period of time, consults with your case manager regarding services.</li> </ul> <p><i>The goods and services approved in the person’s CDCS Community Support Plan (CSP) must be categorized into one of four service categories:</i></p> <ul style="list-style-type: none"> <li><b>Personal Assistance:</b> CDCS service category that includes services to help a person with his/her activities of daily living (ADLs) and instrumental activities of daily living (IADLs) through hands-on assistance, cues, prompts and instruction.</li> <li><b>Treatment and Training:</b> range of services that increase a person’s ability to live and take part in the community</li> <li><b>Environmental modifications and Provisions:</b> Support, services and goods provided to a person to maintain a physical environment that: <ul style="list-style-type: none"> <li>Helps the person live and participate in his/her community</li> <li>Is required to support the person’s health and safety.</li> </ul> </li> <li><b>Self-direction Support Activities:</b> CDCS category of service that includes services, supports and expenses incurred for administering or helping the person or representative administer CDCS.</li> </ul> <p>Other allowable services include <a href="#">MA Home Care</a> and Traditional Waivered Services.</p> <p><b>Unallowable expenditures:</b>  <b>Items that are starred * throughout the Anoka County CDCS Expenditure Guidelines and in the <a href="#">Unallowable Expenditure Section</a> are unallowable per the CDCS Manual and/or do not typically meet waiver eligibility criteria.</b></p> <p><i>A good or service is an unallowable waiver expenditure if it:</i></p> <ul style="list-style-type: none"> <li>Duplicates other goods or services in the CDCS CSP</li> <li>Is available through other funding sources.</li> <li>Is not the least costly and most effective way to meet the person’s needs</li> <li>Is provided prior to the CDCS CSP’s development</li> <li>Supplants natural supports that appropriately meet the person’s needs</li> </ul>
<p><b>Waiver Advisory Committee (WAC)</b></p>	<p>The Waiver Advisory Committee (WAC) is a multidisciplinary team of county and contracted professionals. WAC meets regularly to provide consultation and/or direction regarding the implementation of CDCS. The Lead Agency can recommend revisions to a plan that does not appear to meet reasonable health and safety standards.</p>
<p><b>Plan Approval and Changes to Approved Plan</b></p>	<p><b>Plan Approval:</b> The Lead Agency is responsible for reviewing and approving the Community Support Plan (CSP). The Lead Agency has up to 30 days to review the CSP. The CSP is approved on the day that the Lead Agency Representative signs it. If your CSP is submitted less than 30 days prior to the start or renewal date, it may not be fully reviewed and approved in time. If this occurs, expenditures may not be approved back to the renewal date.</p>

<p><b>Plan Approval and Changes to Approved Plan continued...</b></p>	<p><b>CDCS Revisions or Additions/Amendments to the Plan:</b> The approved CSP is considered the plan in effect unless and until any proposed changes are submitted to the Case Manager and approved. The Community Support <a href="#">Addition/Addendum form</a> must be submitted and approved by the Lead Agency when:</p> <ul style="list-style-type: none"> <li>• Adding an item or service to the community support plan and/or</li> <li>• Revising the wage and/or work schedule for a paid parent of minor or spouse</li> </ul> <p>Additions/addendums to the CSP may be submitted <b>once a month</b> unless an immediate health and safety need arises.</p> <p>Moving funds from one approved item/service in the CSP to another does not necessarily require completion of an Addition/Addendum Form. This type of change may be done electronically through email from the participant to the case manager for approval. The request must still meet CDCS Guidelines and WAC may still be consulted.</p> <p><b>Changes to CSP 30 days prior to the end of the plan year are not allowed</b>, unless approved by the Case Manager for reasons of critical and immediate health and safety. This does include moving funds from one already approved category to another.</p>
<p><b>Budgets</b></p>	<p>Each person’s annual state-set budget is determined by the participant’s MnChoices Assessment. The individual budget for a person using CDCS must include the costs of all waiver services and Medical Assistance (MA) state plan home care services.</p> <p>The State Set budget is a <b>maximum</b> allocation. However, Minnesota does allow for Exceptions to the Budget Methodology and Enhanced Budgets in certain situations.</p> <ul style="list-style-type: none"> <li>• See the <a href="#">CDCS Manual Exception to Budget Methodology</a> page for details. Examples include: <ul style="list-style-type: none"> <li>○ Employment/Structured Day</li> <li>○ Formal Behavioral assessment and/or supports</li> <li>○ Moving to own home</li> </ul> </li> <li>• See the <a href="#">Enhanced Budget Page</a> for details.</li> <li>• Remaining funds do not roll over from one plan year to the next</li> </ul> <p>Budgets may occasionally be adjusted by legislative authority; an example is Cost of Living Adjustments (COLA). See the <a href="#">CDCS Manual</a> for more information.</p> <p><b>EW/AC Participants:</b> Participants on AC/EW may not exceed their State Set Monthly Budget. If this occurs, the case manager will issue a <a href="#">Technical Assistance</a> and the participant is responsible for paying the funds back.</p>

## Personal Assistance:

<p><b>Definition</b></p>	<p><a href="#">Personal Assistance</a> CDCS service category that includes services to help a person with his/her activities of daily living (ADLs) and instrumental activities of daily living (IADLs) through hands-on assistance, cues, prompts and instruction.</p> <p>Personal assistance may include:</p> <ul style="list-style-type: none"> <li>• Help with ADLs (e.g., bathing, eating, dressing)</li> <li>• Help with IADLs (e.g., shopping, basic home maintenance, help with paying bills, laundry, meal preparation)</li> <li>• Caregiver relief</li> <li>• Companionship</li> <li>• Mobility and transfer support</li> <li>• Behavioral redirection</li> </ul> <p>Whenever there is a staffing need for personal assistance, the worker must either be hired through the FMS or through a 245d licensed service. Recruitment services may be paid using waiver funds, but staff must then get hired through the FMS.</p> <p>Participants using the DD Waiver to access CDCS are required to address <a href="#">habilitative</a> (skill building) needs. See <a href="#">CBSM</a> for more information.</p>
<p><b>Support Staff</b></p>	<p><b>General:</b> If you are a Parent or Spouse being paid see <a href="#">PPOM/Spouse section</a> for more details.</p> <p>Staff Requirements:</p> <ul style="list-style-type: none"> <li>• A <a href="#">job description</a>; this can be part of the CSP or a supporting document. All job tasks must qualify as Personal Assistance activities. Staff must meet the qualifications and training determined by the Managing Party to do the job.</li> <li>• Pass a <a href="#">Net 2.0 background study</a></li> <li>• Have a <a href="#">Unique Minnesota Provider Identifier</a> (UMPI) number</li> <li>• Must be employable in the United States.</li> </ul> <p>CDCS Support Staff cannot complete tasks that require a license and/or oversight- i.e. Licensed Practical Nurse (LPN), Registered Nurse (RN), Personal Care Assistance (PCA), etc.</p> <p><b>Hours/Wage:</b></p> <p>The participant and/or their representative determines the hourly rate for the direct service provider. Rates must be:</p> <ul style="list-style-type: none"> <li>• Within a reasonable range of similar services in the person’s community</li> <li>• Aligned with the skills and experience required to perform the job tasks the person needs.</li> </ul> <p>Suggested customary range is the Service Employees International Union(SEIU) minimum wage to the current maximum PCA rate. If the requested wage exceeds the current PCA rate, justification based on the below criteria must be documented in the CSP.</p> <ul style="list-style-type: none"> <li>• Experience</li> <li>• High Medical or Behavioral needs</li> <li>• Training and/or education</li> </ul>

