



**ADMINISTRATIVE DIRECTIVE**

<b>Transmittal:</b>	21-ADM-04
<b>To:</b>	Executive Directors of Voluntary Provider Agencies Executive Directors of Agencies Authorized to Provide Fiscal Intermediary Services Developmental Disabilities Regional Office and State Operations Office Directors
<b>Issuing OPWDD Office:</b>	Division of Policy and Program Development
<b>Date:</b>	July 28, 2021
<b>Subject:</b>	Service Documentation for Assistive Technology, Environmental Modification, and Vehicle Modification Services Provided to Individuals Enrolled in the Office for People With Developmental Disabilities Home and Community Based Services Waiver
<b>Suggested Distribution:</b>	Administrative Staff of Fiscal Intermediary Services Providers Support Brokers Quality Improvement Staff Regional Office Front Door Staff Regional Office Coordinators of Assistive Technology, Environmental Modification, and Vehicle Modification services Assistive Technology, Environmental Modification, and Vehicle Modification Provider Agencies Care Coordination Organizations
<b>Contact:</b>	People First Waiver mailbox at <a href="mailto:peoplefirstwaiver@opwdd.ny.gov">peoplefirstwaiver@opwdd.ny.gov</a>
<b>Attachments:</b>	AT, E-Mod, V-Mod Guidance and Review Sheet

Related ADMs/INFs	Releases Cancelled	Regulatory Authority	MHL & Other Statutory Authority	Records Retention
		14 NYCRR 635-10.4	MHL §§13.07,13.09(b) and 43.02 OPWDD's Comprehensive Waiver under §1915(c) of the Social Security Act <sup>2</sup> U.S.C. §1396(n)(c)	18 NYCRR §504.3(a) 18 NYCRR §517.3 14 NYCRR §635-4.5 New York False Claims Act (State Finance Law §192)

## **Purpose:**

This Administrative Memorandum describes Assistive Technology (AT), Environmental Modification (E-Mod), and Vehicle Modification (V-Mod) service documentation requirements that support a Medicaid or state-payment claim.

These requirements apply to AT, E-Mod, and V-Mod services for individuals who are enrolled in the Office for People With Developmental Disabilities (OPWDD) Home and Community Based Services (HCBS) Waiver. This document does not govern services delivered to children enrolled in the Children's HCBS Waiver operated by the Department of Health (DOH).

AT is defined as an item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or to improve the functional capabilities of the individual, and/or enhance an individual's independence in performing activities of daily living (ADLs), instrumental activities of daily living (IADLs) and health-related tasks. AT is also a service that directly assists an individual in the selection, acquisition, or use of an assistive technology device or piece of equipment.

E-Mods are defined as those physical adaptations to the individual's home that are necessary to ensure the health, welfare, and safety of the individual or that enable the individual to function with greater independence in the home without which institutionalization and/or a more restrictive and expensive living arrangement would be required.

V-Mods are defined as physical adaptations to the individual's vehicle that are necessary to ensure the health, welfare, and safety of the individual or that enable the individual to function with greater independence.

## **Background:**

Individuals may request AT, E-Mod, and V-Mod services through the OPWDD Developmental Disabilities Regional Office (DDRO) or the Fully Integrated Dual Advantage Plan for Individuals with Intellectual and/or Developmental Disabilities (FIDA-IDD). For HCBS enrollees who are also members of FIDA-IDD, the managed care plan is responsible for the prior authorization and payment of AT, E-Mod and V-mod services.

## **Eligibility:**

Individuals who reside in non-certified home and community-based settings may qualify for AT, E-Mod, and V-Mod services funded through the OPWDD HCBS Waiver. Individuals who reside in certified home and community-based settings (i.e., supervised, or supportive Individualized Residential Alternatives (IRAs) or Family Care Homes) do not qualify for E-Mod or V-Mod services but may qualify for AT services if it is demonstrated that the service is not directly related to the provision of Residential Habilitation services and not included in the provider's Residential Habilitation rate.

## **Discussion:**

### **Service Provision for AT, E-Mods, and V-Mods:**

AT, E-Mod and V-Mod services may include:

- Evaluation of the needs of the individual, including a functional evaluation of the impact of the provision of the appropriate service in the environment in which the service will be used;
- Purchasing, leasing or otherwise providing for the acquisition of devices; and/or
- Training or technical assistance for the individual and any informal or formal support persons who will be assisting the individual in using the device or modification.

### **Prior Authorization and Authorization of Services:**

AT, E-Mod and V-Mod services require prior authorization by the DDRO. A Notice of Decision (NOD) will be issued by the DDRO regarding the approval or denial of a request for AT, E-Mod and V-Mod services.

AT, E-Mod and V-Mod service limits may not exceed \$15,000 per individual, per service, per calendar year without additional review and prior authorization by OPWDD and DOH.

The DDRO will not authorize any project or purchase initiated or completed before DDRO or OPWDD prior authorization.

