

Private Vehicle Modifications

Revised May 2021

Definition

Private Vehicle Modifications means adaptations to a privately owned vehicle so it may be driven by or routinely used to transport a HASCI Waiver participant. It includes the equipment necessary to make the vehicle accessible to the participant.

The service may also include adaptive driving/screening evaluations and repairs and/or replacement parts for equipment previously funded by the HASCI Waiver, but not covered by warranty. As part of the service, the provider must orient the participant to the completed modification upon delivery.

Service Unit

The unit for Private Vehicle Modifications is the specific adaptation, equipment, or associated service (repair, etc.) that is authorized.

There is no set rate for Private Vehicle Modifications or necessary repairs, as these must be individually priced.

Service Limit / Restrictions

Private Vehicle Modifications are subject to the guidelines established by the SCDDSN Head and Spinal Cord Injury Division (*Guidance for Environmental and Private Vehicle Modifications*), which have been incorporated into this manual and must be within the limit of \$30,000 per vehicle.

The HASCI Waiver does not participate financially in the purchase of new or used vehicles (with or without adaptations and modifications already installed).

In order for a used vehicle to be considered acceptable for modification, it should be no more than five (5) years old and the actual mileage should be 100,000 or less. In cases where the condition of the vehicle is in question, a statement from a private certified mechanic or a factory dealership service department to document the condition of the vehicle or individual component such as the engine, body, transmission, tires and frame of the vehicle will be required. Any significant mechanical problems, excessive rust and collision damage must be repaired by the participant prior to consideration.

Under normal usage, and in the absence of unforeseen events and circumstances, and following the manufacturer's recommended maintenance, Private Vehicle Modifications (when all new equipment is installed and modifications are completed at the same time) should last a minimum of 8 years. Private Vehicle Modifications will not be provided more often than 8 years except in rare and urgent circumstances where adequate justification is provided.

Any repairs and/or equipment replacement and other services available through warranty coverage will **not** be provided through the HASCI Waiver. Repairs and maintenance services will be considered for assistance when it is reasonably safe and cost-effective to do so and within funding limits. For example, if a participant's equipment needs repairing or replacing, and failure to do so poses a risk to his or her ability to safely operate the vehicle, repairs may be provided. It would thus be more cost-effective in the long run to repair or replace the equipment, if inevitably it will become necessary to use additional funds to pay a driver.

If all other vehicle eligibility criteria are met, certain items of adaptive equipment installed on an existing participant/family owned van can be removed and sometimes reinstalled on a newer participant/family owned van. An example could be that a participant has had a used (but previously adapted) van donated to them. The adaptive equipment could be in good working condition while the vehicle itself is old and worn. Often a participant might choose to purchase a newer or more suitable van and request assistance to have the equipment transferred. Assurances that the equipment can be cost-effectively transferred, is technically compatible with the newer van, and will continue in good working condition after the transfer must be made prior to making a commitment to the participant and/or family.

Modifications enabling the waiver participant to become the primary driver of the vehicle will only be considered with a prescription from an Occupational Therapist and a driver evaluation. The participant must be trained and licensed to drive utilizing the specified driving equipment prior to waiver funding of such modifications.

The HASCI Waiver does not fund driver's training.

The provision of sophisticated high-tech adaptive driving equipment, specifically, joystick or EGB (Electronic Gas and Brake) systems, and related devices are beyond the resources of the HASCI Waiver and will not be covered except in instances of cost sharing with Vocational Rehabilitation.

Comprehensive driver screenings/evaluations are generally provided for first-time post-disability drivers by larger regional rehabilitation centers. These facilities have the necessary vehicles, specialized equipment, and specialty staff to perform accurate evaluations and when necessary, formulate equipment prescriptions. When a participant has not received a driving evaluation funded through some other means, adaptive

driving/screening evaluations can be funded through the HASCI Waiver, but are limited to \$2000.00, which will be counted toward the total of the \$30,000 per vehicle limit.