<p><b>Support Staff continued...</b></p>	<p>Wages need to be comparable to “like” services in the community in which the participant resides. The suggested maximum wage is up to 15% of the current PCA rate, at the discretion of the lead agency.</p> <p>Typically, staff are limited to 40 hours/week. Intermittent overtime is allowed at 1.5% their current wage but must be <b>prior approved</b> in the CSP or through a Community Support Addition/Addendum form. Examples include staff providing hourly caregiver relief over a weekend or short staffed for a limited period so other staff must work more hours (i.e. staff on vacation).</p> <p><b>Staff Benefits:</b></p> <p><b>Paid Time Off (PTO):</b> All staff will accrue PTO according to the SEIU union contract unless staff qualify for and choose to Opt Out. Contact your FMS for more details. There is a limited number of hours that can be carried over from year to year. PTO must be documented in Self-Directed Service Category. Please contact your FMS provider for further direction regarding how to access and/or utilize earned PTO.</p> <p><b>Holiday pay:</b> According to the SEIU contract, if any staff work the following holidays, they must be paid 1.5% of their typical wage: New Year’s Day, Martin Luther King Day, Memorial Day, Labor Day, and Thanksgiving Day. Additional holidays may be prior approved by the managing party.</p> <p><b>Additional sick time or vacation time:</b> Allowable if written into the plan and <b>prior</b> approved by the lead agency.</p> <p><b>Bonus:</b> A bonus must relate to an overall compensation package and outcomes achieved by staff.</p> <ul style="list-style-type: none"> <li>• The CSP must include: <ul style="list-style-type: none"> <li>○ The timeframe the bonus is to be given</li> <li>○ Amount to be given</li> <li>○ Outcomes achieved (e.g. punctual, longevity, specialized training, etc.)</li> </ul> </li> <li>• A bonus must be <b>prior</b> approved at least two months before usage and must be a reasonable amount as determined by the waiver advisory committee.</li> <li>• A bonus cannot be paid as a signing bonus, holiday bonus or to use up remaining funds in the budget.</li> <li>• Parents, legal guardians, and spouses cannot be paid a bonus.</li> <li>• Bonuses that exceed \$1000/staff will be reviewed by WAC.</li> </ul> <p><b>Dental or Health Insurance:</b> The employer portion of health or dental insurance may be paid to staff if participant agrees. Typically, the employer may pay up to 75% of the premium. Eligible staff must work 30 hours/week</p> <ul style="list-style-type: none"> <li>• PPOM/Spouses must fit this benefit within their wage limit</li> <li>• Family policies are not allowed</li> <li>• Must indicate cost effective use of Waiver Funds</li> <li>• This must be documented in Self-Directed Category</li> </ul>
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<p><b>Support Staff continued...</b></p>	<p><b>Special Considerations:</b></p> <p><b>Paying Parents of Minors or Spouses:</b></p> <p><i>The personal assistance services for which the spouse or parent of a minor is paid must:</i></p> <ul style="list-style-type: none"> <li>• <i>Fall within the description and allowable costs of the personal assistance service category</i></li> <li>• <i>Be related to the person's disability or functional limitation</i></li> <li>• <i>Be directly related to an assessed need. The Participant must have at least one identified ADL dependency in their MnChoice Assessment to qualify</i></li> <li>• <i>Not be an activity a spouse or parent of a minor would ordinarily perform or be responsible to perform. These activities may include, but are not limited to, age-appropriate supervision or transportation of children, or average household maintenance (e.g., house cleaning, meal preparation, laundry). If the spouse or parent must assist the person with tasks beyond what is considered ordinary responsibility (e.g., doing additional laundry for a 12-year-old child who is incontinent), the spouse or parent may be paid.</i></li> </ul> <p>Support is limited to 40 hours per week regardless of the number of minor children with disabilities and/or the number of parents being paid.</p> <p>Households with <b>more than one</b> participant receiving CDCS must:</p> <ul style="list-style-type: none"> <li>• submit a general family staffing schedule, and</li> <li>• use the same FMS.</li> </ul> <p>The wage range is the SEIU minimum wage up to the current state set PCA rate including all taxes, fees and benefits. Check with your FMS for their maximum gross wage.</p> <p>Work schedule needs to identify general days of the week AND am or pm hours (i.e. 2 hours in the morning on Mondays). Exact hours on time sheets may vary week to week but should reflect actual time worked. If child is on a modified school schedule, document this so that hours worked during typical school hours are not in question. Total hours per pay week cannot exceed the approved hours per week in the plan. A CDCS Technical of Assistance will be issued if hours exceed approved weekly hours.</p> <p>PPOM and spouses cannot be paid to train their staff, schedule appointments for the participant, service coordination/support planning and/or other administrative tasks. Waiver funds cannot be used by PPOM or Spouses to be paid as a nurse. Hardship Waivers are not allowed with CDCS.</p> <p>Foster Care Setting: See Conditions for licensed residential settings category in <a href="#">CDCS Manual</a>. If you have questions about this contact your Case Manager.</p> <p>PPOM/Spouse should see the section entitled, <a href="#">Exclusion Rule/IRS Notice 2014-7</a> for important information regarding possible tax exclusions.</p> <p>Note: If you have questions regarding Nursing Tasks for Parent's being paid for support see the <a href="#">CDCS and Home Care Frequently Asked Questions</a>.</p>
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<p><b>Support Staff continued...</b></p>	<p><b>Shared Services:</b> Services provided at the same time by the same direct support worker to two or three CDCS participants who have entered into an agreement to share CDCS services. See <a href="#">CDCS Manual</a> for more information about the language needed in the CSP as well as:</p> <ul style="list-style-type: none"> <li>• The person enters into a written shared services agreement, <a href="#">DHS Edoc 6633D</a> <ul style="list-style-type: none"> <li>○ This also requires a family schedule including all staff be submitted either on 6633D, in plan, or a separate document.</li> </ul> </li> <li>• The people sharing services use the same financial management services (FMS) provider</li> <li>• Paid Parents of Minors can utilize Shared Services and need to follow the current licensed, shared services PCA rate minus benefits to determine their maximum wage.</li> </ul> <p>Customary and reasonable age range is SEIU minimum wage up to 1.5 times the staff's 1:1 wage. You must obtain WAC approval for anything above this. Document in CSP: hourly wage and split the hours E.g. \$30/hr. for 10 hours in each plan</p> <p><b>Double staffing</b> (2 staff to 1 client) is allowed if <b>prior</b> approved and specified when appropriate in the CSP. Examples include behavioral or physical needs that require 2 staff at the same time, On the Job Training with another staff or if 2 staff are attending an approved community training. This must be approved in the CSP so that overlapping hours will not be questioned.</p> <p><b>Caregiver Relief:</b> Short term care service intended to provide relief to a primary caregiver. Relief may be provided in or out of the participant's primary home setting.</p> <ul style="list-style-type: none"> <li>• Other Family Members who live in the family home cannot provide Care Giver Relief</li> <li>• Care giver relief staff can accompany the participant to activities in the community.</li> <li>• Care giver relief staff must be paid for all hours he/she is with the participant, including sleep time. <ul style="list-style-type: none"> <li>Ex: Caregiver relief staff picks up participant at 3 pm on a Saturday and drops participant off at 3 pm on Sunday. The staff is paid for 24 hours straight.</li> </ul> </li> </ul> <p><b>Environmental Support (by an individual hired through FMS):</b>  Providing a clean, sanitary, and safe home environment is a typical parental or household responsibility. When there are other capable persons living in the home, environmental supports may not be approved. Staff may be hired to primarily perform deep cleaning tasks and/or outdoor chores. The lead agency will evaluate the participant's unique needs (including living in family home or own home) and household dynamics to determine what support is needed, <b>above and beyond what is typical</b>, to maintain a clean, sanitary, and safe home environment.</p> <p>Light housekeeping tasks such as daily or routine sweeping/mopping, vacuuming, dusting, wiping counters/appliances, picking up of clutter and/or trash are considered typical parental and/or resident responsibilities. When light housekeeping tasks are directly related to participant's activities throughout the day this can be considered Support Staff responsibility/job duty.</p>
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<p><b>Support Staff continued...</b></p>	<p>Things to Consider for Environmental Services:</p> <ul style="list-style-type: none"> <li>• CDCS funds are intended to help a participant function with greater independence. If the participant is able and/or interested in learning these tasks as part of developing their IADL's, staff and caregivers should provide support and training for the participant to learn necessary skills.</li> <li>• Environmental Supports are not intended to supersede typical homeowner responsibilities (I.e. Daily or routine sweeping/mopping, vacuuming, dusting, wiping counters/appliances) unless there are no other capable persons in the home or staff are unable to complete these tasks.</li> <li>• Services are limited to certain indoor areas: the primary living space of the participant including the bedroom, bathroom, kitchen and other common areas.</li> <li>• Additional consideration may be given for participants who have medical needs that require additional support above and beyond what is typical in maintaining a clean, sanitary, and safe environment.</li> <li>• If hiring an independent contractor, consult with FMS to determine whether qualifications are met.</li> </ul> <p>Adult Participants: When the participant is unable to perform general house cleaning and other household activities due the his/her functional limitations, an individual may be hired to assist with light or deep house cleaning, home management (grocery shopping, scheduling appt., laundry, household repairs, etc.), and or assisting with ADL's.</p> <p>The CSP must include frequency and hourly costs. Customary amounts include up to 8hrs/month for deep cleaning, 2x/month for lawn mowing and as needed for snow plowing. Typically, this should not exceed \$5,000/household.</p>
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**Treatment and Training:**

<p><b>Definition</b></p>	<p><a href="#">Treatment and Training</a> has a range of services that increase a person's ability to live in and take part in their community.</p> <p>Skill building activities that may include the use of Day/Employment Services, Alternative Therapies, Specialized Diets, Training/Education for caregivers or participants and all other <a href="#">waiver licensed services</a>.</p> <p>Participants on the DD waiver MUST have at least one skill acquisition service or <a href="#">habilitative</a> activity clearly detailed in their plan.</p>
<p><b>Adapted Community Classes and Activities</b></p>	<p>Adapted Community classes or activities are fundable when they address a MnCHOICES assessed need and are related to a specific goal in the CSP. Examples include but are not limited to, Miracle League or Special Olympics. The lead agency may request specific documentation on how the activity is adapted to meet assessed needs.</p>

