

Appendix K Innovations Waiver Amendment

Appendix K Flexibilities/Innovations Waiver Amendment Changes	Will this flexibility end?	If no, will this flexibility change?	Implementation Guidance
Home Delivered Meals	No	Yes	Effective 3/1/24, Members will receive one meal a day versus the two meals a day that were available under Appendix K.
			The Innovations Waiver codes with the GT and CR modifiers will be ended 2/29/24.
Real time, two-way interactive audio and video telehealth for Community	video telehealth for Community ng Support; Day Support, ported Employment, Supported ng, and Community Networking to No delivered in accordance with the uirements of the Health Insurance ability and Accountability Act	No	The Innovations Waiver codes with just the GT Modifier will begin 3/1/24.
Living Support; Day Support, Supported Employment, Supported Living, and Community Networking to be delivered in accordance with the			Telehealth is not intended to replace a full meaningful day, but rather to complement it. Services that support community integration are not eligible for 100% telehealth delivery.
requirements of the Health Insurance Portability and Accountability Act (HIPAA)			The use of telehealth shall not exceed 25% of the authorized service hours per week (i.e. if an individual is authorized 40 hours a week, the individual may use the real time two-way interactive audio and video telehealth 10 hours week).

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Allow waiver individuals to receive services in alternative locations: hotel, shelter, church, or alternative facility- based settings.	No	No	 Waiver members may only receive services in alternative locations under specific circumstances to include: If a member has been displaced from their home due to public health emergency or state of emergency, or If the caretaker of the member becomes ill and is not able to care for the individual or If the member's health and safety is at risk due to family health concerns.
Requirement for the member to attend the day supports provider once per week.	No	No	This flexibility will continue to be available on 3/1/24 to support members maximizing their time in the community.
Community Navigator will be available only to members who self-direct one or more of their services through the agency with choice or employer of record model.	N/A, not a flexibility	N/A, not a flexibility	Effective 3/1/24, Community Navigator it will only be available for individuals participating in self-direction. Members currently utilizing services who do not participate in self-direction should stop receiving those services on 2/29/24. Care Team members should work together to update a member's ISP as needed.

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Waive \$135,000 waiver limit	No	Yes	The member budget will be in effective 3/1/24. The waiver limit has increased to \$184,000. If there are members who are exceeding \$184,000 in their annual budget, they will be able to maintain their current services/supports until the end of their plan year. At the time of the annual ISP, the Care Manager will work with the member and/or LRP to bring the member's budget within \$184,000.
Allow parents of minor children receiving Community Living and Supports to provide this service to their child who has been indicated as having extraordinary support needs up to 40 hours/week and not exceeding 56 hours.	No	No	 Family members living under the same roof as the waiver individual may provide services. Objective written documentation is required as to why there are no other providers available to provide the services. Note: Written objective documentation may be provided in ISP or separate document. Family members who provide these services must meet the same standards as providers who are unrelated to the individual.

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			 Note: This does not apply to parents of minor children who are also the Employer of Record (EOR). For any new requests for Relative as Direct Support Employee (RDSE), a request can be submitted using the following link: <u>Innovations Waiver - Relative as Direct Support Employee Application</u>
Allow relatives of individuals receiving Supported Living to provide this service; service by relative may be provided prior to background check and training for 90 days.	No	Yes	This is currently available and will continue to be available on 3/1/24. The relative must complete background check and training prior to rendering services. For any new requests for Relative as Direct Support Employee (RDSE) or to update the services for an existing RDSE, a request can be submitted using the following link: <u>Innovations Waiver - Relative as Direct</u> <u>Support Employee Application</u>

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Allow relatives as providers for adult waiver members to provide above 56 hours/week, not exceeding 84 hours/week of Community Living and Supports.	No	No	 Family members living under the same roof as the waiver individual may provide services. Objective written documentation is required as to why there are no other providers available to provide the services. Note: Written objective documentation may be provided in ISP or separate document. Family members who provide these services must meet the same standards as providers who are unrelated to the individual. Note: This does not apply to parents of minor children who are also the Employer of Record (EOR). For any new requests for Relative as Direct Support Employee (RDSE), a request can be submitted using the following link: Innovations Waiver - Relative as Direct Support Employee Application

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Members can receive fewer than one service per month without being subject to discharge.	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, members must receive one service per month to maintain Innovations Waiver services. Additional requirements apply. Please see Clinical Coverage Policy 8P available on the <u>Program Specific</u> <u>Clinical Coverage Policies webpage</u> for more information.
Allow for an increase in service hours from what is in the person-centered plan without prior authorization.	Yes	N/A	Effective 3/1/24, Innovations waiver services will require prior authorization to request service hours as outlined in Clinical Coverage Policy 8P available on the <u>Program Specific Clinical Coverage Policies webpage</u> for more information. Please note that services will be no prior authorization for a limited amount of time to allow continuity of care for members and providers as Trillium consolidates with Eastpointe and Sandhills.

