South Carolina Department of Disabilities & Special Needs Caregiver Coaching- Provider Verification

Caregiver Coaching Definition:

The purpose of caregiver coaching is to enable the health, safety, well-being and continued community integration of waiver participants by equipping family caregivers with the skills and resources necessary to manage the participants' chronic medical condition(s) and associated behavioral needs at home. This service is not provided directly to waiver participants, but to their family caregiver(s). The waiver participant does not have to be actively receiving behavioral services in order for the family caregivers to receive caregiver coaching.

Minimum Requirements:

Be accredited by one of the following accrediting bodies:

- National Committee for Quality Assurance (NCQA) Case Management for LTSS for community-based organizations
- National Committee for Quality Assurance (NCQA) Managed Behavioral Healthcare Organizations Accreditation
- Commission on Accreditation of Rehabilitation Facilities (CARF) Behavioral Health Accreditation
- The Joint Commission (TJC) Behavioral Health Care Accreditation
- Council on Accreditation (COA) Private Organizations Accreditation; Public Agencies Accreditation

Information to submit:

- 1. <u>Provider Verification Coversheet</u>
- 2. Proof of accreditation from <u>one</u> of the following entities:
 - National Committee for Quality Assurance (NCQA) Case Management for LTSS for community-based organizations
 - National Committee for Quality Assurance (NCQA) Managed Behavioral Healthcare Organizations Accreditation
 - Commission on Accreditation of Rehabilitation Facilities (CARF) Behavioral Health Accreditation
 - The Joint Commission (TJC) Behavioral Health Care Accreditation
 - Council on Accreditation (COA) Private Organizations Accreditation; Public Agencies Accreditation

Please note that the accreditation must be issued in the same name as the name of the entity seeking verification.

Upon receipt of the information listed above, DDSN will, within sixty days of receipt, complete its review. DDSN will notify the applicant in writing of the decision following its review.

Once verified by DDSN, an online application to enroll with SC DHHS as a DDSN Medicaid Waiver Provider must be completed. The written letter of decision from DDSN will include the address for this online application.

Please direct any questions to <u>providerapplications@ddsn.sc.gov</u>. Please submit information for verification to <u>providerapplications@ddsn.sc.gov</u>.