TITLE: Reimbursement of Out of State Home and Community Based Waiver Services

Policy Number: 2017-08-BDDS-001

Effective Date: November 8, 2019

Revision History: August 28, 2017; September 17, 2019

Purpose:

The purpose of this policy is to describe the limited circumstances for which a state-approved waiver program provider may be reimbursed for the provision of Indiana Medicaid home and community based services (HCBS) outside of Indiana.

Scope:

Individuals utilizing HCBS through the Division of Disability and Rehabilitative Services (DDRS) waivers should access Medicaid and waiver services in Indiana whenever possible.

Reimbursement for Medicaid State Plan services provided outside of Indiana is limited to services described in 405 IAC 5-5-1.

Policy Statement(s):

Providers of HCBS services for individuals with intellectual and developmental disabilities may receive reimbursement for services provided outside of Indiana through Indiana Medicaid in limited circumstances under DDRS’ Bureau of Developmental Disabilities Services (BDDS) - operated waiver programs. Providers must be licensed and accredited according to the specific laws and regulations that apply to the service provided and, pursuant to 460 IAC 6-10-3, must comply with all applicable State and federal statutes, rules, regulations and requirements when providing services.

Reimbursement is allowable for the following activities and services when provided outside of Indiana, if they are documented in an individual’s person-centered individualized support plan:

- Day trip activities that cross Indiana’s borders
- Overnight trips within the United States.
• Direct support staff accompanying individuals residing in border areas to appointments to receive Medicaid State Plan services outside of Indiana, if the medical service is covered by Medicaid in accordance with 405 IAC 5.

• Services to individuals who attend undergraduate and graduate programs in states contiguous to Indiana while remaining Indiana residents

Case Management Responsibilities

Case managers are responsible for completing specific activities when reimbursement will be made for services provided to individuals as part of an overnight trip outside the State of Indiana.

• Case managers must document the following information in case notes:
  o When travel is expected to begin and when the individual is expected to return
  o Where the individual is traveling (city & state)
  o Who the individual is traveling with (name & relationship)
  o What supports are anticipated to be provided

• If the individual is traveling outside the State of Indiana for 14 or more consecutive days, the case manager must:
  o Update the individual’s status to “Travel” in the BDDS case management system
  o Hold quarterly face-to-face or team meetings virtually using private, visual, secure, two way communication.

• In the event an Incident Report (IR) is needed, the case manager must:
  o File the IR following the Incident Reporting and Management Policy (BQIS 460 0301 008).
  o If the incident requires reporting to Adult Protective Services (APS) or Child Protective Services (CPS), the IR shall be sent to the APS or CPS entity with jurisdiction over the physical location of the incident occurred.
  o Any required follow-up with the individual and guardian, if applicable, shall be conducted virtually using private, visual, secure, two way communication.

Definitions:

1. “Bureau of Developmental Disabilities Services” (BDDS) means bureau of developmental disabilities services as established under IC 12-11-1.1

2. “Developmental disabilities” means a severe, chronic disability of an individual that meets all of the conditions cited under IC 12-7-2-61

3. “Direct support staff” means the staff person, agent or employee of a provider entity, who provides hands-on services to an individual as defined under 460 IAC 6-3-18.
4. “Division of Disability and Rehabilitative Services” (DDRS) means the division established by IC 12-9-1-1
5. “Home and Community-Based Services” (HCBS) means home and community based services described under Section 1915(c) of the Social Security Act
6. “Individual” means a person with a developmental disability who has been determined eligible for waiver services by a BDDS service coordinator pursuant to IC 12-11-2.1-1. If the term is used in the context indicating that the individual is to receive information, the term also includes the individual’s legal representative.
7. “Individualized support plan” or “ISP” means a plan as defined under 460 IAC 6-3-32
8. “Medicaid State Plan” means an agreement between a state and the federal government describing how that state will abide by federal rules as it administers its Medicaid programs.
9. "Provider" means a person or entity approved by the BDDS to provide the individual with agreed upon services as defined in 460 IAC 6.
10. “Waiver” means a program of services operated under the authority of Section 1915(c) of the Social Security Act.

References:
Section 1915(c) of the Social Security Act
42 CFR §430.25
42 CFR §440.180
405 IAC 5-1
IC 12-7-2-61
IC 12-11-1.1
460 IAC 6-10-3
460 IAC 6-3-18
460 IAC 6-3-30
460 IAC 6-3-32
460 IAC 6-3-42

Authorized by: ___________________________ on: ___________________________

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