<p><b>Adapted Community Classes and Activities continued...</b></p>	<p><b>Things to consider:</b></p> <ul style="list-style-type: none"> <li>• Cannot pay admission or activity fees that are recreational in nature, strictly for socialization or typically paid for by a person (or parent of a minor) without a disability (i.e. school sports activities, music lessons and community Ed. Classes). However, waiver funds could be used to pay for transportation, staffing support, or the extra cost of the class due to adapting it.</li> <li>• Community Classes and activity instructors may require a certification or license</li> <li>• Adapted equipment required to participate in activity is fundable.</li> <li>• Waiver Advisory Committee may determine partial or full payment based on a case by case basis</li> </ul> <p><b>Special Considerations:</b></p> <p><b>Adapted Swim Lessons:</b> CDCS Funds may be used for Adapted swim lessons when needed to ensure the child’s health and safety. Suggested limit is \$75/lesson.</p> <ul style="list-style-type: none"> <li>• Learn basic water safety for use at public pools, homes and natural bodies of water</li> <li>• Learn how to communicate if in trouble (e.g. how to ask for help)</li> <li>• Learn how to keep afloat in water and get him/herself to safety (ex. Tread water and get to pool wall)</li> <li>• CDCS will NOT fund advanced swimming beyond basic health and safety tools.</li> <li>• Instructor will be certified by the American Red Cross as” Basic Swim instructor (BSI) or hold an equivalent certification and the ability to produce it upon request.</li> <li>• Anoka County may request a copy of the instructor certificate and/or information about the class.</li> </ul> <p>Documentation of progress is required at renewal time. This can be obtained via the <a href="#">Adapted Swimming Lesson Verification Form</a>, swim agency’s form, or assure ALL information is listed within the CSP.</p> <p><b>Fitness classes/memberships (Adults only):</b> Allowable when it is recommended and monitored by a participant’s primary MHCP physician/nurse practitioner to improve or maintain the participant’s physical condition or behavioral health. Requires an Alternative Therapy/Treatment form.</p> <p>Home fitness equipment will be considered if needed to treat a medical condition and is more cost effective than other explored options.</p>
<p><b>Alternative or Specialized Therapy/Treatment</b></p>	<p>Non-experimental therapies or treatments not currently available through insurance must be prescribed by a MHCP physician or nurse practitioner (APRN certified). Complete the <a href="#">CDCS Alternative or Specialized Therapy/Treatment Form</a></p> <ul style="list-style-type: none"> <li>• Examples include music therapy, hippotherapy, therapeutic listening program, massage therapy, aquatic therapy, cognitive/educational therapy, behavioral therapy, feeding therapy, biofeedback, etc.</li> <li>• The prescribed therapy/treatment must be provided by a therapist licensed or certified according to the Provider Qualifications requirements in the <a href="#">Lead Agency Manual Section 7.2.</a></li> <li>• Related equipment and allowable supplies needed for the therapy/treatment (e.g. headphones, diffusers, etc.) are allowed and do not require a separate physician’s statement, however, must be reasonable and cost effective.</li> </ul>

<p><b>Alternative or Specialized Therapy/ Treatment continued...</b></p>	<ul style="list-style-type: none"> <li>• Waiver Advisory Committee may request a specific plan be submitted by a professional in the industry to help recommend and monitor appropriate treatment and to determine what is reasonable and customary, and cost effective</li> <li>• A Completed Alternative or Specialized Treatment Form does not guarantee approval, the therapy or treatment must still meet all waiver criteria.</li> </ul>
<p><b>Camp</b></p>	<p>Adaptive camps are allowed if it meets an assessed need and outlines specific skill building that is occurring during the camp experience. Residential camps (overnight) must be licensed per their industry.</p> <ul style="list-style-type: none"> <li>• Non- adapted camp registration is typically considered parental responsibility. The disability related need is paying for extra staffing support to attend. If the non-adapted camp needs to charge a higher fee to accommodate and support the participant, waiver funds can be used to pay the difference or CDCS can pay their own staff to attend with them.</li> </ul> <p>Camp outside of MN is only allowed in the bordering states of WI, Iowa, SD, and ND.</p>
<p><b>Licensed Waiver Services &amp; Non-Home Care Services</b></p>	<p>The person can use his or her individual CDCS funds to purchase any of the waiver/AC goods and services currently available under the program he or she is on. <a href="#">Click link for more information about traditional AC/Waiver Services.</a></p> <p>Examples include: <a href="#">in home family support</a>, <a href="#">independent living skills</a>, <a href="#">specialist services</a>, <a href="#">Employment Services</a>, <a href="#">Remote Support</a>, <a href="#">Respite</a>, <a href="#">homemaker services</a>, etc.</p> <p>Rates are set by the State of MN (Waivered Rate management Rules apply for licensed 245D providers). Licensed waiver services in this section must be billed through the FMS.</p> <p>All traditional waiver/AC goods and services the person selects must meet all the program-specific provisions, such as:</p> <ul style="list-style-type: none"> <li>• Provider standards and qualifications</li> <li>• Quality assurance mechanisms</li> <li>• Rates</li> <li>• Service description.</li> </ul> <p><b>MA Home Care Services</b> are listed separately in the CSP in the MA Home Care Section. This includes PCA services, Skilled Nursing, home health aide and private duty nursing as these services are billed directly by the home care agency. See <a href="#">MA Home Care Services Section</a> for more information.</p>
<p><b>Support Staff for Skill Acquisition</b></p>	<p>Typically, staff are hired under Personal Assistance unless that staff person is qualified and hired to work only on a specific skill area. Examples include a staff hired to assist with learning job skills or a staff hired to work on a goal in the behavior plan or sensory needs. These staff would meet a specified number of times/weeks for a pre-determined amount of time.</p> <p>See Personal Assistance for more information on employment specific information for <a href="#">Support Staff</a>.</p>

<p><b>Training and Education</b></p>	<p><b>Educational Costs</b> – typically not waiver fundable when participant is still enrolled in primary or secondary school. Schools are considered financially responsible.</p> <ul style="list-style-type: none"> <li>• Tuition fees and transportation for a private school or homeschooling are not fundable.</li> <li>• To avoid confusion, general staffing schedules should try to avoid listing typical school time hours. If participant has a modified school schedule, it is helpful to identify that in the CSP.</li> </ul> <p><b>Post-Secondary Settings:</b> Post-secondary school tuition for a degree is NOT fundable.</p> <ul style="list-style-type: none"> <li>• CDCS can fund the Staffing support, Independent Living skills and Employment skills training in post-secondary settings. It cannot fund tuition, room and board and food plans as these would be typical student responsibility.</li> <li>• A detailed breakdown of the different costs is required either in the plan or as a supporting document.</li> </ul> <p><b>Training/Workshops:</b> Available for the participant, paid and unpaid caregivers. Registration fees and materials for conferences and workshops may be fundable.</p> <ul style="list-style-type: none"> <li>• Staff time for attending the workshop is allowed.</li> <li>• *Expenses for travel, lodging or meals related to training are not fundable.</li> <li>• The description and cost for each training is required in the CSP or Addendum</li> <li>• Training outside of MN is only allowed in bordering states of WI, Iowa, SD, and ND.</li> <li>• Educational books, DVDs, magazines/periodicals related to the person’s disability/condition is allowable.</li> <li>• On-line based training is allowable.</li> </ul> <p><b>Tutoring:</b> Allowed when it is above and beyond what school is required to provide based on the student’s IEP/IIIP.</p> <ul style="list-style-type: none"> <li>• Must not be used as a school or home-schooling substitute</li> <li>• Can use a qualified individual or a tutoring agency.</li> <li>• Tutors must be licensed or certified teachers/instructors</li> <li>• Direct staff may not be paid to implement online or home school options</li> <li>• Progress Reports may be requested as determined by the Lead Agency.</li> <li>• Must be cost-effective</li> </ul> <p><b>Person Centered Thinking and Planning:</b> This is a facilitated discovery process to help participants and family members gain clarity in what is possible for the future and to express what they desire for their lives over their life span. Ask your case manager for a list of facilitators or practitioners. May utilize 245D licensed providers or unlicensed similar programs.</p>
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## Environmental Modifications and Provisions:

<p><b>Definition</b></p>	<p><u><a href="#">Environmental Modifications and Provisions</a></u> are supports, services and goods provided to a person to maintain a physical environment that:</p> <ul style="list-style-type: none"> <li>• Helps the person live and participate in his/her community</li> <li>• Is required to support the person’s health and safety.</li> </ul> <p>Environmental modifications and provisions include:</p> <ul style="list-style-type: none"> <li>• home/vehicle modifications</li> <li>• assistive technology</li> <li>• monitoring technology</li> <li>• transportation</li> <li>• environmental supports</li> <li>• supplies and equipment</li> <li>• special diets</li> <li>• adaptive clothing</li> <li>• home delivered meals</li> </ul> <p>Some items that are over \$1,000 may require 2 bids to determine cost effectiveness unless an enrolled professional is used to specifically assess for the most appropriate product and fit. An insurance denial may be requested on some items prior to approval.</p>
<p><b>Home/Vehicle Modification</b></p>	<p><u><a href="#">Physical adaptations</a></u> to a person’s primary home or primary vehicle to ensure the person’s health and safety or enable the person to function with greater independence.</p> <p>A person is eligible to receive this service if the home or vehicle modification is:</p> <ul style="list-style-type: none"> <li>• For the person’s direct and specific benefit</li> <li>• Necessary to ensure the person’s health and safety or enable the person to function with greater independence</li> <li>• Necessary to meet the person’s assessed needs.</li> </ul> <p>EAA expenses include assessments and installations of home and vehicle modifications. See specific sections for services covered under each part. For additional guidance (e.g., new construction, used vehicle modifications), see:</p> <ul style="list-style-type: none"> <li>• <u><a href="#">CBSM – Additional information about EAA</a></u></li> <li>• <u><a href="#">CBSM – Guide to home modifications under EAA</a></u></li> </ul> <p>An assessment may be required to help determine the most appropriate and/or cost effective products/modifications. For Home and Vehicle Adaptions that exceed \$5,000, Anoka County requires the use of an enrolled Home Modification Assessor (HMA) and only uses DHS Enrolled Providers/Contractors.</p> <p>EAA Projects, including Assistive Technology Equipment and Monitoring Technology Equipment, that exceed \$5,000 may potentially access outside funding if approved by the lead agency AND follows the EAA process. EAA Projects for home and vehicle modifications may be funded for up to \$40,000 (DD, CADI, BIA, CAC) and \$20,000 (EW/AC) each 12 month service plan. Ask your Case Manager for further information.</p>