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Respite may be provided when family is out of state due to evacuation/displacement until they return home. Out of home Respite may be provided in excess of 30 days on a case by case basis.	Yes	N/A	Respite services are not provided during out-of-state travel (since the caregiver is required to be present during the trip) with the exception of members living in counties bordering another state; the agency providing services must be an enrolled NC Innovations Provider Agency located within 40 miles of the border of the county. Other services can be provided out-of-state when written prior approval of the request for their staff to accompany a member out-of-state is received from the supervisor of the staff person and Trillium. Additional requirements apply. Please see Clinical Coverage Policy 8P available on the <u>Program Specific</u> <u>Clinical Coverage Policies webpage</u> for more information.
Relatives of adult waiver beneficiaries who reside in the home and out of the home to provide services prior to background check and training for 90 days.	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, RDSEs who reside in or out of the home must receive a background check and training prior to the provision of services the member(s).

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Day Supports, Community Living and Supports, Supported Employment and Community Networking to be provided in the home of the participant, the home of the direct care worker, or the residential setting.	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, this flexibility will be ending. Please see Clinical Coverage Policy 8-P for more information. Please see Clinical Coverage Policy 8P available on the <u>Program Specific Clinical Coverage Policies webpage</u> for more information.
Allow for existing staff to continue to provide service, for 90 days, when CPR and NCI re-certification has lapsed. This applies to Community Living and Supports, Crisis Services, Community Networking, Day Supports, Respite, Residential Supports, Supported Living, and Supported Employment.	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, staff must receive training prior to the provision of services the member(s).
Allow for additional services to be provided by relatives who live in the home of the adult waiver member (current waiver only allows for Community Living and Supports) to include Community Networking, Day	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, RDSEs for adult members may provide Supported Living and Community Living and Supports. RDSEs for minor members may provide Community Living and Supports. Providers and Care Managers should work with RDSEs who are providing additional services/supports other

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Supports and Supported Employment for 90 days.			than Supported Living and Community Living and Supports to ensure that the member can continue to receive those services on 3/1/24 with other staff.
Allow extension of Level of Care (LOC) redetermination and ISP development	Yes	N/A	Effective 3/31/24, members are required to complete annual reassessments of level of care (LOC) and complete the person-centered planning process for development of the ISP.
Community Living and Supports may be provided in acute care hospital or short-term institutional stay, when the member is displaced from home because of COVID-19 and the waiver participant needs direct assistance with ADLs, behavioral supports, or communication supports.	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, members will not be able to receive Community Living and Supports in an acute care hospital or short-term institutional stay.
Retainer payments to direct care workers to address emergency related issues.	Yes	N/A	Effective 3/1/24, retainer payments will no longer be available for direct care workers. This means that Innovations Waiver codes with an XR and CR modifier will be ended.

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Waiving of the face-to-face requirements for monthly and quarterly monitoring.	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, monitoring requirements for members will resume as required.
Waive Support Intensity Scale (SIS) Assessments/reassessment during this amendment.	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, SIS assessments will be required to be completed every 2 years for children under the age of 15 and every three years for individuals over the age of 15. If a member has not completed a SIS assessment, one must be scheduled by 2/29/24.
Waive requirement for the Letter of Medical Necessity or Prescription from the Physicians, Nurse Practitioner or Physician's Assistant for ongoing supplies or replacement equipment for which member has an already established authorization. This applies to Assistive Technology, Equipment and Supplies (ATES).	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, letters of medical necessity and prescription from the Physicians, Nurse Practitioner or Physician's Assistant for supplies and replacement will be required for ATES.
Allow primary Alternative Family Living (AFL) Providers to provide Supported Employment, Day Supports or	Yes	N/A	This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, AFL Providers for adult members may only provide Residential Supports to their members.

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Community Networking to the participant living in the AFL during times that Supported Employment, Day Supports or Community Networking would be regularly provided.			Providers and Care Managers should work with members and their AFL providers who are providing additional services/supports other than Residential Supports to ensure that the member can continue to receive those services on 3/1/24 with other staff.
Allow legally responsible persons of minor waiver beneficiaries who reside in the home and out of the home to provide, Day Supports, Supported Employment, and Community Networking when other providers are not available.	Yes	N/A	 This Appendix K flexibility will be ending 2/29/24. Effective 3/1/24, RDSEs for child members may provide Community Living and Supports. Providers and Care Managers should work with RDSEs who are providing additional services/supports other than Community Living and Supports to ensure that the member can continue to receive those services on 3/1/24 with other staff.