

Home and Community-Based Services (HCBS) That Can Be Rendered in an Acute Care Hospital

The HCBS listed below may be provided when an individual is receiving inpatient treatment in an acute care hospital. Unless otherwise noted below, HCBS may only be provided in an acute care hospital to assist the individual with one or more of the following:

- Communication;
- Intensive personal care; or
- Behavioral support/stabilization as outlined in the behavior support plan.

Direct services may be rendered in-person or via teleservices in an acute care hospital unless otherwise noted below. Direct services rendered via teleservices must meet the requirements in ODP's HCBS Waivers for providing the service through teleservices.

HCBS That May Be Provided When An Individual Is Receiving Inpatient Treatment In An Acute Care Hospital

Consolidated, Community Living, and Person/Family Directed Support (P/FDS) Waiver services:

- In-Home and Community Support can be provided at 1:1 or 2:1 staff to individual ratios as regular or enhanced levels of service based on the needs of each individual and the activities that will be performed while the individual is in an acute care hospital.
 - Due to the nature of the service activities that must be provided, supporting more than one person in an acute care hospital on the same day at the same time is not allowed.
- Companion at a 1:1 staff to individual ratio
 - Due to the nature of the service activities that must be provided, supporting more than one person in an acute care hospital on the same day at the same time is not allowed.
- Behavioral Support
 - Behavioral Support services cannot be used to provide intensive personal care because personal care is outside the scope of Behavioral Support services.
- Supports Coordination
 - Supports Coordination includes locating, coordinating, and monitoring needed services and supports when an individual is hospitalized.
 - Supports Coordinators cannot provide services that should be provided by the hospital's case managers, social workers, or discharge planners.
- Supports Broker
 - The Supports Broker may:

- Assist managing employers and common law employers with developing schedules for Support Service Professionals (SSP) to provide allowable services while the individual is hospitalized.
 - Assist managing employers and common law employers to ensure that the SSPs are trained to support the individual's needs when hospitalized.
 - Assist managing employers and common law employers to ensure that the SSPs are trained and scheduled to support the individual when the individual is discharged from the hospital and transitions to a home and community-based setting.
 - Supports Brokers cannot provide services that should be provided by the hospital's case managers, social workers, or discharge planners.
- Supplemental Habilitation, if the individual is receiving residential services.
 - Supplemental Habilitation may only be provided in-person. Supplemental Habilitation may not be provided via teleservices.
 - Providers cannot bill the day rate for Residential Habilitation, Life Sharing, or Supported Living services on the day the individual is admitted to the acute care hospital through the entirety of the individual's inpatient stay. Providers can bill for Residential Habilitation, Life Sharing, or Supported Living services on the day the individual is discharged from the acute care hospital.
 - The Waiver Variance Form (DP 1086) does not need to be completed when Supplemental Habilitation is rendered in an acute care hospital. When residential providers support individuals who are hospitalized for more than 30 days, a reduction in Approved Program Capacity (APC) may be requested until the individual returns home from the hospital.

Adult Autism Waiver (AAW) services:

- Supports Coordination
 - Supports Coordination includes locating, coordinating, and monitoring needed services and supports when an individual is hospitalized.
 - Supports Coordinators cannot provide services that should be provided by the hospital's case managers, social workers, or discharge planners.
- Systematic Skill Development
 - Systematic Skill Building
 - Community Support
 - Behavioral Specialist
 - Behavioral Specialist services may not be used to provide intensive personal care because personal care is outside the scope of Behavioral Specialist services.
- Temporary Supplemental Services