

Community Pathways Waiver – **Revised Draft Proposal**

Service Type: Other Service

Service (Name):

Alternative Service Title: **ASSISTIVE TECHNOLOGY AND SERVICES**

HCBS Taxonomy:

Check as applicable

Service is included in approved waiver. There is no change in service specifications.

Service is included in approved waiver. The service specifications have been modified.

Service is not included in the approved waiver.

Service Definition:

- A. The purpose of assistive technology is to maintain or improve an individual's functional abilities, enhance interactions, support meaningful relationships, promote their ability to live independently, and meaningfully participate in their community.
- B. Assistive technology means an item, piece of equipment, or product system. Assistive Technology may be acquired commercially, modified, or customized. Assistive technology devices include but are not limited to:
1. Speech and communication devices also known as augmentative and alternative communication devices (AAC) such as speech generating devices, text-to-speech devices and voice amplification devices;
 2. Blind and low vision devices such as video magnifiers, devices with optical character recognizer (OCR) and Braille note takers;
 3. Deaf and hard of hearing devices such as alerting devices, alarms, and assistive listening devices;
 4. Devices for computers and telephone use such as alternative mice and keyboards or hands-free phones;
 5. Environmental control devices such as voice activated lights, lights, fans, and door openers;
 6. Aides for daily living such as weighted utensils, adapted writing implements, dressing aids;
 7. Cognitive support devices and items such as task analysis applications or reminder systems;
 8. Remote support devices such as remote health monitoring and personal emergency response systems; and
 9. Adapted toys and specialized equipment such as specialized car seats and adapted bikes.
- C. Assistive technology service means a service that directly assists an individual in the selection, acquisition, use, or maintenance of an assistive technology device. Assistive technology services include:
1. Assistive Technology needs assessment;
 2. Programs, materials, and assistance in the development of adaptive materials;

3. Training or technical assistance for the individual and their support network including family members;
 4. Repair and maintenance of devices and equipment;
 5. Programming and configuration of devices and equipment;
 6. Coordination and use of assistive technology devices and equipment with other necessary therapies, interventions, or services in the Person-Centered Plan; and
 7. Services consisting of purchasing or leasing devices.
- D. Specifically excluded under this service are:
1. Wheelchairs, architectural modifications, adaptive driving, vehicle modifications, and devices requiring a prescription by physicians or medical providers as these items are covered either through the Medicaid State Plan as Durable Medical Equipment (DME), a stand-alone waiver services (i.e. environmental modification and vehicle modifications), or through DORS; and
 2. Services, equipment, items or devices that are experimental or not authorized by the State or Federal authority.

SERVICE REQUIREMENTS:

- A. Assistive Technology, recommended by the team that costs up to \$1000 per item does not require a formal assessment.
- B. Assistive technology devices of more than \$1000 must be recommended by an independent evaluation of the participant's assistive technology needs.
- C. The evaluation must include the development of a list of all devices, supplies, software, equipment, product systems and/or waiver services (including a combination of any of the elements listed) that would be most effective to meet the need(s) of the participant. The least expensive option from the list must be selected for inclusion on the Person-Centered Plan.
- D. When services are furnished to individuals returning to the community from a Medicaid institutional setting, the costs of such services are considered to be incurred and billable when the individual leaves the institutional setting and enters the waiver. The individual must be reasonably expected to be eligible for and to enroll in the waiver. If for any unseen reason, the individual does not enroll in the waiver (e.g., due to death or a significant change in condition); services may be billed to Medicaid as an administrative cost.
- E. Prior to accessing DDA funding for this service, all other available and appropriate funding sources, including but not limited to those offered by Maryland Medicaid State Plan, Division of Rehabilitation Services ("DORS"), State Department of Education, and Department of Human Services, must be explored and exhausted. These efforts must be documented in the participant's file.
- F. To the extent that any listed services are covered under the Medicaid State Plan, the services under the waiver would be limited to additional services not otherwise covered under the Medicaid State Plan, but consistent with waiver objectives of avoiding institutionalization.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

Service Delivery Method (check each that applies)

- Participant Directed as specified in Appendix E
- Provider Managed

Specify whether the service may be provided by (check all that applies):

- Legally Responsible Person
- Relative
- Legal Guardian

Provider Specifications: (Instructions list the following for each type of provider that can deliver the services):

Provider Category	Provider Type Title
Individual	For individuals self-directing services - Certified specialists, licensed professionals, or DORS approved vendor based on service requested
Agency	DDA Approved Organized Health Care Delivery System Provider

