

<p><b>CHAPTER</b></p> <p><b>5</b></p>
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## **INTERMEDIATE CARE FACILITY FOR INDIVIDUALS WITH INTELLECTUAL DISABILITY (ICF/IID) LEVEL OF CARE**

To enroll in the ID/RD Waiver, a participant must:

1. Be diagnosed with an intellectual disability or a related disability (as determined by DDSN).
2. Be eligible to receive Medicaid.
3. Be allocated a waiver slot.
4. Choose to receive services in his/her home and community.
5. Meet ICF/IID Level of Care.

### **Initial ICF/IID Level of Care Evaluations for the Purpose of Enrolling in the Waiver:**

The DDSN Eligibility Division makes the initial determination of ICF/IID Level of Care. The Waiver Case Manager (WCM) must complete an initial ICF/IID Level of Care and submit for approval via Therap to the DDSN Eligibility Division after the following have been met:

1. Waiver slot has been allocated
2. Feasible alternatives under the waiver have been explained
3. Choice of institutional services or home and community-based services has been made
4. Enrollment is expected to occur in the next 30 days

In addition, the WCM must gather records that support the Level of Care. These records may include:

1. DDSN Eligibility Document
2. Formal psychological evaluation(s) that includes cognitive and adaptive scores that support a diagnosis of an intellectual disability. Every effort should be made to locate the report that is noted on the Eligibility Document as well as more recent evaluation reports, if available.

If the participant does not have an intellectual disability and/or is served in another eligibility category (i.e. related disability), appropriate supportive documentation is required such as a report from the DDSN Autism Division or appropriate medical, genetic or adaptive assessments.

3. Current Annual Assessment and Support Plan
4. Current school year IEP (if applicable)
5. Current (within one year) signed and dated information pertaining to:
  - Daily living and other adaptive functioning
  - Behavior/emotional functioning (e.g., Behavior Support Plan)
  - Medical and related health needs

- For children, under the age of 5, who have not been determined DDSN eligible or are eligible as a High-Risk Infant or At-Risk Child, the following support documentation must be included:
  - DDSN Eligibility Document if DDSN eligible
  - Current (within 3 months) screening assessment
  - All available relevant medical, genetic, and developmental reports.

ICF/IID Level of Care requests are submitted for approval through the Level of Care module in Therap.

After a review of records by the DDSN Eligibility Division, the Level of Care may be returned if further testing is needed. If testing is needed, the WCM will be notified of the type of testing needed. Testing must be completed by approved providers listed on the DDSN website. To find a list of providers on the DDSN website, go to Services – Find a Service Provider – Behavioral Health Services Provider Directory. Select Psychological Testing as the service. <https://app.ddsn.sc.gov/public/ndp/landing.do?providerType=B>

Once all needed information is submitted, the DDSN Eligibility Division will review the Level of Care. When the Level of Care determination has been completed, the DDSN Eligibility Division will certify that the participant does or does not meet ICF/IID Level of Care.

If the person **does not** meet ICF/IID Level of Care, the DDSN Eligibility Division will mail the DDSN Level of Care Certification Letter and the Process for Reconsideration of SCDHHS Decisions certified to the participant/legal guardian with a copy to the Waiver Case Manager.

The DDSN Eligibility Division is responsible for providing Level of Care information needed for enrollment to the DDSN Waiver Enrollment Coordinator.

### **Those Who Do Not Enroll within 30 days of the Initial Level of Care Determination:**

Waiver enrollment must occur within thirty (30) days of the Level of Care Determination date (see Chapter 6 Enrollments for more information). If a Level of Care expires prior to enrollment in the Waiver, a new Level of Care must be completed. Prior to completing a new LOC, the WCM must verify that the person is ready for enrollment by consulting with the Waiver Enrollment Coordinator. Once all enrollment issues have been resolved, a new LOC must be submitted before enrollment can occur.

### **ICF/IID Level of Care Annual Re-evaluations/Re-determinations for Waiver Participants:**

Once enrolled, ICF/IID Level of Care determinations are valid for up to 365 calendar days. Each participant must be re-evaluated at least annually (or as needed, given changes in condition, diagnosis, etc.) and re-determined to meet ICF/IID Level of Care to continue to receive Waiver-funded services.

The Waiver Case Manager (WCM) must complete the annual ICF/IID Level of Care and submit for approval via Therap to the DDSN Eligibility Division. The DDSN Eligibility Division reviews ICF/IID Level of Care annual re-evaluations/re-determinations for approval after submission by the case manager. The evaluation will, at a minimum, consist of a review of the DDSN Eligibility document and testing that supports that determination as well as any **recent** psychological reports or assessments that support the service recipient's eligibility category; current social, medical, or behavioral information along with a review of the current Case Management Annual Assessment, Support Plan and/or current school year IEP (if applicable).

**Note:** The Level of Care re-evaluation/re-determination must be submitted to the DDSN Eligibility Division at least 30 days prior to the due date. It is the responsibility of the WCM to keep track of LOC due dates. **If the LOC expires, no services can be billed through the waiver until a new LOC is completed.**

If a participant continues to meet ICF/IID Level of Care, the DDSN Level of Care Certification Letter does not have to be completed.

If it is determined that a participant **does not** meet ICF/IID Level of Care, the DDSN Eligibility Division must complete and mail the DDSN Level of Care Certification Letter, with the Process for Reconsideration of SCDHHS Decisions, to the participant/legal guardian. The LOC Certification letter must be sent via certified mail. A copy of the LOC Certification letter must be uploaded in the Level of Care Attachments section and provided to the WCM.

**Note:** If a participant no longer meets ICF/IID Level of Care, then he/she can no longer participate in the Waiver and the WCM must initiate procedures for waiver disenrollment immediately. Waiver-funded authorizations must be terminated immediately.

**Note:** If the DDSN eligibility of a Waiver participant changes to a not-eligible status under the category of Intellectual Disability or Related Disability, the WCM must complete a Level of Care Re-evaluation due to the change in eligibility status and submit to the DDSN Eligibility Division. The process for a participant who no longer meets ICF/IID Level of Care, listed above, must be followed.

A participant cannot be disenrolled from the Waiver solely based on an eligibility decision. A Level of Care re-evaluation must be done, and this decision upheld by the Process for Reconsideration of SCDHHS Decisions. If the participant then files an appeal with SCDHHS, Division of Appeals and Hearings, and the LOC Re-evaluation decision is upheld, then the participant can be disenrolled from the Waiver.