

CHAPTER

10

WAIVER SERVICES

In the following sections of this chapter, one can find the following for each service available through the waiver: the service definition, any limits on the service, types of providers, instructions for arranging for and authorizing the service, and instructions for monitoring the service. ID/RD Waiver-funded services are to be provided in response to the specific needs of the participant. These needs must be clearly documented in his/her Support Plan, along with the type(s) of service(s) to be provided to meet the needs, and the frequency with which the service(s) will be provided.

The Waiver Case Manager is responsible for the information in the participant's Support Plan. He/she is also responsible for assessing, authorizing and monitoring services and, when the need is met or services are no longer needed, terminating services.

When authorizing a service billed to the SC Department of Health and Human Services (direct-billed services), a Prior Authorization Number is required. For the ID/RD Waiver, Prior Authorization Numbers are the letters "RW" followed by five numbers. Waiver Case Managers should see their supervisor for more information.

The Waiver Case Manager is responsible for assessing the individual's need for specific waiver services. Once a waiver service is identified, the Waiver Case Manager will assess for the amount, frequency and duration of the service. The Waiver Case Manager will submit a request for services to the SCDDSN Waiver Administration Division. The Waiver Case Manager must submit supporting documentation and/or assessments as specified in this chapter. For example, a Respite Assessment must accompany all requests for Hourly Respite services.

Once service levels are approved by the SCDDSN Waiver Administration Division, a letter will be sent to the participant/family and Waiver Case Manager that specifies the service levels approved. If the participant/family does not agree with the amount of services approved, they will have thirty days to submit medical documentation current within the last year that supports why the participant must receive additional services. This request will be reviewed by SCDDSN Waiver Administration Division and a decision will be made. If the decision is to uphold the level approved, the family will be given the right to appeal the decision to the South Carolina Department of Health and Human Services (SCDHHS).

Monitoring of ID/RD Waiver Services: The Waiver Case Manager must monitor all waiver-funded services (i.e. those active on the current waiver budget) received by a participant. This monitoring will be considered complete when one or more of the following contacts has been made:

- Review of documentation of services provided for the purpose of assessing the effectiveness, frequency, duration, benefits and usefulness of the service (e.g. review of progress notes submitted by a psychologist providing psychological services)
- Conversation/discussion with the participant, participant's family/caregiver, or Residential/Day staff member for the purpose of determining the effectiveness, frequency, duration, benefits and usefulness of the service

- Conversation with the service provider about the effectiveness, frequency, duration, benefits and usefulness of the service
- On-site observation of the service being rendered for the purpose of determining the effectiveness, frequency, duration, benefits and usefulness of the service.

The Waiver Case Manager should vary the type of monitoring in order to be aware of differing perspectives. Speaking with several individuals to complete monitoring is encouraged.

Each service is monitored according to the guidelines included in its respective section of this chapter.