Based on the outcome of the evaluation, recommendations surrounding the feasibility of the participant's suitability for driving and prescriptive modifications can clearly be ruled out or further addressed collaboratively with SCVRD. A typical comprehensive adaptive driving screening/evaluation, conducted by an Occupational Therapist or other professional certified Adaptive Driving Evaluator at one of the major rehab centers offering "disabled driver rehabilitation" can include:

1. Information about the participant's current state driver's license status, and past driving record, whether it be pre-injury or post-injury, former vehicle-related accidents, citations, etc.
2. A report of the participant's upper extremity dexterity, strengths, weaknesses, and level of confidence as to driving.
3. A report on cautionary concerns such as involuntary spasticity or significant side effects from prescription medications.
4. Results of measurements and findings related to judgement, braking response/reaction time, and split-second decision-making.
5. Recommendations surrounding driving restrictions that can be imposed by the participant's state driver's licensing agency.
6. Unusual personality traits such as fear, aggression, uncovered through written portions of the screening/evaluation.
7. In cases where it is feasible, a recommendation for a (OEM) vehicle and a customized prescription for adaptive driving equipment.
8. Other disability-specific information, such as the "startle reflex" in common in some disability groups.

Favorable outcomes and recommendations from a driving evaluation shall in no way be construed as a future commitment to the actual provision of adaptive driving equipment and/or other vehicle modifications.

Modifications/repair of a vehicle owned by a publicly-funded agency are not permitted.

Providers

Private Vehicle Modifications may be provided by the following:

- Vendor enrolled with SCDHHS as a Durable Medical Equipment (DME) provider:

A DME provider enrolled with SCDHHS must directly bill SCDHHS; it cannot bill to a participant's SCDDSN Financial Manager agency

- DSN Board or DDSN-contracted provider. The provider may employ or contract with the following, but is responsible to verify and document licensure:
 - Contractor licensed by the South Carolina Department of Labor, Licensing and Regulation (LLR) that is not enrolled with SCDHHS as a DME provider
 - Vendor with a retail or wholesale business license that is not enrolled with SCDHHS as a DME provider

Conflict Free Case Management (effective June 1, 2021):

In order to honor choice and prevent conflicts of interest, providers of Waiver Case Management services must not provide any other waiver service to the same person. When there is a conflict, the WCM will help the participant understand why a conflict exists and offer a choice of either another WCM provider or another waiver service provider. The Case Manager must then transition the participant to the chosen provider within 60 days.

Arranging and Authorizing the Service

Waiver Case Managers must determine the participant's status with the South Carolina Vocational Rehabilitation Department prior to pursuing Vehicle Modifications through the HASCI Waiver. Participants who are dually eligible for services from both agencies and/or are being served concurrently may be eligible for vehicle modification services through Vocational Rehabilitation (VR). An existing Memorandum of Agreement between SCDDSN and VR allows for cost sharing of vehicle modifications. If the participant has an open case with VR or could qualify for VR services, this avenue should be pursued prior to requesting vehicle modifications through the HASCI Waiver.

There must be preliminary discussions with the participant and his or her family or representative to clearly explain required policies and procedures. This includes determining if a privately owned vehicle available to transport the participant meets age, condition, and mileage requirements for Private Vehicle Modifications. The modifications likely to be needed should be identified. If the participant desires to drive a modified vehicle, it must be determined if this is feasible and desirable given his or her functional status. These discussions must be documented in Case Notes.

The majority of participants who use modified vehicles do not realize that liability policies of an at-fault party/driver, or the standard comprehensive coverage portion of an automobile insurance policy, does not cover the replacement cost of equipment and

modifications. Waiver Case Managers should educate participants and families about this, as well encourage them to check with their insurance agent and take out an appropriate “rider” to cover damage to or replacement of wheelchair lifts, lowered floors, and wheelchair restraint systems. Generally, “riders” can only be offered to protect against loss caused by accidents, theft, a fallen tree or similar incidents.

The Waiver Case Manager must first determine if the modifications can be obtained through the participant’s private insurance, Worker’s Compensation, Special Needs Trust, Medicare, Medicaid State Plan, or any other funding (including South Carolina Vocational Rehabilitation Department).

The Waiver Case Manager must document in Case Notes efforts to obtain modifications through other funding sources available to the participant. If not available from other sources, Private Vehicle Modifications funded by HASCI Waiver can be pursued.

