



<b>Title:</b>	In-Home Skill Building: Children & Adults with I/DD	<b>Code:</b>	T2013 U4
<b>Type:</b>	(b)(3) Service		
<b>Effective Date:</b>	February 01, 2022	<b>Units:</b>	15 minute/unit

### 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 service week runs Sunday-Saturday. The unit of service is 15 minute per unit.

Thirty- two units of service can be billed without prior authorization to allow the provider to complete assessments.

After the initial 32 units in the first week, prior authorization by Partners 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 90 days. Re-Authorization must be conducted every 90 days.

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 I/DD orders this service.

### **Documentation Requirements**

A Qualified Professional in I/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,

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.