

Home and Community-Based Services (ASA) Waiver for South Dakotans
Waiver Amendment Application
Summary of Proposed Changes

The Division of Adult Services and Aging (ASA) transitioned from the Department of Social Services (DSS) to the Department of Human Services (DHS) resulting in the creation of the Division of Long Term Services and Supports (LTSS) within the Department of Human Services. The Home and Community-Based Services (ASA) Waiver for South Dakotans language is being amended to reflect the change in operating agency from DSS-ASA to DHS-LTSS with an anticipated effective date of July 1, 2017. The Division of Long Term Services and Supports (LTSS) is a separate agency of the State that is not a division of the Medicaid Agency. In accordance with 42 CFR §431.10, the Medicaid Agency will continue to exercise administrative discretion in the administration and supervision of the waiver and issue policies, rules and regulations related to the waiver. The name of the waiver will also transition from the Home and Community-Based Services (ASA) Waiver for South Dakotans to the Home and Community-Based Options and Person Centered Excellence (HOPE) Waiver. The transition will be seamless for consumers receiving services through the waiver.

In addition, documents required to make a level of care determination will be updated. Currently, all level of care determinations, both initial and re-determinations require both a Community Health Assessment (CHA) as well as a physician's order. The Home and Community-Based Services (ASA) Waiver is being amended to remove the requirement for a physician's order. The level of care determinations will be made utilizing information within the CHA.

In the current waiver, critical incidents requiring follow up by the LTSS Specialist include abuse, neglect, exploitation, serious injury, missing person, and death. Restraint and seclusion have been added as specific incident categories that must be reported to the LTSS Specialist and require follow up by the LTSS Specialist. Restraint is defined in the Waiver Amendment as a specific intervention or a device that prevents an individual from moving freely or restricts normal access to the individual's own body. Seclusion is defined in the Waiver Amendment as the involuntary confinement of an individual in a room or area from which the individual is physically prevented from leaving.

Finally, the following performance measures have been included in the Waiver Amendment as required by the Centers for Medicare and Medicaid Services (CMS):

1. The number and percent of new applicants enrolled by the operating agency according to 67:44:03.
2. The number and percent of waiver participants that are maintained within approved waiver limits by operating agency.
3. The number and percent of waiver expenditures that are maintained within approved waiver limits by operating agency.
4. The number and percent of service plans exceeding the cost of nursing facility care that were approved according to the exceptions process.
5. The Number and percent of consumers who are offered choice of waiver providers.
6. The Number and percent of waiver claims in a representative sample paid using the correct rate methodology as specified in the approved waiver application.