In most circumstances, a Private Vehicle Modifications Consultation/Assessment will first be necessary to clearly define the participant’s functional needs, status of the private vehicle, feasible options, and specifications for appropriate modifications. If the participant intends to drive the modified vehicle, a driving evaluation may be necessary to assure he or she has this capability. Once the assessment is complete, the outlined modification can be requested.

In accordance with the South Carolina Consolidated Procurement Code, SCDDSN directive 250-08-DD, *Procurement Requirements for Local DSN Boards*, applies to all procurement activities supported in whole or in part by SCDDSN funding, including Private Vehicle Modifications funded by HASCI Waiver. Providers contracted with SCDDSN must establish and follow procurement policies and procedures with requirements at least as restrictive as those contained in this directive. **Participants must be made aware of this requirement.** Waiver Case Managers, not families, are responsible for soliciting bids for major van modification projects.

Directive 250-08-DD can be accessed on the SCDDSN website: www.ddsn.sc.gov

To determine a provider for Private Vehicle Modifications (including repairs and/or replacement parts for equipment previously funded by HASCI Waiver Private Vehicle Modifications, but not covered by warranty), **State procurement policy must be followed:**

A. \$10,000 or less NO COMPETITION:

Small purchases not exceeding \$10,000 may be accomplished without securing competitive quotations if the prices are considered reasonable. The purchasing office must annotate the purchase requisition "Price is fair and reasonable" and sign. The

purchases must be distributed equitably among qualified suppliers. When practical, a quotation must be solicited from a provider other than the previous supplier before placing a repeat order. The administrative cost of verifying the reasonableness of the price of purchase "not in excess of" may more than offset potential savings in detecting instances of overpricing. Action to verify the reasonableness of the price need be taken only when the procurement officer of the governmental body suspects that the price may not be reasonable, comparison to previous price paid, or personal knowledge of the item involved.

B. \$10,001 to \$25,000 THREE WRITTEN QUOTES:

Written request for written quotes from a minimum of three (3) qualified sources of supply may be made and, unless adequate public notice is provided in the South Carolina Business Opportunities, documentation of at least three (3) bona fide, responsive, and responsible quotes must be attached to the purchase requisition for a small purchase not in excess of \$25,000. The award must be made to the lowest responsive and responsible sources. The request for quotes must include a purchase description. Requests must be distributed equitably among qualified suppliers unless advertised as provided above.

C. \$25,000.01-\$100,000 ADVERTISED SMALL PURCHASE:

Written solicitation of written quotes, bids, or proposals may be made for a small purchase not in excess of \$100,000. The procurement must be advertised at least once in the South Carolina Business Opportunities publication. A copy of the written solicitation and written quotes must be attached to the purchase requisition. The award must be made to the lowest responsive and responsible source or, when a request for proposal process is used, to the highest ranking offeror.

After the provider of Private Vehicle Modifications is determined, the participant's Support Plan must be updated to clearly reflect the name of the service and payer, the amount, frequency, and duration of the service, and the provider type.

In order to update the Support Plan, the Waiver Case Manager will request approval from the SCDDSN Waiver Administration Division. **The price quotes or bids (and all other supporting documentation) must be forwarded to the Waiver Administration Division with the request.**

Upon approval, the Waiver Case Manager must enter the service into the Service Tracking System (STS).

To initiate the service following approval by the Waiver Administration Division, an electronic authorization must be completed and submitted to the chosen provider.

If the provider is not enrolled as a Medicaid Provider with SCDHHS, Board Billed must be indicated on the authorization. If the provider of a Board Billed service is not directly enrolled as a Medicaid Provider and is not on the DDSN QPL but will be invoicing

DDSN for services, the “non-sharable” indicator should be selected when authorizing the service and the authorization can be printed and faxed to the provider. Include a copy of the authorized bid and the Private Vehicle consultation, if applicable, with the authorization.

Billing

If the authorized provider is enrolled with SCDHHS as a DME provider, the service must be must Direct-billed to SCDHHS. This must be indicated on the authorization.

If the provider is not enrolled with SCDHHS, Board Billed must be indicated on the authorization. It must be determined whether the vendor providing the service has previously provided services to other state agencies.

The Waiver Case Manager must inquire of the vendor whether they have provided services to any other state agency and if so, must request their state vendor number.