AT, E-Mod, or V-Mod service expenditures must be related to an assessed need, as documented in an individual's Life Plan, and serve to increase, maintain, or improve the individual's independence and meaningful participation in the community with less reliance on paid staff supervision or assistance.

AT, E-Mod, and V-Mod service requests will include a review by the DDRO of the clinical and medical justification for the service, verification that other funding sources are not available, documentation that other economical options have been explored and are not sufficient to meet the need, as well as a review of the scope of work, as applicable.

AT, E-Mod, and V-Mod services are expected to be one-time only expenditures. Replacements, repairs, upgrades, or enhancements made to previously approved existing devices, equipment or modifications may be paid if documented as an assessed need in the Life Plan and approved by the DDRO through the complete service request review process.

Services to be performed and/or devices to be purchased are authorized by the DDRO and selected through a standardized bid process in accordance with State Finance Law and procurement procedures including those established by the New York State Office

of the State Comptroller. The service is only billed to Medicaid by OPWDD once the device or service is delivered or the work is verified as complete. The amount billed is equal to the contract or vendor value.

Guidance on service definitions, review criteria, and examples of eligible services are available through the DDRO.

**Service exclusions include, but are not limited to, the following:**

The HCBS Waiver cannot fund AT, E-Mods or V-Mods that may be funded by the Medicaid State Plan under the Durable Medical Equipment Benefit (DME) or from other sources such as Medicare or private insurance.

Assistive Technology:

- Extended warranties and routine maintenance of AT acquired under the OPWDD HCBS Waiver are the responsibility of the individual/family.
- Devices/services that are considered experimental will not be authorized.
- Entertainment and recreational equipment will not be authorized. Items that an individual or typical-age peer would commonly use/need are the responsibility of the individual/family.
- Devices such as computers and tablets will not be authorized.
- Therapy animals, emotional support animals (i.e., those that are not trained to do work or perform specific tasks) or animals used exclusively for medical alert purposes (e.g., seizures) will not be authorized.
- For service animals that are authorized, the cost of animal food and veterinary care is the responsibility of the individual and or family, and not OPWDD or the Medicaid program.

Environmental Modifications:

- Extended warranties and routine maintenance of E-Mods acquired under the OPWDD HCBS Waiver are the responsibility of the individual/family.
- Adaptations or improvements to the home that are of general utility and are not of direct medical or remedial benefit to the individual will not be authorized.
- Adaptations beyond those modifications necessary to address the needs of the person will not be authorized.
- Adaptations that add to the total square footage of the home will not be authorized.
- Removing modifications or returning property to its original state is the responsibility of the individual/family.

Vehicle Modifications:

- Extended warranties and routine maintenance of V-Mods acquired under the OPWDD HCBS Waiver are the responsibility of the individual/family.
- Vehicle Modifications are limited to the primary vehicle used by the individual and the vehicle must be owned.
- Vehicles that exceed 50,000 miles or are older than 5 years will not be authorized for modification.
- Removing modifications or returning property to its original state is the responsibility of the individual/family.

### **Providers of AT, E-Mod, V-Mod:**

For AT, E-Mod, and V-Mod services authorized by the DDRO, OPWDD is the provider of record for billing purposes. OPWDD may contract with a not-for-profit provider for the administration of AT, E-Mod, and V-Mod projects. For AT, E-Mod and V-Mod providers contracted through the DDRO, the following applies:

- All contracted providers must be a Medicaid enrolled provider, an approved OPWDD HCBS waiver provider, or have a contract with the DDRO.
- The contracted provider must ensure that all devices and supplies meet standards established by Underwriters Laboratory and/or comply with Federal Communications Commission regulations, if applicable.
- The contracted provider is responsible for ensuring training to the individual who will be receiving the device or service and any informal or formal support to persons who will be assisting the individual in using the device or service, as applicable.
- The contracted provider is responsible for ensuring and verifying the project is completed according to the scope of work and/or the product specifications.

### **Service Documentation:**

The provider/agency providing AT, E-Mod, or V-Mod services must maintain a copy of the individual's Life Plan, developed by the individual's Care Manager and the authorization letter.

### **Identification of an AT, E-Mod, and V-Mod in the Individual's Life Plan:**

Services must be related to an assessed need, with specific outcomes to be achieved, and documented in the individual's Life Plan. A Staff Action Plan is not required. Additional required Life Plan Documentation is as follows:

- **Authorized Service:** Assistive Technology, Environmental Modifications, Vehicle Modifications
- **Provider/Facility:** Name of DDRO
- **Effective Dates:** Date of Approval by the DDRO

- **Duration:** One Time Expenditure
- **Quantity:** N/A
- **Unit:** One-Time Expenditure
- **Total Units:** N/A or 0 (zero)
- **Comments:** Brief description of device or project

**Records Retention:**

All documentation specified above, including the Life Plan and service documentation, must be retained for a period of at least ten (10) years from the date the service was completed to protect against potential false or fraudulent Medicaid claims under the New York False Claims Act. The date of issuance of the final payment through the State Financial System (SFS) to the provider/agency is the date used to establish the start of the ten (10) year retention period.