

Q&A Session for AT & the Waiver: An overview, plus Remote Supports!

Assistive Technology

1. One of our members received a deaf/blind communication device through ICANNCONNECT. The member was provided training but will need more training and they only provide so many hours. Can we put in application for additional training support?

ANSWER: If there is still room in the individual's \$15,000 per 5 year service limit, you can submit a request for additional training.

2. Just wanted to clarify, is assistive technology, such as audio or video remote support, or sensors, covered under the HBS waiver?

ANSWER: Assistive Technology is covered under all 3 of the DDD waivers. Remote Support is not yet an approved waiver service, but it has been requested to be added to the Adult Waiver only and it will only be available to individuals receiving CILA services.

3. Will smart home technology and devices such as tablets become accessible through waiver?

ANSWER: Generally speaking, the technology must be for the direct benefit of the waiver participant, essential to addressing needs related to their disability, and must increase their independence. You must provide a thorough explanation detailing how the technology is related to the individual's disability and how it will increase their independence.

4. Can the evaluation needed for assistive technology be included for payment under the waiver and be a separate entity from the provider of the device?

ANSWER: Yes. Please remember the person or company doing the evaluation must be enrolled in IMPACT to be a DDD HCBS provider for adaptive equipment and/or assistive technology even though they will not be providing the device or equipment.

5. Loved Chris's presentation. Have any Smart Home vendor providers been approved to work with waiver individuals to meet planning and purchasing needs?

ANSWER: There have been vendors approved for Assistive Technology and Adaptive Equipment. There are some enrolled providers listed on the Division's website which can be found at: <https://www.dhs.state.il.us/page.aspx?item=56772>. Unfortunately, the Division doesn't maintain a complete list of approved vendors for Assistive Technology, Adaptive Equipment, Home Modifications, or Vehicle Modifications. If you have a vendor you would like to use and you obtain their FEIN, the DDD can check to see if they are an enrolled vendor for the type of service you will be requesting. If the vendor is not enrolled, you should ensure the vendor becomes enrolled before entering into any agreement between yourself and the vendor.

Adaptive Equipment

1. Can the family request a sensory room Kit for adaptive equipment request?

ANSWER: Adaptive Equipment must increase the individual's ability to perform activities of daily living; or perceive, control, access or communicate within the environment they live.

2. For 53E if the device/item and the installation are different companies how should that be applied for?
ANSWER: The work/equipment would need to be itemized on the request when it's submitted to the Division. Both providers would need to be enrolled in IMPACT so both the vendors can be paid individually once the work is complete/equipment delivered.

3. Are communication systems that are not covered by insurance covered under the waiver? Also, if so, who pays out of pocket for this, the family or the provider?
ANSWER: If a device is covered under the State Plan, you must first exhaust all attempts to request the device there first. This includes filing and following up on any appeals. If the device meets the requirements to be purchased under the waiver, then it would be covered. There should never be out of pocket expenses for the family. The company who is providing the communication system must be paid directly from the State.

4. Additionally, if communication devices that are covered under Medicaid are denied for a particular individual, would the DD waiver cover them in that case?
ANSWER: If a device is covered under the State Plan, you must first exhaust all attempts to request the device there first. This includes filing and following up on any appeals. If the device meets the requirements to be purchased under the waiver, then it would be covered.

5. Is there any provisions for the repairs such as wheelchairs or communication devices?
ANSWER: Repairs for communication devices purchased through the waiver would be allowed to be repaired through this service. There must be funds available in the \$15,000 per 5-year service limit to do so. Wheelchairs are a State Plan item and not reimbursable through the waiver.

6. Are hearing aides covered?
ANSWER: No.

7. Can someone funded by adult home based, diagnosed with dwarfism as well as moderate intellectual disability, request funding for a modified three wheeled bike to increase his community accessibility and health?
ANSWER: A bike may be purchased through the waiver if it is to the direct benefit of the person, addresses needs related to the person's disability, increases their ability the perform activities of daily living, and is necessary to integrate more fully into the community. Someone from the audience offered up this information: try private funding such as thetrikeproject or similar.