<p><b>Home/Vehicle Modification continued...</b></p>	<p><i>Regardless of the number of modifications and technology items needed during the plan year, the person's required annual contribution from their CDCS budget is limited to \$5,000. If a person chooses to use more than \$5,000 from his/her budget, he/she can choose to do so.</i></p> <p>Per Anoka County Policy, any item over \$1,000 requires at least 2 bids to determine cost effectiveness unless specifically utilizing an Enrolled Professional that is already assessing for the most appropriate product and fit. An insurance denial may be requested on some items prior to approval.</p> <p>Anoka County has worked with Enrolled Home Modification Assessors (HMA) and Enrolled Contractors to help determine customary and reasonable costs, limits, and modifications that meet waiver criteria. Ask your Case Manager for more details.</p> <p><b>Allowable modifications/adaptations include but are not limited to:</b></p> <ul style="list-style-type: none"> <li>• Modifications to bathrooms, including grab bars</li> <li>• Ramps</li> <li>• Vehicle Adaptions</li> <li>• Flooring Adaptations</li> <li>• Stairs/Ceiling Lift</li> <li>• Modifications to address behaviors (will require a behavioral supports/recommendations)</li> <li>• Repairs to adapted equipment</li> </ul>
<p><b>Assistive Technology</b></p>	<p><b>Assistive technology:</b> Devices, equipment or a combination of both that improve the person's ability to:</p> <ul style="list-style-type: none"> <li>• Communicate in the community</li> <li>• Control or access his/her environment</li> <li>• Perform activities of daily living.</li> </ul> <p><b>Special Considerations:</b></p> <p><b>Computer/Tablet:</b> Maximum limit for device(s) up to \$1000 every 3 years including typical accessories (i.e. Cases). Computer/tablets are intended to assist the person with developing life skills and gaining independence. It is encouraged to work with an appropriate professional to explore different devices, apps and even equipment rental/trials to find the best fit. Participant must obtain supporting documentation, see <a href="#">Computer/Tablet Request Form</a>.</p> <ul style="list-style-type: none"> <li>• Appropriate Professionals may include OT, Speech Therapist, behavior specialist and/or Assistive Technology evaluators. These professionals can aid with equipment rental/trial periods, training and technical assistance to the participant and caregivers and ensures the participant is able to utilize the product.</li> <li>• A protective case is <b>required</b> for all tablets.</li> <li>• Malware may be considered based on an assessed need or disability.</li> <li>• Under special circumstances such as a history of destructive behavior, service plans and/or repair will be allowed if cost effective and necessary to keep the device functional. <b>CDCS cannot pay for warranties.</b></li> <li>• Discuss with your Case Manager whether an assessment is needed for a replacement device.</li> </ul>

<p><b>Assistive Technology continued...</b></p>	<ul style="list-style-type: none"> <li>Least costly options need to be explored such as: tablet vs computer, brands, storage space, and/or other cost effective locations/services to purchase devices (E.g. PC’s for People, Device Pitstop).</li> </ul> <p>Allowable uses:</p> <ul style="list-style-type: none"> <li>iPad/tablets funded through CDCS MUST have other uses beyond communication (e.g. emotional regulation, behavioral, scheduling, etc.)</li> </ul> <p>Unallowable uses:</p> <ul style="list-style-type: none"> <li>Exclusively used for communication purposes (MA fundable)</li> <li>CDCS does NOT pay for computers for the purpose of enhancing educational experiences or solely for Self-direction purposes.</li> <li>Computers requested solely for employment related activities are not typically allowed. There are more cost-effective options such as the library MN Workforce Center, etc.</li> </ul> <p><b>Applications &amp; Software:</b> Cost of applications and software must be for skill acquisition based on assessed needs that are documented in the CSP.</p> <ul style="list-style-type: none"> <li>Examples include: Educational software, apps for behavior, time management, etc.</li> <li>Documentation/recommendation from a professional (e.g. participant’s licensed OT/Speech/Behavioral Therapist) is required for any apps or software over \$75.</li> <li>Educational software/apps must be non-age appropriate to be considered.</li> </ul> <p><b>Global Positioning Device (GPS):</b> The device and the monthly monitoring fee are allowable to assist the participant with navigating their community, providing reminders to the participant as well as communicating with caregivers. See <a href="#">Monitoring Technology Usage</a> for more information on what is allowed and other forms needing to be completed.</p> <p><b>Internet Access:</b> Must be most effective way to meet participant’s outcomes/goals of assessed needs.</p> <ul style="list-style-type: none"> <li>Initial costs for set-up and equipment if necessary, for Internet service’s operation (e.g. router, modem, equipment lease, etc.)</li> <li>Equipment maintenance and repair Must be basic internet (e.g. not highspeed) AND for the participant only. If participant shares cost of internet with others, the suggested shared cost limit is up to \$20/month.</li> <li>Participants will be expected to submit their internet bill (itemized if sharing the cost or bundled) to the FMS for reimbursement.</li> </ul>
<p><b>Environmental Supports</b></p>	<p>Providing a clean, sanitary, and safe home environment is a typical parental or household responsibility. When there are other capable persons living in the home, environmental supports may not be approved. A company may be hired to perform primarily deep cleaning tasks and/or outdoor chores. The lead agency will evaluate the participant’s unique needs (including living in family home or own home) and household dynamics to determine what support is needed, <b>above and beyond what is typical</b>, to maintain a clean, sanitary, and safe, home environment.</p>

