



Mississippi Department of Mental Health
Provider Bulletin
Number PR0142

Subject: Changes in DMH Operational Standards due to ID/DD Waiver Renewal

Issue Date: August 16, 2023

Effective Date: Immediately

Scope

All IDD Certified Providers

Purpose

The Intellectual Disabilities and Development Disabilities (ID/DD) Waiver five-year renewal was approved by the Center for Medicare and Medicaid Services (CMS) effective July 1, 2023. This provider bulletin outlines changes in the Department of Mental Health (DMH) Operational Standards and/or processes as a result of the ID/DD Waiver approval. Descriptions of services in the ID/DD Waiver application were generalized, removing some specific requirements outlined in the DMH Operational Standards. However, throughout the renewal it states all providers must comply with DMH Operational Standards and Division of Medicaid (DOM) Administrative Code.

Subject

The *Inventory for Client and Agency Planning (ICAP)* will continue to be the evaluation/re-evaluation tool to set each person's Support Level. Beginning July 1, 2023, *initial ICAPs will be conducted by Diagnostic and Evaluation (D&E)* at one of the State Regional IDD Programs. *Reassessments will be conducted at least annually by Support Coordination* as part of the recertification process. Providers will continue to use the person's Support Level as set by the independent contractor administration of the ICAP and identified in the person's Plan of Services and Supports (PSS) and Service Authorization until each person's recertification.

Qualification Requirements for Support Coordination (Rule 11.3.Y.) were revised to the following: Support Coordinators must hold at least a Bachelor's degree in a human services field with no experience required or at least a Bachelor's degree in a non-related field with at least one-year relevant experience. Support Coordinators are supervised by a person with a Master's degree with at least two years of relevant experience. Relevant experience is defined as experience working directly with people with intellectual/developmental disabilities or other types of disabilities or mental illness.

Family Members as Providers of In-Home Respite (Rule 45.2.) – Rule 45.1.A. states In-Home Respite provides temporary, periodic relief to those people normally providing care for the eligible person. Thus, the service was *designed to give respite to the caregiver*. The caregiver cannot provide respite to himself/herself. Family members living in the home or outside of the home *who are not the person's primary caregiver* may qualify to provide the service through employment with a certified agency if the family member is not legally responsible and meets the criteria outlined in Provider Bulletin PR 0141. Non-qualifying family members that began prior to the end of the federal Public Health Emergency (PHE) may continue through November 10, 2023, only if they meet the criteria as outlined in Provider Bulletin PR 0141. Primary caregivers may qualify to provide Home and Community Supports as outlined in Provider Bulletin PR 0141.

Documentation of Income/Expenses Incurred for Person Living in Supervised Living, Shared Supported Living, or Supported Living (owned and/or controlled by the provider) Rule 30.1.L., 30.6.P., and 30.8.K. – The last sentence of each standard is revised as follows: There must be documentation in each person’s record regarding all income received and expenses incurred *and how/when it is reviewed with the person.*

Behavior Support Functional Behavior Assessment requirements (Rule 46.1.F.) - Functional Behavior Assessments are required to be *updated at least every two (2) years.* The Functional Behavior Assessment may be updated prior to two (2) years with justification and/or substantial changes as outlined in Rule 46.1.F.

Behavior Supervised Living Staffing Qualifications in Rule 30.2.G.4.(a) and Rule 30.2.G.4.(f) – Both Standards in Behavior Supervised Living refer to Ph.D. Psychologist or Licensed Behavior Analyst. This should state Behavior Consultant. Behavior Consultant qualifications are stated in Rule 11.4.A.1. and may be provided by qualified staff other than Ph.D. Psychologist or Licensed Behavior Analyst.

The following changes apply to both ID/DD Waiver and the IDD Community Support Program:

Background Check Requirements for all Staff Providing Home and Community Based Services (HCBS) – Agencies must continue to meet requirements in Rule 11.2.E. A *national* criminal background check with fingerprints must be conducted on all staff employed by certified IDD providers. Additional requirements for all staff providing direct contact with individuals enrolled in ID/DD Waiver or IDD Community Support Program include monthly screenings of the (1) Mississippi Nurse Aide Registry (maintained by the MS Department of Health) located at the following link <https://cna365.examroom.ai/registry/?StateCode=MS> and (2) Office of Inspector General’s Exclusion Database located at this link <https://exclusions.oig.hhs.gov/> Providers must begin complying with these requirements by *September 2023.*

Community Activities/Job Exploration for Day Services Adult and Prevocational Services (Rule 27.1.C.3. and 27.3.H.) – Community participation activities in Day Services Adult and job exploration in Prevocational Services may be provided individually or in groups of *up to four (4) people.* Individuals have choice/input as to where they go and who they go with in the community. Providers must assess the needs of those being transported and provide adequate staff to support them. People who may require intermittent one on one (1:1) assistance must be offered the opportunity to participate in all activities, including those offered on-site and in the community.

Documentation of Completion of School for Day Services Adult and Prevocational Services (Rule 27.1.U. and 27.3.R.) – People receiving Day Services Adult or Prevocational Services must be at least eighteen (18) years of age and *have documentation in their Plan of Services and Supports (PSS)* they have received either a diploma or certificate of completion or are no longer receiving educational services. Documentation of completion of school in the PSS is the responsibility of Support Coordinator/Targeted Case Manager beginning with initials submitted after the date of this bulletin and October 1 recertification PSS.

Persons receiving Supported Living (Rule 30.6.B.) may choose to rent or lease in a DMH certified Supervised Living, *Shared Supported Living*, or Supported Living (owned and/or controlled by the provider) setting for four (4) or fewer individuals. If in Shared Supported location with max capacity above four (4), the individual apartment must have less than four (4) persons residing in the apartment. Agencies providing Supported Living are required to utilize Electronic Visit Verification (EVV) as directed by Division of Medicaid. Staff providing Supported Living cannot be counted in the staffing requirements for Supervised Living or Shared Supported Living during the hours providing the Supported Living service.

Incidents to Report to DMH within Twenty-Four (24) Hours of Incident (Rule 15.3.) – Medication errors has been added to the list of incidents to report within twenty-four hours to the Office of Incident Management’s reporting system.

If you have questions, contact Betty Pinion, Director of ID/DD Waiver at (601)359-5797 or email betty.pinion@dmh.ms.gov.

End of Provider Bulletin