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This webinar will review the following:

- The role of the WSC during the aging out

- The role of the WSC during the aging out process
 Best practices for the WSC
 Examples of requests for services
 Transition protocols for Behavioral Services
 Behavioral Service limits on the Waiver
 Transition of Nursing Services
 Review of Nursing Services, Personal Supports, and Therapies

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Significant Additional Needs

65G-4.0218 Significant Additional Need Funding

- (1)Supplemental funding for Significant Additional Needs (SANs) may be one-time, temporary, or long-term in nature including the loss of Medicaid State Plan or school system services due to a change in age.
 - Would place the health and safety of the client, the client's caregiver, or the public in serious jeopardy because of substantial changes in the client's circumstances
 - Cannot be accommodated within the client's current iBudget amount

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Best Practices

- Begin the aging out process 6 months prior to the consumer's graduation date or 21st birthday
- Develop a "tickler" system
- Gather documentation
- Submit a completed SAN 3 months prior to the consumer's graduation date or 21st birthday

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Services and Service Units

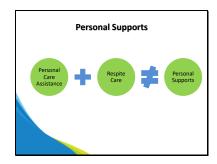
- Medicaid State Plan vs. APD approvals
- Medical Necessity must still be demonstrated

Therapies

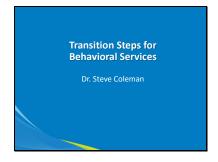
Physical/Occupational/Speech

- Prescription
- Current Plan of Care or Assessment
- Documentation that service meets Handbook criteria

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Transition Steps for Behavioral Services

Prior to a recipient aging out:

- Identify consumer's current needs
 Behavior Analysis Services?

 - Behavior Assistant Services?
- What does the QSI Behavioral section say?
- Ask the current BA provider if they will continue

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Transition Steps for Behavioral Services

Prior to a recipient aging out:

- Ask the current BA provider or eQHealth for the:
 - Behavioral Assessment/Behavior Plan
 - # of units for BA services
 - BA's recommendation if Behavior Assistant Services (BAS) are needed
 - # of units for BA services
 - Current Data for Target Behaviors

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Transition Steps for Behavioral Services

Can current services be implemented as-is?

- If the current BA Provider will not continue
- If the Functional Behavior Assessment (FBA) or a Behavior Analysis Services Plan cannot be obtained

The WSC will need to request an FBA and 100 QHs with a new BA Provider.

Remember the Waiver Service Limits! Medical Necessity Still Must be Determined Under the Waive 3/year

56 hrs/wk*

1/year*

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Transition Steps for Behavioral Services

Can current services be implemented as-is?

- If at least the Behavior Plan can be obtained, submit materials to the Area Behavior Analyst (ABA)
- ABA will do a desk review, or
 ABA will schedule for an LRC review
 Plans "approved" or "approved with modifications" can
- go forward

 BASE form to be completed and sent to WSC

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Transition Steps for Behavioral Services

Can current services be implemented as-is?

- Plans "not approved" by ABA/LRC cannot go forward
- UNILESS: the Medicaid State Plan provider agrees to comply with required changes
 Otherwise, WSC submits a SAN with

- Behavioral Assessment, and
 100 QHs for Behavior Analysis service

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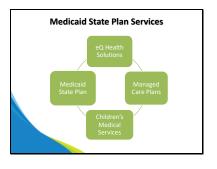
Transition for Nursing Services

Lori Gephart, RN

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Transition from Medicaid State Plan Nursing Services Age - 21 years old - At least 6 months prior Services - Nursing - Personal Supports - Therapies - DME/CMS

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What to Know About **Transition Meetings**

- Plans and eQHealth Solutions prepare for transition
 Transition planning occurs every 3 months if an individual resides in a NF
 All Care Coordinators provide all options for choice to receive services
 Including:
 APD and Waiver services
 AHCA's long-term care plan choices

- If the choice is to receive APD waiver services, then APD should be included in the transition meetings.

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Nursing Services & Personal Supports

- Current service
- Waiver - Skilled

 - Residential
- Resources
 Natural
 - Natural

 Funded

 Insurance

 Medicare

 Medicaid

 Waiver

All of the above must be determined medically necessary.

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Therapies

Types
Physical
Speech
Occupational
Respiratory

Who Funds? Insurance Medicare Medicaid Waiver



Durable Medical Equipment & Consumable Medical Supplies

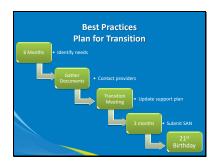
Who Pays For...

g-tubes, pumps, gauze, tape, suction catheters, ventilators, tracheostomy tubes, formula, wheelchairs, ramps, Q-tips, diapers, wipes

Required Documentation

What is needed? Where to look?

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Still Need Help?

Local staff assistance can be found through the APD Regional Staff Lists: http://apdcares.org/region/ — Medicaid Walver Stream Lead — Sr. Psychologist, Sr. Behavior Analyst, or Behavior Specialist — Medical Case Manager

Questions?

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