<p><b>Environmental Supports continued...</b></p>	<p>Contracts with the professional companies are allowed but will be paid out as services are rendered. Work with your FMS regarding payment details. Licensed <a href="#">homemaker services</a> may also be utilized under treatment and training.</p> <p>Light housekeeping tasks such as daily or routine sweeping/mopping, vacuuming, dusting, wiping counters/appliances, picking up of clutter and/or trash are considered typical parental and/or resident responsibilities. When light housekeeping tasks are directly related to participants activities throughout the day this can be considered Support Staff responsibility/job duty.</p> <p>Other Things to Consider:</p> <ul style="list-style-type: none"> <li>• CDCS funds are intended to help a participant function with greater independence. If the participant is able and/or interested in learning these tasks as part of developing their IADL's, staff and caregivers should provide support and training for the participant to learn necessary skills.</li> <li>• Environmental Supports are not intended to supersede typical homeowner responsibilities (i.e. Daily or routine sweeping/mopping, vacuuming, dusting, wiping counters/appliances) unless there are no other capable persons in the home or staff are unable to complete these tasks.</li> <li>• Services are limited to certain indoor areas: the primary living space of the participant including the bedroom, bathroom, kitchen and other common areas.</li> <li>• Additional consideration may be given for participants who have medical needs that require additional support above and beyond what is typical in maintaining a clean, sanitary, and safe environment.</li> </ul> <p>Adult Participants: When the participant is unable to perform general house cleaning and other household activities due to his/her functional limitations, an individual may be hired to assist with light or deep house cleaning, home management (grocery shopping, scheduling appt., laundry, household repairs, etc.), and or assisting with ADL's.</p> <p>The CSP must include frequency and hourly costs. Customary amounts include up to 8hrs/month for deep cleaning, 2x/month for lawn mowing and as needed for snow plowing. Typically, this should not exceed \$5,000/household.</p> <p><b>Special Considerations:</b></p> <p><b>Car Cleaning Services</b> (Professional Cleaning): Interior car cleanings due to incontinence or bodily fluids and related to the participants disability/condition are allowed. Lead Agency may request a prevention plan.</p> <ul style="list-style-type: none"> <li>• Not allowed for normal wear and tear such as food stains or spills.</li> </ul> <p><b>Carpet Cleaning</b> (Professional Cleaning): Customary limit of 2x/year. Allowed due to incontinence or bodily fluids, not due to normal wear and tear. Participant/family and Case Managers need to discuss what is the most cost-efficient way to meet the need.</p> <ul style="list-style-type: none"> <li>• Professional cleaning</li> <li>• Rental of a carpet cleaner (family or cleaning service may use)</li> <li>• Replacement of carpet with hard flooring</li> </ul> <p><b>Childcare</b> For children 10 and under: May consider the difference between the cost of regular day care and specialized day care due to the disability.</p>
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<p><b>Monitoring Technology</b></p>	<p><b><u>Monitoring Technology:</u></b> <i>The use of equipment to oversee, monitor and supervise someone who receives waiver/AC services. It can help keep people safe and support independence. The equipment used may include alarms, sensors, cameras and other devices.</i></p> <p><i>Monitoring technology equipment usage and supervision must meet the following four requirements:</i></p> <ol style="list-style-type: none"> <li>1. <i>Allow a caregiver to see, hear or locate a person</i></li> <li>2. <i>Be the most appropriate means (and the person’s preferred method) to address assessed need(s) and goal(s)</i></li> <li>3. <b>Monitor the person in real time</b></li> <li>4. <i>Achieve one of the following:</i> <ul style="list-style-type: none"> <li>○ <i>Increase independence</i></li> <li>○ <i>Address a complex medical condition or other extreme circumstance</i></li> <li>○ <i>Reduce or minimize critical incidents</i></li> <li>○ <i>Improve the quality of supports.</i></li> </ul> </li> </ol> <p>Monitoring Technology must be for an individual, cannot be shared, it would follow the person if and/or when they moved. It cannot be used for convenience of the caregiver/support staff or to monitor other support staff.</p> <p>Anoka County may require an Assessment be completed to determine most appropriate products/services.</p> <p>A Participant consent for Use of Monitoring Technology, <a href="#">MN edoc # 6789B</a> and if applicable the Affected Participant Consent for Monitoring Technology, <a href="#">MN edoc #6789C</a> may be required depending how the monitoring equipment is utilized.</p> <p><b>Examples include but not limited to:</b></p> <p><b>Alarm System:</b> Includes door/ window alarms and/or motion detectors for the purpose of notifying caregivers and support staff of elopement.</p> <ul style="list-style-type: none"> <li>• Monthly monitoring fees allowed as long as it is not a Home Security System.</li> </ul> <p><b>Listening Devices:</b> E.g. baby monitors</p> <p><b>Remote Support Equipment:</b> Equipment needed to provide remote support. For staffing support see <a href="#">CBSM</a> for more information.</p> <p><b>Global Positioning Device (GPS):</b> The device and the monthly monitoring fee are allowable for tracking participants with elopement concerns and/or those who are not able to communicate their whereabouts.</p> <p><b>Camera Monitoring System:</b> <a href="#">Camera Monitoring System</a> is used to monitor participant activity and inside and outside of the home.</p> <ul style="list-style-type: none"> <li>• Camera in bedrooms cannot be purchased without initial approval from MN DHS unless a parent of a minor requests for health and safety reasons. See <a href="#">MN edocs #6789</a> - Monitoring Technology Authorization Form, work with your Case Manager through this process.</li> <li>• Use of camera Monitoring systems must be reassessed annually in the CSP and approved by the lead agency.</li> </ul>
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<p><b>Nutrition</b></p>	<p>There is a range of nutrition options available based on the participant’s assessed needs. This includes: home delivered meals, Specialized Diets, Nutritional Products and Thickeners. Food other than items listed below are not fundable.</p> <p><b>Home Delivered Meals:</b> Already prepared meals provided to a person 18 years or older who is unable to prepare his/her own meals. Coverage is limited to a maximum of one meal per day.</p> <p>Anoka County generally uses enrolled <a href="#">home delivered meal</a> providers but may approve an unenrolled agency in unique circumstances. If using an enrolled provider, all requirements must be met.</p> <p><b>Food Thickeners:</b> Thickeners are typically covered by Medical Assistance. May be considered if amount is above and beyond what Medical Assistance will pay for.</p> <p><b>Enteral/Nutritional Products:</b> Prescribed products adding nutritional value to person’s diet through a tube (enteral) or by mouth, related to the person’s disability or condition and denied by insurance or above and beyond what insurance will fund.</p> <ul style="list-style-type: none"> <li>• Oral nutritional products may be allowed for AC/EW only (e.g. Ensure, Boost, Gatorade).</li> <li>• See Specialized Diet for other possible dietary products.</li> </ul> <p><b>Specialized Diet:</b> Special diets are allowed when prescribed by MHCP provider and denied by insurance or exceeding what insurance will cover. Use the <a href="#">Alternative or Specialized Diet Request Form</a>. Specific nutritional products must be part of one for the specialized diets listed and specified on the Alternative or Specialized Diet Request (e.g. Boost, Gatorade, Etc.).</p> <p>Monthly allowable amounts are based on the Minnesota Supplemental Assistance (MSA) percentages of the current <a href="#">Official USDA Liberal Food Plan (LFP)</a>. If there is more than one specialized diet and they overlap, choose the costliest diet only (cannot fund both).</p> <p>The following is the MN Department of Human Services list of allowable special diets:</p> <ul style="list-style-type: none"> <li>• Anti-dumping – 15% of Liberal Food Plan (LFP)</li> <li>• Controlled protein diet (40-60 grams AND requires special products) - 100% LFP</li> <li>• Controlled protein diet (less than 40 grams AND requires special products) – 125% LFP</li> <li>• Gluten free diet – 25% LFP. Does not include casein free. No fruits and vegetables allowed unless MHCP prescribes organic fruits and vegetables to be necessary.</li> <li>• High protein diet (minimum 80 grams/day) – 25% LFP</li> <li>• High residue diet – 20% LFP</li> <li>• Hypoglycemic diet – 15% LFP</li> <li>• Ketogenic diet – 25%</li> <li>• Lactose free diet – 25% LFP (dairy free or casein free diets are not allowed)</li> <li>• Low cholesterol diet – 25% LFP</li> <li>• Pregnancy and lactation diet – 35% LFP</li> </ul>
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<p><b>Supplies and Equipment</b></p>	<p>Covered items include supplies and equipment not available under Medical Assistance, this include supplies, devices, controls or small functional appliances (modified can opener, blender for pureeing food) that increase a person’s independence or community integration and improve his/her ability to:</p> <ul style="list-style-type: none"> <li>• Perform activities of daily living (ADLs)</li> <li>• Perform instrumental ADLs</li> <li>• Perceive, control or communicate with the environment.</li> </ul> <p>Items that are adapted or modified need a detailed explanation of how they meet the assessed needs and must be non-age appropriate. Lead Agency may require cost sharing depending on the nature of the device.</p> <p>The waiver cannot pay for items that restrain or restrict a person’s rights. Items purchased should be the least restrictive method to meet the person’s assessed needs. Examples include but not limited to seatbelt restraints or covers, locking all exit doors, helmets for non-medical needs, etc.</p> <p>Supplies or equipment purchased must not be considered duplicative of other items or typical personal care items (i.e. soap, lotion, toothpaste, etc.) and must meet all waiver criteria.</p> <p><b>Adapted Clothing and Footwear:</b> Clothing purchased that is altered/designed to meet disability related needs. Adapted clothing can be covered when the cost exceeds typical parent/participant responsibility.</p> <ul style="list-style-type: none"> <li>• Itemization of purchases is required.</li> <li>• Examples of unallowed could potentially include tag less clothing, age appropriate items for growing children.</li> </ul> <p><b>Adapted Equipment:</b> Utensils, stroller, feeding chair, wedge, positioning equipment, portable ramp, communication tools, playset attachments etc.</p> <ul style="list-style-type: none"> <li>• Materials needed to adapt/create communication or skill acquisition tools.</li> <li>• <b>Bike Adaptations/Adapted Bike:</b></li> <li>• Adapted Bikes may require an assessment.</li> <li>• Modifications to typical bikes, such as wider tires or attachments, are allowed but the cost of the bike is a personal expense.</li> </ul> <p><b>Medical products not covered by MA:</b> Requested products must be directly related to an assessed need/diagnosed health condition (e.g. congestive heart failure, severe allergies, temperature regulation issue, etc.), not covered by health insurance, and be for the direct benefit of the participant. Common examples include incontinence products, rubber gloves, bandages, hearing aid replacement, etc.</p> <ul style="list-style-type: none"> <li>• <b>Household Supplies for Medically Fragile</b> (e.g. disinfectant wipes, paper towels, garbage bags, hand sanitizer, etc.). Suggested Limit: \$250.</li> <li>• <b>Laundry Supplies:</b> Costs for extra laundry supplies needed above and beyond typical number of loads due to incontinence or bodily fluids. <ul style="list-style-type: none"> <li>○ In home additional detergent up to .50 cent/load, max. \$250. List estimated extra loads/week.</li> <li>○ Laundromat (up to \$10/load, max. \$1000) for bedding only.</li> </ul> </li> </ul>
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<p><b>Supplies and Equipment continued...</b></p>	<ul style="list-style-type: none"> <li>• <b>Specialty or Eyeglasses:</b> May purchase durable frames, replacement glasses and/or upgrades such as transitional lenses, with documented assessed need. <ul style="list-style-type: none"> <li>○ Only pay for lenses if current lenses don't fit in the more durable frames.</li> </ul> </li> <li>• <b>Standalone equipment:</b> Such as Air Purifier, air conditioner unit for window, shower chair, etc.</li> </ul> <p><b>Positive Behavioral Reinforcers:</b> Allowed if there is a structured Behavior Plan in place.</p> <ul style="list-style-type: none"> <li>• The structured Behavior Plan should be written in consultation with a qualified professional (e.g. therapist, skills worker, behavior analyst) and must be described in detail on the <a href="#">Behavior Plan Form</a> or in the CSP.</li> <li>• Only specific items listed on the approved Behavior Plan will be reimbursed by the FMS. The Behavior Plan must include target behaviors to be addressed, a structured reinforcement schedule, and a list of effective reinforcers.</li> <li>• Participants with formal behavior services/plans may be eligible for a budget increase if qualifies. See <a href="#">CDCS Manual Exception to Budget Methodology</a>.</li> </ul> <p><b>Unallowed:</b> Personal items unrelated to disability, tickets and related costs to attend sporting or other recreational events, meals, cash, gift cards, high-speed internet, or leisure/recreational video games/consoles.</p> <p><b>Replacement Items due to bodily fluids and/or behaviors.</b></p> <ul style="list-style-type: none"> <li>• <b>Clothing and Bedding:</b> Replacement due to incontinence, excessive wear and tear, behaviors, or excess bodily secretions related to the disability is fundable.</li> <li>• Must be above and beyond what is typical parental responsibility.</li> <li>• The suggested maximum limit is \$500/year combined</li> <li>• Description and itemization of why replacement items are needed is required (E.g. Replacing sheets every 3 months due to nightly incontinence.</li> <li>• <b>Mattress:</b> Mattress replacement due to incontinence ONLY, cost must be customary and reasonable</li> <li>• Waterproof mattress covering must be used along with mattress purchase (does not include box spring or bed frame).</li> <li>• Mattresses must be no larger than full size unless there is a documented need for a larger mattress, or it is to replace the existing size of the participants mattress.</li> <li>• Specialized mattresses require documentation of need from an MHCP physician.</li> </ul> <p><b>Safety Equipment:</b> Examples include-helmet for seizures, specialty goggles, chair lifts, lock boxes for safety.</p> <p><b>Sensory equipment:</b> Examples include Sensory sac, chew items, frog swing, white noise machine, noise canceling headphones, blackout curtains, Sunlamp/SAD light, etc.</p> <ul style="list-style-type: none"> <li>• Supporting documentation may be requested by Waiver Advisory Committee, specifically if related to sensory needs (OT/PT or another qualified professional)</li> <li>• Multiple sensory purchases may not be approvable if meeting the same assessed need (duplication of services is not allowed on CDCS).</li> <li>• Itemization of sensory items is required.</li> </ul>
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<p><b>Supplies and Equipment continued...</b></p>	<p><b>Skill acquisition:</b> Supplies must be directly related to an assessed need and a goal in the CSP. Examples include communication boards and supplies, behavioral charts, lamination, printer, copier. Suggested limit up to \$300/year</p>
<p><b>Transportation</b></p>	<p>The waiver is not intended to pay for all transportation costs as transportation is a typical expense. For example, clients who can access public transportation independently would be responsible for paying for transportation costs to visit friends.</p> <p><b>ALLOWABLE:</b></p> <p><u><b>Non-Medical Transportation Costs/Staff Mileage:</b></u></p> <ul style="list-style-type: none"> <li>• Mileage reimbursement (including parking costs) for transporting the participant to and from their work site, community access, or alternative therapies as it relates to an outcome approved in the CSP.</li> <li>• Customary amount is up to 150 miles/week. Mileage must be documented with FMS and available for review.</li> <li>• Maximum reimbursement rate is up to the Federal Mileage Reimbursement Rate.</li> <li>• *Mileage for a paid parent of a minor or spouse is not allowed.</li> <li>• Mileage to and from school is not allowable.</li> </ul> <p><u><b>Non-Medical Transportation Costs for Participant:</b></u></p> <ul style="list-style-type: none"> <li>• <b>Transportation costs for adult with functional limitations</b> - Public transportation should be vetted first. Cab services including Lyft and Uber, can be explored when cost effective and/or to meet atypical needs (E.g. times when public transportation is unavailable). Discuss transportation options with your Case Manager including specifics regarding barriers to transportation and/or whether sharing the costs of transportation is appropriate.</li> </ul> <p><u><b>Medical Transportation Costs/Staff Mileage:</b></u></p> <ul style="list-style-type: none"> <li>• AC participants (only) - support staff can receive mileage reimbursement for medical appointments.</li> </ul> <p><b>UNALLOWABLE:</b></p> <p><u><b>Non-Medical Transportation Costs for Participant:</b></u></p> <ul style="list-style-type: none"> <li>• <b>Transportation costs for parent of a minor/spouse</b> - a parent of a minor or spouse would be expected to provide transportation for activities in the community (e.g., transportation to an after-school activity, day care, shopping centers or recreational events) <b>and is not allowed.</b></li> <li>• <b>Transportation costs for adult without functional limitations</b> - Transportation is a typical personal responsibility if the participant does not have a functional limitation in this area (E.g. transportation to work, the grocery store or recreational activities). Waiver funds would <b>not</b> be able to be used in this situation.</li> </ul> <p><u><b>*Medical Transportation Costs:</b></u></p> <ul style="list-style-type: none"> <li>• Mileage to and from medical appointments is not allowed. This is typically reimbursable thru MNET-<a href="https://www.mtm-inc.net/">https://www.mtm-inc.net/</a></li> </ul>