8. Chew tubes are not eligible?
ANSWER: The Division funds chew tubes on a regular basis.

Home Modifications

1. What about emergency exit/window in a basement that someone with homebased is now living in?

ANSWER: If there is a bedroom in a basement, code requires there to be an egress window in the space. Because this is required for any house, it would not be covered under this service.

2. Would a fence needed to assist with elopement for a person with Autism be something that could potentially be covered?

ANSWER: The fence would have to be to the direct benefit of the person, essential to address needs related to their disability and ensure the health, welfare and safety of the person. Some fence requests have been approved in the past but not all. A fence will not be approved for the person's need for supervision.

3. For Bathroom modifications you need 2 estimates, but companies merged so there may not be enough companies in that area to provide an estimate. How can you work around this?

ANSWER: You should attempt to get a second bid. If one can't be acquired, you must explain why and prove the attempts you made to get a second bid when you submit the request.

4. If a family is building a house from the ground up, would they qualify for the \$15K?

ANSWER: Yes, the family would qualify up to the \$15,000 per 5-year service limit. In this situation, the contractor would have to itemize the cost difference between the regular item and the accessibility item. For instance, the contractor would have to show the difference between a regular door being installed versus a wider door for wheelchair accessibility.

5. How about a whirlpool for someone who has cerebral palsy and difficulty with mobility? She states the whirlpool is therapeutic to her and improves her mobility.

ANSWER: No.

6. If a CILA provider has the ability to do the home modifications would they be able to be paid directly for the cost of the modification - ex widening door ways.

ANSWER: Yes, the CILA provider would have to enroll in IMPACT as a Home Modification provider to do so.

7. Hi there, Just to clarify in regards to modifying the basement of a home, the waiver cannot be used on modifying the basement stairs in order for the consumer to be able to go downstairs and use the area for a sensory/leisure space? Since it's a common area?

ANSWER: The Division would inquire as to why another room on the ground floor couldn't be used for this purpose. The stairs would have to be modified in a way that's specific to the needs of the individual receiving waiver services. If the modification would be necessary for an individual who doesn't have a disability, it would not be covered by the waiver.

8. When doing a bath modification, if the contractor finds that there are additional repairs that need to be completed (rotted wood, etc), can the ISC request additional funding outside the award to cover it? Assuming it is necessary to complete the project?

ANSWER: Maybe, as long as the repairs needed are specific to the modification originally being made, were unable to be detected prior to starting the project, the home modification was previously approved, and the additional expense falls within the person's \$15,000 per 5-year service limit.

9. Are shower chairs covered for home modifications for a bathroom modification? Especially in the case that the individual is immobile?

ANSWER: Maybe. The State Plan funds very basic shower chairs therefore you should request them through the State Plan first. Individuals with severe disabilities who's needs exceed the basic shower chair authorized through the State Plan can request a shower chair through the Waiver. The request would have to explain why the equipment in the State Plan doesn't meet the individual's need.

10. Could this be used to pay for smart locks on a CILA to meet the requirements of individuals needing keys to their homes?

ANSWER: No, CILA providers must be able to meet the requirements of the Settings Rule.

11. I caught part of the discussion on pool and the question on whirlpool for therapeutic use but I am unclear as to whether a pool for hydrotherapy as physical therapy is that Eligible?

ANSWER: No, a pool of any kind is a seasonal item and not reimbursable through the Waiver.

12. Banisters (hand rails on stairs) typically haven't been approved but what if a banister or railing needs to be re-enforced or installed at a different height?

ANSWER: More information would be needed to answer this question. Reinforcing or raising the height of the bannister would have to be specifically related to the individual receiving the waiver services.