- If the vendor providing the service has not provided services to any other state agency, the vendor is not in the state payable system.
- If the vendor has not provided services to any other state agency or is unsure, the Waiver Case Manager must obtain a completed W-9 from the vendor and forward to: AP@DDSN.SC.GOV at the time the service is authorized. This will shorten the length of time for processing payment after completion of the modification.
- When completing the Financial Manager portion of the electronic authorization, the Waiver Case Manager should choose “Case Management” as the Financial Manager.
- The modification provider should be directed that their invoice should read DDSN, but it must be sent through the Waiver Case Manager for processing.

Requests for Payment for Environmental Modifications that are NOT direct billed:

Once the modification is completed and the Waiver Case Manager has monitored the modification to ensure satisfaction of the waiver participant, the Case Management

organization will submit a request for payment via RBC (a secure DDSN Web Portal). Each Case Management organization will need access to RBC in order to submit payment requests. If your organization does not have access, please put in a helpdesk ticket by sending an email to helpdesk@ddsn.sc.gov.

To request payment for a completed modification, the following information is required:

- Request for Modification Payment Form
- Invoice from the vendor
- Waiver authorization form (if unable to send electronic authorization)

When the work is completed to the satisfaction of the participant/participant's family, then the above documentation must be scanned and uploaded through the DDSN Web Portal through RBC.

Once the information has been received, it will be reviewed and a payment to the vendor will be issued through DDSN's Accounts Payable Department. To check the payment status, please send an email to AP@DDSN.SC.GOV.

Monitorship

The Waiver Case Manager must monitor the effectiveness, frequency, duration, benefits, and usefulness of the service along with the participant's/family's satisfaction with the service.

Monitoring must be conducted as frequently as necessary in order to ensure:

- the health, safety and well-being of the participant;
 - the service adequately addresses the needs of the participant;
 - the service is being furnished by the chosen provider in accordance with the authorization, relevant policies and quality expectations;
 - the participant/representative is satisfied with their chosen provider(s).
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- **For Vehicle Modifications, the Waiver Case Manager is required to make an on-site visit to observe the modifications within two (2) weeks following completion; the visit and observation of the modifications must be documented in a Case Note, to include a statement regarding completion of the modifications as specified and satisfaction of the participant and/or representative. *This requirement does not apply to consultation/assessment or repairs related to Vehicle Modifications.***

Some questions to consider during monitoring include:

- Was the modification completed as originally prescribed?
- Is the modification functional?
- Is the participant satisfied with the end result of the modification?
- How has it made his/her vehicle more accessible and safe?
- Was he/she satisfied with the provider of the modification?
- Are there additional needs that were included in the bid and the authorized modification that were not met by the provider?

Monitoring contacts, face-to-face visits, and review of the participant's Support Plan must be documented in Case Notes.

Service Denial, Reduction, Suspension, and Termination

If a HASCI Waiver participant is denied a service that was requested or denied an increase in units of a service already authorized, the Waiver Case Manager must provide written notification to the participant or legal guardian, including reason for denial. The Process for Reconsideration of SCDHHS Decisions must also be provided.

If a participant's authorized units of a HASCI Waiver service must be reduced, temporarily suspended, or indefinitely terminated, the Waiver Case Manager must provide written notification to the participant or legal guardian, including reason for the action. The Process for Reconsideration of SCDHHS Decisions must also be provided. The Waiver Case Manager will end the electronic authorization(s), sending notification to the affected service provider.

Except when the action was requested by the participant or legal guardian or if the action is due to the participant's death, admission to a hospital or nursing facility, or loss of Medicaid and/or HASCI Waiver eligibility, there must be at least 10 calendar days between the date of notification and effective date of the action.

Written notification to the participant or legal guardian is made using the following forms:

- *Notice of Denial of Service* (HASCI Form 11C)
- *Notice of Reduction of Service* (HASCI Form 11A)
- *Notice of Suspension of Service* (HASCI Form 11B)
- *Notice of Termination of Service* (HASCI Form 11)

These can be accessed via the SCDDSN Application Portal>Business Tools>Forms>HASCI Waiver.

When the action becomes effective, the participant's Support Plan must be updated. Budget information in the Waiver Tracking System (WTS) must be adjusted accordingly.

Service information in the Service Tracking System (STS) must be updated by the Waiver Case Manager as necessary.