Provider Specifications for Services

Provider Category: Individual

Provider Type: Individual for people self-directing services

Provider Qualifications License (specify):

Certificate (specify):

Other Standard (specify):

The FMS must ensure the individual or entity performing the service meets the qualifications noted below as applicable to the service being provided:

1. The organization or professional providing the evaluation shall be credentialed, licensed, or certified in an area related to the specific type of technology needed. The evaluation must include the development of a list of all devices, supplies, software, equipment, product systems and/or waiver services (including a combination of any of the elements listed) that would be most effective to meet the need(s) of the participant. The least expensive option from the list must be selected for inclusion on the Person-Centered Plan.
2. Assistive Technology assessments, with the exception for Speech Generating Devices, must be completed by a specialist that has any of the following certifications as appropriate:
 - a. Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) Assistive Technology Practitioner (ATP),
 - b. California State University Northridge (CSUN) Assistive Technology Applications Certificate, or
 - c. Certificate of Clinical Competence in Speech Language Pathology (CCC-SLP).
3. Assessment for Speech Generating Devices (SGD):
 - a. Need assessment and recommendation must be completed by a licensed Speech Therapist;
 - b. Program and training can be conducted by a RESNA Assistive Technology Practitioner (ATP) or California State University

- c. North Ridge (CSUN) Assistive Technology Applications Certificate professional.
- 4. Assistive Technology Specialist/Practitioner must have an acceptable certification from any of the following:
 - a. Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) Assistive Technology Practitioner (ATP);
 - b. California State University Northridge (CSUN) Assistive Technology Applications Certificate; or
 - c. Certificate of Clinical Competence in Speech Language Pathology (CCC-SLP);
 - d. Minimum of three years of professional experience in adaptive rehabilitation technology in each device and service area certified; and
 - e. Licensed professional must have:
 - 1) Maryland Board of Audiologists, Hearing Aid Dispensers & Speech-Language Pathologists license for Speech-Language Pathologist, or
 - 2) Maryland Board of Occupational Therapy Practice license for Occupational Therapist or
- 5. Entity designated by the Division of Rehabilitation Services (DORS) as an Assistive Technology service vendor

Verification of Provider Qualifications

Entity Responsible for Verification:

- Fiscal Management Services

Frequency of Verification:

- Fiscal Management Service - prior to services

Provider Category: Agency

Provider Type: DDA Approved Organized Health Care Delivery System Provider

Provider Qualifications License (specify):

License (specify):

Certificate (specify):

Other Standard (specify):

DDA Approved Organized Health Care Delivery System (OHCDS) provider as per COMAR Title 10, Subtitle 22

OHCDS providers shall verify the licenses, credentials, and experience of all professionals with whom they contract or employs and have a copy of the same available upon request. OHCDS must ensure the individual or entity performing the service meets the qualifications noted below as applicable to the service being provided:

1. The organization or professional providing the evaluation shall be credentialed, licensed, or certified in an area related to the specific type of technology needed. The evaluation must include the development of a list of all devices, supplies, software, equipment, product systems and/or waiver services (including a combination of any of the elements listed) that would be most effective to meet the need(s) of the participant. The least expensive option from the list must be selected for inclusion on the Person-Centered Plan.
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 - a. Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) Assistive Technology Practitioner (ATP),
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3. Assessment for Speech Generating Devices (SGD):
 - a. Need assessment and recommendation must be completed by a licensed Speech Therapist;
 - b. Program and training can be conducted by a RESNA Assistive Technology Practitioner (ATP) or California State University North Ridge (CSUN) Assistive Technology Applications Certificate professional.
4. Assistive Technology Specialist/Practitioner must have an acceptable certification from any of the following:
 - a. Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) Assistive Technology Practitioner (ATP);
 - b. California State University Northridge (CSUN) Assistive Technology Applications Certificate; or
 - c. Certificate of Clinical Competence in Speech Language Pathology (CCC-SLP);
 - d. Minimum of three years of professional experience in adaptive rehabilitation technology in each device and service area certified; and
 - e. Licensed professional must have:
 - 1) Maryland Board of Audiologists, Hearing Aid Dispensers & Speech-Language Pathologists license for Speech-Language Pathologist, or
 - 2) Maryland Board of Occupational Therapy Practice license for Occupational Therapist or
5. Entity designated by the Division of Rehabilitation Services (DORS) as an Assistive Technology service vendor.

Verification of Provider Qualifications Entity

Responsible for Verification:

- DDA for OHCDS
- OHCDS providers for entities and individuals they contract or employ

Frequency of Verification:

- DDA for OHCDS - annually
- OHCDS providers – prior to service delivery