

The purpose of this guidance document is to provide clarification on Electronic Home-Based Services (EHBS) which may be accompanied by Assistive Technology service (AT) to meet the needs of Individuals with a Medicaid funded Developmental Disability Waiver (DD WAIVER).

12VAC30-122-360. Electronic home-based support service (EHBS); shall provide devices, equipment, or supplies, based on current technology to enable the individual to more safely live and participate in his community while decreasing the need for other services such as staff supports. The equipment or devices shall be purchased for the individual and typically shall be installed in the individual's home. Portable hand-held devices may be used by the individual at home or in the community. These devices and this service shall support the individual's greater independence and self-reliance in the community. This service may also include ongoing electronic monitoring, which is the provision of oversight and monitoring within the home through off-site monitoring. The electronic home-based service shall be covered in the FIS (Family and Individual Supports), Community Living (CL), and Building Independence (BI) waivers.

12VAC30-122-270. Assistive technology service (AT); A. Service description. Assistive technology (AT) service shall entail the provision of specialized medical equipment and supplies including those devices, controls, or appliances specified in the individual support plan but that are not available under the State Plan for Medical Assistance that (i) enable individuals to increase their abilities to perform activities of daily living (ADLs); (ii) enable individuals to perceive, control, or communicate with their environment; (iii) actively participate in other waiver services that are part of their plan for supports; or (iv) are necessary for life support, including the ancillary supplies and equipment necessary to the proper functioning of such items. The AT service shall be covered in the FIS, CL, and BI waivers.

Qualifications for EHBS:

1. Must be 18 or older and capable of using the equipment
2. Initial requests for EHBS must be accompanied by a Preliminary Needs Assessment completed by an independent professional consultant (Occupational Therapist, Board Certified Behavior Analyst or other qualified professional) who is licensed in Virginia
3. EHBS assists the Individual with an identified need in the Individualized Support Plan (ISP)
4. EHBS may not duplicate other Medicaid funded supports and services or be used for the convenience of caregivers
5. The EHBS provider must identify a backup plan in the event of an emergency or system malfunction
6. This service permits individuals, through the use of technology, to utilize less restrictive levels of support and potentially avoid institutional level of care; it is expected that other Medicaid funded services will reduce with the implementation of EHBS

Qualifications for AT:

1. The Individual shall have demonstrated a need for the equipment for remedial or direct medical benefit, the item(s) support outcome(s) in the ISP.
2. Items accessed through AT are not otherwise available through State Plan Option (SPO)
3. Enables the Individual to be more independent with Activities of Daily Living (ADLs) and/or communicate more effectively

4. An independent professional consultation is completed by a professional knowledgeable in the item(s) requested, the consultation cannot be performed by the AT provider
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***If an Individual chooses EHBS as a waiver service, and, the EHBS provider is also enrolled to provide AT, the provider may choose to utilize AT to access the equipment used in conjunction with EHBS or utilize EHBS to provide the technology.**

1. An Individual expresses an interest in using EHBS
2. The Support Coordinator (SC) offers choice of providers, confirms use of EHBS relates to an outcome in the ISP, and assists the Individual to obtain a preliminary needs assessment completed by an Independent Professional Consultant (Assessor)
3. The Assessor determines: Does the Individual meet eligibility for EHBS? What needs can be met through EHBS?
4. If EHBS is recommended, the SC obtains a copy of the written assessment, shares it with the chosen EHBS provider, completes a referral for EHBS services
5. The SC coordinates a meeting with the EHBS provider, the Individual and their ISP team to review the assessment. The EHBS provider proposes technology options to meet the needs identified in the assessment. If appropriate, the EHBS provider discusses using AT to fund the proposed technology
6. The EHBS provider completes a written recommendation including the technology items agreed upon by the team, including an itemized invoice for each item, gives a copy of the recommendation to the SC
7. The SC confirms the EHBS written recommendation includes the technology items agreed upon by the ISP team
8. The Support Coordinator provides a copy of the EHBS provider’s written recommendation to the Assessor
9. The Assessor confirms the best type and use of the technology, verifies cost effectiveness; the Assessor either amends their original assessment to include the technology items (including any application or software fees) recommended by the ISP team or signs in agreement of the EHBS provider’s written recommendation
10. The Support Coordinator receives a copy of the final recommendation from the Assessor, attaches the document(s) for review by service authorization
11. The EHBS provider attaches their plan for support for review by service authorization. The EHBS provider will indicate whether the technology will be accessed using Assistive Technology or supplied through EHBS.
12. If approved, the EHBS provider will deliver and install the technology then train the Individual and team how to use the technology.

When an Individual wishes to continue utilizing EHBS in their next plan year:

1. At the Individual's next ISP meeting, the team will discuss the continuation of EHBS. Another Independent Consultation will only be required if the Individual is assessed for additional technology (the above process is followed to access additional technology)
2. The EHBS provider submits a written summary of EHBS services and continued justification for EHBS in the next ISP year; this can be placed in the justification section of the service authorization request
3. The Support Coordinator reviews the EHBS provider's submission, confirms the ISP team's desire to continue EHBS, and submits the service authorization for review
4. If software or application updates are required for a device already purchased through AT, the EHBS provider will submit a request for AT Maintenance along with an explanation of how the update will benefit the Individual

Important notes:

*Individuals utilizing EHBS and/or AT must have access to WiFi and/or cell service if required, as neither are funded by Medicaid.

*EHBS shall not be covered for Individuals who are receiving residential supports that are reimbursed on a daily basis, such as group home, or sponsored or supported living residential service.

*Justification for the continuation of EHBS includes how the item or service will decrease the need for other Medicaid services (e.g., reliance on staff supports); AND/OR promote inclusion in the community; AND/OR increase the individual's safety in the home environment.

*Technology items supplied through EHBS or purchased through AT are owned by the Individual.

*AT Maintenance requests do not require an assessment but do count toward the AT maximum allowance.

* The EHBS service provider has the primary responsibility to furnish, install, maintain, test, and service the equipment, as required, to keep it fully operational. The provider must replace or repair the device within 24 hours of the individual's notification of a malfunction of the unit or device.

* In situations in which EHBS will include live video and/or audio feed, the individual, legal guardian, or authorized representative will be required to sign a consent form which acknowledges their agreement to some degree of compromise to the individual's privacy in exchange for the safety afforded by the electronic monitoring.

* The technology provided must be deemed compliant with all relevant privacy laws – including HIPAA.

* Per DHBDS Human Rights regulations, individuals have the right "to consent or not consent to receive or participate in services." This means that the individual has the right to turn off the remote monitoring device(s) and that this, as well as the safety implications of such an action, must be explained to the individual as part of the ISP meeting and annual review of Human Rights.

* Changes in the Individual's needs will be assessed at least every 90 days by the provider and communicated to the Case Manager/Support Coordinator.