Vehicle Modifications

1. Is the vehicular modification available to CDS providers as well?

ANSWER: No, CDS providers are reimbursed for transportation as part of their rate. Costs for vehicle modifications should fit within this rate. Vehicles must be the property of the individual and/or their family in order to have vehicle modifications covered under this service.

2. When doing modifications for vehicles does the vehicle need to be purchased first and modifications are made to it or can the vehicle be purchased already completed?

ANSWER: The vehicle doesn't have to be purchased first. When making a request to modify the vehicle, the cost of the modification should be separated from the cost of the vehicle. Same goes when purchasing a vehicle where the accessibility modification is already installed, the cost off the accessibility modifications have to listed separately from the cost of the vehicle.

Remote Supports (As a reminder, this service is not yet approved so policy hasn't been developed yet.)

1. Could an individual on HBS use the other waiver sections (Home Modification or Asst. Tech) to pay for Remote Support, since Remote Support section is not available for Home-Based?
ANSWER: Any requests for Home Modification or Assistive Technology would have to fall within those service definitions.
2. Is Remote Support available for individuals with Intermittent CILA?
ANSWER: Yes, Remote Supports will be available to all individuals using CILA services (24 Hour, Intermittent, Host Family).
3. For remote supports, can the provider cover equipment or service hour costs if they exceed \$15,000 over 5 years?
ANSWER: The provider would be allowed to cover the cost of equipment or service hours beyond the service limits at their own expense. They can't attempt to bill the waiver participant for this cost.
4. Can you give a few examples of how remote supports would be utilized in a CILA?
ANSWER: Bed or chair pressure sensors, door and window monitors, cameras inside the residence, audio monitoring, cameras at the front door, stove monitoring devices, etc.
5. If multiple people in a CILA are receiving remote supports and share in the purchase of related equipment, who owns the equipment? What happens when 1 person from the CILA moves to a new location?
ANSWER: The Division hasn't developed policy to answer this question yet.
6. What if a client needs to be monitored in their bedroom if they have seizures overnight? Is that covered. I know you mentioned that devices are not covered in bedrooms and bathrooms.
ANSWER: Federal CMS referenced federal rules indicating video equipment can't be used in the bedroom or bathroom. The individual will have to work with their provider and the Remote Support vendor to determine the best way to monitor this individual.
7. Is remote monitoring of any kind (not video, but what about audio) permitted in bathroom (for safety issues)?
ANSWER: Federal CMS referenced federal rules indicating video equipment can't be used in the bathroom. The rules don't appear to limit the use of audio equipment in the bathroom.
8. Will providers be able to directly request remote supports for a multi-person CILA? Do all requests have to go through the ISSAs?
ANSWER: Requests for Remote Supports will require prior approval which is required to go through the ISC.

Service Limits

1. Can you clarify if the CILA reimbursement is a 15,000 maximum every 5 years or when you hit 15,000 that is it?

ANSWER: For CILAs that are provider owned, there is a lifetime maximum \$15,000 for the site. It doesn't reset after 5 years.

2. If you request \$15,000 to cover the cost of sprinkler/fire alarm modifications for a site, does that mean that you have exhausted the \$15,000 per site allowance.

ANSWER: Yes, if the site is a provider owned and controlled CILA site, there is a lifetime limit of \$15,000 for modifications to the site. The DDD has a record of all previous requests and maintains a record of all awards. If a CILA provider wants to know if the site has any remaining funding available, DDD staff can provide that information.

3. If there is a client renting a home, and he has a son who is another client, is that 10k possible pot?

ANSWER: If these are two people approved for HBS supports residing in the same home, each person would get to use their \$5,000 limit for a total of \$10,000.

4. Did you state if there is a limit or cap on funding for vehicles modifications?

ANSWER: Yes, vehicle modifications are included in the \$15,000 per 5-year service limit.

