



Title:	In-Home Skill Building: Children & Adults with I/DD	Code:	T2013 TF U4 (IHSB Moderate)
Type:	B3 Service	Code:	T2013 U4 (IHSB High)
Effective Date:	July 1, 2019	Units:	1 unit/1 week

SERVICE DESCRIPTION

In-Home Skill Building provides habilitation and skill building to enable the member to acquire and maintain skills, which support greater independence. In-Home Skill Building augments the family and natural supports of the member and consists of an array of services that are required to maintain and assist the member to live in community settings.

This is a short term, intensive habilitation service to remediate one or more documented functional deficits. Members will receive a comprehensive skill and preference assessment to identify potential skills to be developed. Treatment will focus on skill development in one or more of the developmental functional deficits by using evidence-based practices and generalizing skills with the primary focus being positive behavior support. Outcome data will be gathered at the conclusion of the intervention and used to measure the efficacy.

In-Home Skill Building consists of

- Training in interpersonal skills and development and maintenance of personal relationships
- Skill building to support the member in increasing community living skills, such as shopping, recreation, personal banking, grocery shopping and other community activities
- Training with therapeutic exercises, supervision of self-administration of medication and other services essential to healthcare at home, including transferring, ambulation and use of special mobility devices
- Transportation to support implementation of In-Home skill building

In-Home Skill Building is individualized, specific and consistent with the member’s assessed disability specific needs and is not provided in excess of those needs. In-Home Skill Building is furnished in a manner not primarily intended for the convenience of the member. It is anticipated that the presence of In-Home Skill Building will result in a gradual reduction in hours as the member is trained to take on additional tasks and masters skills. A formal fading plan is required.

Family members (caregivers) will be coached in intervention strategies. The family members (caregivers) are expected to participate in the sessions so that they are able to use evidence- based strategies to teach new skills and generalize skills that the member learns.

This service is not provided to members who live in licensed Residential settings or live in Alternative Family Living Homes.

Medicaid shall cover procedures, products, and services when they are medically necessary, And:

- the procedure, product, or service is individualized, specific, and consistent with symptoms or - confirmed diagnosis of the illness or injury under treatment, and not in excess of the beneficiary's needs;
- the procedure, product, or service can be safely furnished, and no equally effective and more conservative or less costly treatment is available statewide; and
- the procedure, product, or service is furnished in a manner not primarily intended for the convenience of the beneficiary, the beneficiary's caretaker, or the provider

Provider Requirements

In-Home Skill Building must be delivered by staff employed by a MH/DD/SA provider organization that meets the provider qualification policies, procedures, and standards established by Division of Mental Health, Developmental Disabilities and Substance Abuse Services and the requirements of 10A N.C.A.C. 27G. These policies and procedures set forth the administrative, financial, clinical, quality improvement, and information services infrastructure necessary to provide services. Provider organizations must demonstrate that they meet these standards by being a member of the Partners Behavioral Health Management network. The organization must be established as a legally recognized entity in the United States and qualified/registered to do business as a corporate entity in the State of North Carolina.

Staffing Requirements

Staff must be professional level. All Professionals meet the requirements specified for Qualified Professional status according to 10 N.C.A.C. 27G 0104.

College of Direct Support Training

Staff must be trained in the College of Direct Support curriculum within 90 days of the first day of service delivery. The following modules are specifically required:

- Introduction to Developmental Disabilities
- Positive Behavior Supports
- Communication
- Teaching People with Developmental Disabilities

Service Type/Setting

This periodic service is intended to last no more than one year. This one-time service is intended to be repeated only if the primary caregiver for the member changes permanently.

This service is provided in the home of the member with ID/DD and/or community. The service must originate and end at the home of the member if it is provided in the community

Program Requirements

In-Home Skill Building is delivered face-to-face with the ID/DD child or adult.

This service is expected to be a short term intensive habilitation service to address one or more documented functional deficits.

The provider will conduct a comprehensive skill and preference assessment to identify potential skills to be developed.

Treatment will focus on skill development in one or more of the documented functional deficits

Providers are expected to use evidence-based intervention practices

Outcome data will be gathered at the conclusion of the intervention and used to measure efficacy

Family members (caregivers) will participate in the session so they are able to use evidence-based strategies to teach new skills and generalize skills that the member learns.

Utilization Management

The Unit of Service is one week (seven days, Sunday-Saturday). The Service is limited to one unit per week.

One unit of service can be billed without prior authorization to allow the provider to complete assessments. There is no minimum number of billing hours for this unit of service.

After the initial unit, prior authorization by Partners Behavioral Health Management is required for this service. The service must be included with the member's Individual Support Plan or Service Plan.

Initial authorization for services may not exceed ninety days. Re-Authorization must be conducted every ninety days.