<p><b>Transportation continued...</b></p>	<p><b>Driver's Education/Lessons:</b> This is a typical personal or parental responsibility. May be considered if transportation is an assessed need (iADL) and there is specific adapted equipment needed, training above and beyond what is typical, and written into the CSP. Agencies must be certified in this industry.</p> <ul style="list-style-type: none"> <li>• Driver's Education Assessment (e.g. Courage Center) for vision testing, reaction time, memory/problem solving, strength and coordination, cognitive processing skills, prescription for adaptive driving equipment, etc. are allowed.</li> <li>•</li> </ul>
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**Self-Direction Support Activities:**

<p><b>Definition</b></p>	<p><b>Self-Direction Support Activity</b> CDCS category of service that includes services, supports and expenses incurred for administering or helping the person or representative administer CDCS. Self-directed support activities must be:</p> <ul style="list-style-type: none"> <li>• Chosen by the person</li> <li>• Outlined in the CDCS Community Support Plan</li> <li>• Purchased under agreements between the person and the provider that specify tasks to be performed, schedules and negotiated fees.</li> <li>• Managing party cannot be paid for Self-Directed Activities or hiring/training or managing of staff. They must be able to incur these administrative costs.</li> </ul> <p>Examples include but not limited to costs needed to manage the budget (i.e., fees charged by the financial management services [FMS] provider), Employer-related fees and taxes (e.g., FICA, FUTA, SUTA, workers' compensation, unemployment), CDCS support planning services and Costs for worker recruitment.</p> <p>Typically, this does not include equipment and/or supplies needed to administer CDCS. Examples include but not limited to:</p> <ul style="list-style-type: none"> <li>• Printers</li> <li>• Fax machines</li> <li>• Shredders</li> <li>• Ink cartridges</li> <li>• File folders and cabinets</li> <li>• Computers/tablets</li> </ul>
<p><b>Worker Recruitment</b></p>	<p>The person can use CDCS funds for costs related to advertisement and recruitment of direct support workers. This could include:</p> <ul style="list-style-type: none"> <li>• Newspaper ads</li> <li>• Online job postings</li> <li>• Online matching services to connect job seekers and people who receive services.</li> </ul> <p>See <a href="#">CDCS Manual</a> for more details. E.g. <a href="#">Direct Support Connect</a></p>
<p><b>Financial Management Services (FMS)</b></p>	<p><b>Financial Management Services (FMS)</b> is a service that provides help with financial tasks, billing and employer-related responsibilities for people who self-direct their services through consumer directed community supports (CDCS) or the Consumer Support Grant (CSG).</p> <ul style="list-style-type: none"> <li>• This is a required service that ALL participants must utilize.</li> <li>• All FMS's utilize the Payroll (FEA) Model</li> </ul>

<p><b>Financial Management Services (FMS) continued...</b></p>	<ul style="list-style-type: none"> <li>• FMS fees vary by agency and can be found on the <a href="#">MN DHS</a> website</li> <li>• Service providers on a participant’s CSP must work with the FMS to establish a vendor agreement for payment.</li> </ul> <p>For households with more than one participant receiving CDCS, a family work schedule will be required and must use the same FMS.</p> <p>Talk with your Case Manager if interested in changing FMS providers. The change must happen at a quarter and needs to start 4-6 weeks in advance.</p>
<p><b>Support Planner</b></p>	<p><a href="#">Support Planning Services</a> is an optional <i>service that helps a CDCS participant develop and implement his/her CDCS Community Support Plan (CSP).</i></p> <ul style="list-style-type: none"> <li>• Support Planners and case managers should determine each other’s roles in consultation with the participant.</li> <li>• Support Planners must provide the participant with a job description outlining the specific duties they will perform on their behalf (vs. case manager). Specific duties cannot be duplicative of the case manager’s role.</li> <li>• Any additional job duties beyond plan development <b>MUST</b> be specified in the plan (e.g. interview staff, staff training, staff recruitment, etc.).</li> <li>• Additional support planner hours throughout the plan year may be approved through the additions/addendum process when justified and approved by the case manager.</li> <li>• The first-year plan should contain hours for year 1 AND year 2. Suggested amounts up to 25 hours for initial plan + 1<sup>st</sup> renewal and up to 10 hours for renewals beginning the third year. <ul style="list-style-type: none"> <li>○ Additional hours may be allowed if working with a participant in which English is not their primary language and interpreter is needed or based on need.</li> </ul> </li> </ul> <p>*Service Coordination/Support Planning in a paid capacity by Parents of Minors/Spouses is not allowed.</p> <p>For more information regarding the Support Planner role see <a href="#">DHS Trainlink</a> (Search Course DS690).</p>