5. When/how does the \$15,000 reset when more than one purchase was made within 5 years?

ANSWER: The Division uses a rolling State Fiscal Year (SFY) accounting when determining the limits. The SFY is from July to the following June. If you use \$5,000 in SFY 19, then \$3,000 in SFY 20, then \$7,000 in SFY 21, you've now used your \$15,000 in a 3-year period. Therefore, you can't request any additional funding for SFY 22 or SFY 23. In SFY 24, you'll have \$5,000 available again (SFY 19 funding would become available). In SFY 25, you'll have an additional \$3,000 available (SFY 20 funding would become available), and in SFY 26 the \$7,000 in funding would become available from SFY 21.

6. If a family has two adults funded by home based, and both clients would benefit from home modifications, can both clients be funded for \$15,000 each?

ANSWER: Yes, if the family owns the house they live in.

Miscellaneous

1. Is there a list of vendors that have been enrolled/approved?

ANSWER: There are some enrolled providers listed on the Division's website which can be found at: <https://www.dhs.state.il.us/page.aspx?item=56772>.

2. If a Home Based waiver participant is self-directed are they responsible for applying for modifications on their own without the help of ISC?

ANSWER: The individual is responsible for getting bids and gathering the necessary paperwork. They can purchase services from an SDA to help them with the shopping process and completing the request. The ISC is responsible for reviewing the packet for completeness and submitting it to the Division.

3. Is there easy to use guidance for vendors to enroll in impact? That is geared to home modification vendors, separate from health care providers?
ANSWER: You can look on the DDD website for information to become a DDD Provider at: <https://www.dhs.state.il.us/page.aspx?item=47336>. Also IMPACT Enrollment information is available on the DDD website at: <https://www.illinois.gov/hfs/impact/Pages/default.aspx>.
4. As an assistive and remote technology vendor - I can enroll via the IMPACT program?
ANSWER: Absolutely. We would love to have you enroll. The website is located here: <https://www.illinois.gov/hfs/impact/Pages/default.aspx>. You can also look on the DDD website for information to become a DDD Provider at: <https://www.dhs.state.il.us/page.aspx?item=47336>.
5. What would a generator be listed as (if it's a direct support to the person for their health and safety)? Two bids (?) needed--how does a family go about this?
ANSWER: Generators typically aren't allowed to be purchased through the Waiver. The Division takes the stance this is related to the medical needs of the individual and not their disability. Most medical equipment has the ability to install a battery back up for power outages which may be available through the State Plan. However, if the request can show the medical equipment is directly associated with the individual's disability, it could be considered for reimbursement.
6. I have a family whose home does not accommodate the individual because of the size it won't allow for modifications is there any funding to help them get another house.
ANSWER: Unfortunately, the Division doesn't pay for the purchase of houses.
7. Can behavior therapy and counseling be done remotely with assistive technology and billed under their billing code vs in person?
ANSWER: Behavior Therapy and Counseling services are different than Assistive Technology. Appendix K currently allows for Behavior Therapy and Counseling to be provided remotely. Once Appendix K expires, these providers will be required to provide services in person.
8. Does the 15K cover a GPS tracker for an individual who elopes?
ANSWER: A GPS tracker or any other type of personal location device or service would have to fall within the requirements of the service definition for Assistive Technology or Adaptive Equipment in order to be reimbursable. In the case of elopement, the request would have to show an extensive elopement history. Additionally, the device couldn't replace the need for supervision.
9. Sometimes when you contact a provider about a problem with a wheelchair lift not working, they want to be paid prior to coming out, is that ok for the to request a charge before the work?
ANSWER: Typically, the process requires the work to be completed first and they payment is sent. In an emergency repair situation, the individual or family could request a limited prior approval through the ISC who would need to forward the emergency repair request to DDD for prior approval. The DDD would check to see if the person has available funding and would

respond via email with a limited prior approval up to the lower of either \$500 or the limit of available funding. Reimbursement can be made to the party submitting the billing under a Representative Payee Agreement.