During the High phase of training, a minimum of 4 hours of training must be provided in order to submit a claim for that week (Sunday-Saturday).

For the Moderate phase of training, a minimum of 2 hours of training must be provided.

It is expected that this service starts with high intensity in frequency and gradually decreases over the course of treatment. Service providers will be required to keep documentation of all hours of service provided to show evidence that the expected service hours are being met and titrated over time. On average, members will receive the minimum hours of service as follows:

Month 1: 8 hours per week

Month 2: 7 hours per week

Month 3: 6 hours per week

Month 4: 5 hours per week

Month 5: 4 hours per week

Month 6: 3 hours per week (if needed)

Months 7-12: 2 hours per week (if needed)

The caregiver is expected to participate in coaching a minimum of two hours per week throughout the authorization process.

This is not a group service. It is only an individual service.

Entrance Criteria

Children ages three and older and adults with intellectual disability/developmental disability (I/DD) diagnoses having three or more functional deficits identified through a psychological evaluation that includes an adaptive behavior assessment within three years, if under 18 years of age and five years of age if 18 and over AND
needing behavioral support and significant habilitation needs as documented through a functional assessment AND
completion of a standardized functional and preference assessment AND
identified goals that are important to the member and realistic to make progress AND
Caregiver is willing to be coached in intervention strategies and understands the expectations of the service definition as evidence by a signed agreement.

Continued Stay Criteria

Continued Stay requirements for this service:
Member continues to meet the entrance criteria listed above
AND
Evidence that the member is making progress with goals
AND
Evidence that the caregiver is a participant in training.

Service documentation will be submitted to Utilization Management at 90-day intervals.

Discharge Criteria

Discharge criteria for this service:
Member does not have an intellectual disability or does not have a developmental disability resulting in three or more functional deficits
OR
Completion of comprehensive skill and preference assessment indicating competency in all age-appropriate, relevant skills
OR
Evidence that the member is not making progress on goals and all interventions and strategies have been exhausted
OR
Evidence that the caregiver is not participating in the training.

Expected Outcomes

There will be a baseline of skills or tasks to be taught
There will be a Teaching Plan that identifies skills to be taught and outlines the evidence-based practices that will be used for teaching and prompting

There will be a plan for generalization, the most common elements to include systematic plan to generalize across different directions, materials, people and settings There will be a plan for independence, the most common elements include systematically increasing the distance of trainer from the member, evidence that the caregiver is working with the member to teach new skills and generalize learned skills.

Service Orders

A Qualified Professional in ID//DD orders this service.

Documentation Requirements

A Qualified Professional in ID//DD orders this service. Minimum standard is a daily full service note or grid that meets the criteria specified in the Service DMH/DD/SAS Records Management and Documentation Manual (APSM 45-2). Service notes include, but are not limited to,

- the member's name,
- Medicaid identification number
- date of service
- name of the service provided
- duration of the service
- purpose of contact
- the provider's interventions, including the time spent performing the interventions
- effectiveness of the intervention
- the signature, credentials and job title of the staff providing the service

Service grids are completed daily or per activity to reflect the service provided. All documentation must relate directly to the goal(s) listed in the participant's current plan. Refer to DMH/DD/SAS Records Management and Documentation Manual (APSM 45-2) for a complete listing of documentation requirements.

A Monthly Progress Summary is also to be completed that includes notes about caregiver participation during sessions and any changes in the following areas:

- medical
- medication
- family
- living situation
- work or school
- social
- environment
- schedule
- staff

The Monthly Progress Summary reflects data-based decisions as follows:

- data shows improvement: continue
- no change in data: review reinforcers, materials, teaching strategy to determine change that is needed and make necessary changes

variable data: find out what is not consistent and make necessary changes
data shows no progress: review reinforcers, materials, teaching strategies and make necessary changes.
documentation of how many hours of services were provided each week during the month

Service Exclusions/Limitations

In-Home Skill Building may not be provided at the same time of day as the following services:

Other 1915(b)(3) services or alternative services

Other State Plan Medicaid services that work directly with the person

For members who are eligible for educational services under the Individual's With Disability Educational Act, In-Home Skill Building does not include transportation to/from school settings. This includes transportation to/from the participant's home, provider home where the participant is receiving services before/after school or any community location where the participant may be receiving services before or after school.

These services are provided in the person's private home or the community, and not in the home of the direct service employee. In-Home Skill Building Services must start and/or end at the home of the member.

(b)(3) services, with the exception of Psychiatric Consultation, are not available to participants of all state 1915(c) waivers.

(b)(3) services are only available up to the capitation amount provided to fund these services. This service may not be provided by family members.

Administrative activities such as writing service notes or completing SARs are not billable activities.