**MA Home Care Services:**

<p><b>Definition</b></p>	<p><a href="#">MA Home Care Service</a> category includes licensed services provided by a Homecare Agency including Personal Care Attendant (PCA), Skilled Nursing, Home Health Aide, and Private Duty Nursing. The service must be listed separately in the CSP and billed directly to DHS (or managed care entity if applicable) and not through the FMS. These service costs still must fit within the overall CDCS budget allocation.</p>
<p><b>Home Health Aid (HHA)</b></p>	<p><a href="#">Home Health Aid Services</a> has a state set rate is billed directly through the state not eh FMS. If Extended HHA is needed, it comes directly out of CDCS budget and is billed through FMS.</p>

<b>Personal Care Assistance (PCA)</b>	<p>PCA staff must meet the state requirements from the identified home care agency and meet the qualifications described in the CSP.</p> <ul style="list-style-type: none"> <li>• State eligibility criteria and service rates apply. This includes PCA and extended PCA.</li> <li>• Number of PCA units and rates must be recorded separately in the MA Home Care section of the CSP.</li> <li>• Units of PCA must be split into six-month amounts</li> <li>• Supervision of 96 units/year is required. If units are not going to be used, the case manager can shift units to be used for other services/supports.</li> <li>• Services are billed directly through DHS by the home care agency</li> <li>• PCA assessment is renewed annually and attached to the plan</li> <li>• Extended PCA comes directly out of CDCS budget and is billed through FMS.</li> <li>• Case manager is required to make annual MnCHOICES assessment referral</li> <li>•</li> </ul>
<b>Skilled Nursing Visit (SNV)</b>	<p><a href="#">Skilled Nursing Visits</a> are conducted by registered nurses (RNs) or licensed practical nurses (LPNs) that:</p> <ul style="list-style-type: none"> <li>• Initiate and complete professional nursing tasks based on the participant’s assessed needs to maintain or restore optimal health</li> <li>• Happen at a person’s place of residence or in the community where normal life activities occur</li> <li>• Happen on an intermittent basis by an RN or LPN under the supervision of a RN</li> <li>• May be conducted in person or via tele-homecare technology.</li> </ul> <p>See <a href="#">CDCS and Nursing Home Care Frequently Asked Questions</a> for more information.</p>

**Unallowable Expenditure:**

<b>Unallowable Expenditure Examples</b>	<p><b>Adaptations That Add Any Square Footage</b> - Constructing or finishing a roughed in room in the home or typical home repairs/improvements are not waiver fundable.</p> <ul style="list-style-type: none"> <li>• For CADI, DD, EW, the square footage can only be increased when the increase is necessary to build or modify a wheelchair accessible bathroom.</li> <li>• See checklist under <a href="#">additional square footage section</a> needing to be followed and approved by DHS.</li> </ul> <p><b>Appliances</b> – “Major” appliances such as stove, dishwasher, refrigerator, water heater, washer/dryer, Central Air Conditioner – Considered general utility and NOT cost effective, etc.</p> <p><b>Attorney/Legal/Advocate Fees</b> – Includes any expenses related to legal action, advocacy, guardianship/conservatorship, Wills/trusts or those who do not provide a direct service authorized in the service plan.</p> <p><b>Central Air Conditioner</b> – Considered general utility and NOT cost effective</p> <p><b>Burial/Cremation Services</b></p> <p><b>Cable or Paid Television</b> – is not fundable. (e.g. Direct TV, Netflix, Comcast, etc.)</p>
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<p><b>Unallowable Expenditure Examples continued...</b></p>	<p><b>Cameras/Video Monitor in Bathrooms</b></p> <p><b>Camp Outside of State of MN</b> – unless in bordering states WI, IA, SD, ND.</p> <p><b>Carpeting</b></p> <p><b>Cell Phone including Service/Data:</b> In today’s world a cell phone is a typical family/personal expense like a utility. Ask your Case Manager for free or low-cost cell phones resources.</p> <p><b>Child Care of Siblings (not receiving services)</b></p> <p><b>Community Activities (NOT related to the disability)</b> - Activities that are typically paid by parents of non-disabled children are not funded.</p> <ul style="list-style-type: none"> <li>• Memberships to the Zoo, Science Museum, YMCA or fitness center (for minors) are not fundable.</li> <li>• Tickets to sporting events, plays, movies etc. are not allowable.</li> <li>• Restaurant food is never allowable.</li> </ul> <p><b>Constructing a Garage or Adding to an Existing Garage</b></p> <p><b>Computer for Self-Direction Services ONLY</b></p> <p><b>Deck</b> – Adding a deck to a home is not allowed, however making safety modifications to an existing deck would be considered (e.g. hand railings, zero threshold to get onto deck)</p> <p><b>Dental Services or Fees (Including orthodontia)</b></p> <p><b>Dietary Supplements</b> - Are NOT fundable, even with a prescription.</p> <ul style="list-style-type: none"> <li>• Dietary supplements, like vitamins, are considered over the counter medications.</li> <li>• Some dietary supplements may be covered by Medical Assistance</li> </ul> <p><b>Diversionary or Recreational Services/Items/Supports</b> - Examples Include: Video gaming system, iPod to listen to music</p> <p><b>Driveways</b></p> <p><b>Educational Costs</b> - These costs are not waiver fundable when client is still enrolled in primary or secondary school. The school is considered financially responsible.</p> <ul style="list-style-type: none"> <li>• Transportation to and from school is NOT allowable</li> <li>• Tuition and fees at a private school are not fundable.</li> <li>• Home schooling costs are not waiver fundable.</li> <li>• Post-secondary school tuition for a degree is NOT fundable.</li> <li>• See “Skill Acquisition Equipment and Materials” section and “Training for Caregiver or Participant” sections.</li> </ul> <p><b>Equipment and/or supplies related to managing CDCS</b></p>
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<p><b>Unallowable Expenditure Examples continued...</b></p>	<p><b>Experimental Treatments and Therapy (including supplies)</b> – Unallowed according to <a href="#">Minnesota Rules 9525.3015, subp.16</a>:</p> <ul style="list-style-type: none"> <li>• Experimental Treatment is defined as “drugs, therapies, or treatments that are unproven, have been confined largely to laboratory use, or have progressed to limited human application and trials, and lack wide recognition from the scientific community as a proven and effective measure of treatment.”</li> <li>• Physicians, Physician Assistant, or Nurse Practitioner (APRN) makes this determination using the Alternative Therapy form. It is within MD’s scope of practice answer whether it is experimental or not.</li> </ul> <p><b>Food:</b></p> <ul style="list-style-type: none"> <li>• Oral Nutritional products (e.g. Boost, Ensure) unless part of prescribed specialized diet. Exception: allowed for EW and AC waivers.</li> </ul> <p><b>Fundraisers</b></p> <p><b>Furniture</b> - The waiver does not pay for basic furniture (e.g. bed, couch, table, dresser, etc.)</p> <p><b>Generator</b> - Unless using life sustaining equipment and only to be used for that specific equipment. Check with your medical supply company for backup power outage options and/or register for critical emergency assistance with your local police/fire departments.</p> <p><b>Gift Cards</b></p> <p><b>Health Insurance/Medical Cost:</b></p> <ul style="list-style-type: none"> <li>• Is not allowable except for insurance costs related to employee coverage as a benefit.</li> <li>• Co-pays (e.g. prescription drugs), deductibles, premiums are not allowed, includes spend-downs, health insurance or any other medical fees not covered by insurance. Including MA, PMAP (Prepaid Medical Assistance) and private insurance are not fundable.</li> </ul> <p><b>Home Repairs/Remodel</b> - Typical upkeep and repairs of the home and property are the homeowner’s responsibility, even if damage was done by the participant as a result of that participant’s disability. See <a href="#">EAA Section and Guidelines</a> for more information.</p> <p><b>Household item due to Behaviors:</b> Parents/caregivers are expected to take protective/preventative measures to protect their property when participant is prone to destructive behaviors. Lifestyle choices such as large TV’s, china, etc. will not be replaced.</p> <p><b>Items that Seclude, Restrain or Inhibit an adult to his property or belongings:</b> Talk to your case manager about more proactive approaches.</p> <ul style="list-style-type: none"> <li>• The Waiver Advisory Committee will review any locks, helmets, seatbelt restraints for appropriateness.</li> </ul>
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<p><b>Unallowable Expenditure Examples continued...</b></p>	<p><b>Laundry Appliances such as washer and dryer</b></p> <p><b>Medical Marijuana/CBD Oil</b></p> <p><b>Medications/Compounds/Over the Counter:</b> Prescribed and/or over the counter medications are not fundable on CDCS.</p> <ul style="list-style-type: none"> <li>• Compounds- A prescription prepared in accordance with <a href="#">Minnesota Rules</a></li> <li>• Over the Counter Medication - Drug that can be purchased without a prescription such as Prilosec OTC, essential oils, diaper rash cream, dietary Supplements/Vitamins, etc.</li> <li>• Solutions-as a dose form of a prescription or over the counter medication. Solutions are either available commercially or compounded individually by the pharmacist. Examples include but not limited to solutions for wound care, solutions made from tablets or capsules for patients that can't swallow a tablet or capsule, etc.</li> </ul> <p><b>Mileage-</b></p> <ul style="list-style-type: none"> <li>• Out of State for Recreational and Leisure Purposes</li> <li>• Reimbursement to Parents of Minors or Spouses</li> <li>• To and From School (school responsibility)</li> </ul> <p><b>Items Required by Law:</b> Car seats, bike helmets, etc.</p> <p><b>Overtime</b> – NOT allowed UNLESS prior approved by case manager due to cost effectiveness.</p> <p><b>Parental Fees:</b> Fees for TEFRA or other human service fees.</p> <p><b>Personal Care Supplies That Are Not Disability Related:</b> Examples include: tooth paste, soap, shampoo, menstrual supplies, deodorant, lotion, etc.</p> <p><b>Pets/Animals and Related Costs:</b> This includes service animals.</p> <p><b>Recreational/Leisure Activities:</b> Examples include sporting events, community events/activities, games, toys, video game consoles, movies, etc.</p> <p><b>Room and Board:</b> The waiver does not pay for room and board, housing or rental space in any setting (e.g. house or apartment)</p> <p><b>Seat Belt Restraints</b></p> <p><b><a href="#">Services outside of the State of MN:</a></b> Services Provided Outside of Minnesota - There is very specific criteria in which services can occur outside of MN.</p> <ul style="list-style-type: none"> <li>• May only be considered in bordering states of North/South Dakota, Iowa or Wisconsin (Camps)</li> <li>• An exception to this is direct care staff traveling with family and providing similar services.</li> <li>• NO services can be provided when the consumer is out of the country, including direct care staffing.</li> </ul>
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<p><b>Unallowable Expenditure Examples continued...</b></p>	<p><b>Socialization</b> – Is not fundable. If social skill building is taking place this may be fundable if outcome in the approved CSP.</p> <p><b>Swimming Pools/Hot Tubs</b></p> <p><b>Utilities to Maintain a Household</b></p> <p><b>Window Replacement (frame and glass)</b></p> <p><b>Vacation Expenses</b>-vacations are not fundable including airfare, lodging, meals, transportation.</p> <p><b>Warranty</b> - Only allowed if routine preventative maintenance plan necessary for proper functioning of the disability related equipment.</p>
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**Other:**

<p><b>Troubleshooting DHS Edocs</b></p>	<p>If you are experiencing issues accessing MN DHS Edocs see <a href="#">MN DHS webpage</a>.</p>
<p><b>Appeals</b></p>	<p>Participants have the right to a conciliation conference (DD only) and/or an administrative appeal as with any county services or actions. When services are reduced, suspended or denied, Anoka County will send a formal notice to the participant to explain their appeal rights. Additional technical assistance and support to seek solutions will be provided prior to a conciliation conference or appeal.</p>
<p><b>Technical Assistance</b></p>	<p>CDCS is a self-directed program which means participants and/or managing parties are responsible for knowing and following the guidelines and directing their own services. The case manager will offer additional support and training for basic questions and concerns that do not rise to the level of a documented technical assistance. However, if a case manager has to provide significant additional technical assistance and support that is over and above what was already provided through standard training and materials, they may issue a Technical Assistance. When a 4th documented Technical Assistance is issued and it is determined by the Lead Agency that reasonable efforts were taken to assist the managing party in correcting the behavior, the person will be immediately discharged from CDCS and the case manager will help the participant transition to other traditional waiver and/or state plan home care services.</p> <p>Reasons for technical assistance may include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Notices from the financial management services (FMS) provider to the person requesting missing information</li> <li>• Not following the person’s Community Support Plan (CSP)</li> <li>• Not receiving services, supports and/or items identified as critical for health and safety</li> <li>• Not spending enough dollars for services/supports and/or items needed to support health and safety without a reasonable explanation</li> <li>• Ongoing difficulty in arranging for services, support and/or items needed for health and safety</li> </ul>

<p><b>Technical Assistance continued...</b></p>	<ul style="list-style-type: none"> <li>• Overspending</li> <li>• Not getting the CSP in on time to the lead agency</li> </ul> <p><b>Reasonable efforts:</b>  These documented events requiring additional technical assistance and support during one service plan year must include:</p> <ul style="list-style-type: none"> <li>• Identification of the problem</li> <li>• Need corrective action</li> <li>• Timeline in which to accomplish the action</li> </ul> <p>The Case Manager will request a face to face meeting to discuss the issues and offer additional support by the 2nd or 3rd technical assistance notification within the same plan year. Upon the fourth Notice of Technical Assistance, within the same plan year, the CDCS option will be ended and the participant will go back to using traditional licensed waived services or state plan services.</p>
<p><b>Exiting and Involuntary Exiting</b></p>	<p><b>Voluntary:</b> Participants may terminate their participation in the CDCS option voluntarily by notifying their Case Manager and return to “traditional” waived services.</p> <ul style="list-style-type: none"> <li>• Participants who exit their CDCS more than once in a plan year are ineligible for CDCS for the remainder of that plan year.</li> </ul> <p><b>Involuntary:</b> Persons will be immediately exited from CDCS and offered waiver services and/or MA state plan home care services under the following instances:</p> <ul style="list-style-type: none"> <li>• Immediate health and safety concerns</li> <li>• Maltreatment of the person</li> <li>• Purchases or practices not allowable in CDCS</li> <li>• Suspected fraud or misuse of funds (knowingly and willfully) by the person, their authorized representative and/or service provider</li> </ul> <p>Participants will also be involuntarily exited after their 4th documented Technical Assistance is issued.</p> <p>For more information on Involuntary Exits please CBSM on <a href="#">Involuntary Exits</a>.</p> <p>The case manager must report suspected fraud to <a href="#">Surveillance and Integrity Review Division</a>.</p>
<p><b>Net Study 2.0 Background Study</b></p>	<p>All paid workers in the CSP must pass a background study through MN DHS Licensing Department. For more details see <a href="#">MN DHS Webpage</a>.</p> <ul style="list-style-type: none"> <li>• FMS’s and Licensed Service Providers are responsible for coordinating background studies for all prospective employees.</li> <li>• Any worker who fails to pass the background study is disqualified from providing CDCS Services.</li> <li>• All Background studies are paid for through DHS and not the CDCS Budget.</li> </ul>

<p><b>IRS Notice 2014-7 (Exclusion Rule)</b></p>	<p>The IRS issued Notice 2014-7 stating that certain wages earned by employees providing services to individuals on a Medicaid Waiver can be excluded from federal and state income taxes.</p> <ul style="list-style-type: none"> <li>• This applies to employees living fulltime in the home with the Medicaid Waiver person they provide services to. To be eligible you must meet all the conditions IRS Notice 2014-7 Certification.</li> <li>• Worker’s income may still affect cash assistance programs and/or other income-based programs. Check directly with that program.</li> <li>• Workers are responsible to check with their FMS and tax advisor regarding implementation of the IRS Notice 2014-7.</li> </ul> <p>For more information go to the <a href="#">IRS Website regarding 2014-7 Exclusion Rule</a>.</p>
<p><b>Admissions to Institutional Facilities</b></p>	<p>An admission to hospital, nursing facility, rehabilitation center, In-Patient Chemical Dependency and/or Department of Corrections facility needs to be reported to the Case Manager immediately.</p> <p>Staffing may be paid on the same day as admission but prior to the admission occurring and can be paid on the same day as the discharge but post discharge.</p> <p><b>Inpatient Admissions (E.g. hospital, inpatient chemical dependency):</b> Waivered Services remain open if stay is less than 30 days however services cannot be billed during the hospital stay.</p> <p><b>Nursing admission, rehab. facility, correctional facilities</b> admissions would result in the waiver closing and initial waiver process required upon discharge.</p>
<p><b>Unforeseen Issues Related to Goods and/or Services</b></p>	<p>Items are purchased for the participant and should remain with/be available to the participant to the full extent possible. If an item is returned or sold, the reimbursement from that item must be applied to the participant’s service plan. The same applies to any discounts or credits.</p> <p>If an item or service is not prior approved but is paid out by the FMS, the participant and/or managing party may be responsible for paying it back and a Technical Assistance may be issued.</p> <p>All services rendered must be paid by the FMS. If the participant and/or managing party is dissatisfied with the service, they can discontinue the service and may report to appropriate licensing agencies and/or the Better Business Bureau. Anoka County is not responsible for other businesses’ work and practices.</p>
<p><b>Unspent Funds</b></p>	<p>The Community Support Plan is approved for up to one year. Unspent funds cannot be carried over to the next year. Participants annual resource amount will not be reduced the following year due to unspent funds.</p>
<p><b>Other Helpful Resources</b></p>	<p><a href="#">Anoka County Website-Forms</a>  <a href="#">Community Based Service Manual (CBSM)</a>  <a href="#">CDCS Policy Manual</a>  <a href="#">MN DHS CDCS Training Video</a>  <a href="#">Train link Video</a> Environmental Accessibility Adaptation (EAA): PS_EAA</p>