



Level of Care - Community Supports (CS) Waiver

Version 1.0 (07/01/20)

This module will review Level of Care evaluations for the Community Supports Waiver.

Community Supports Waiver Enrollment

Intellectual Disability/Related Disability



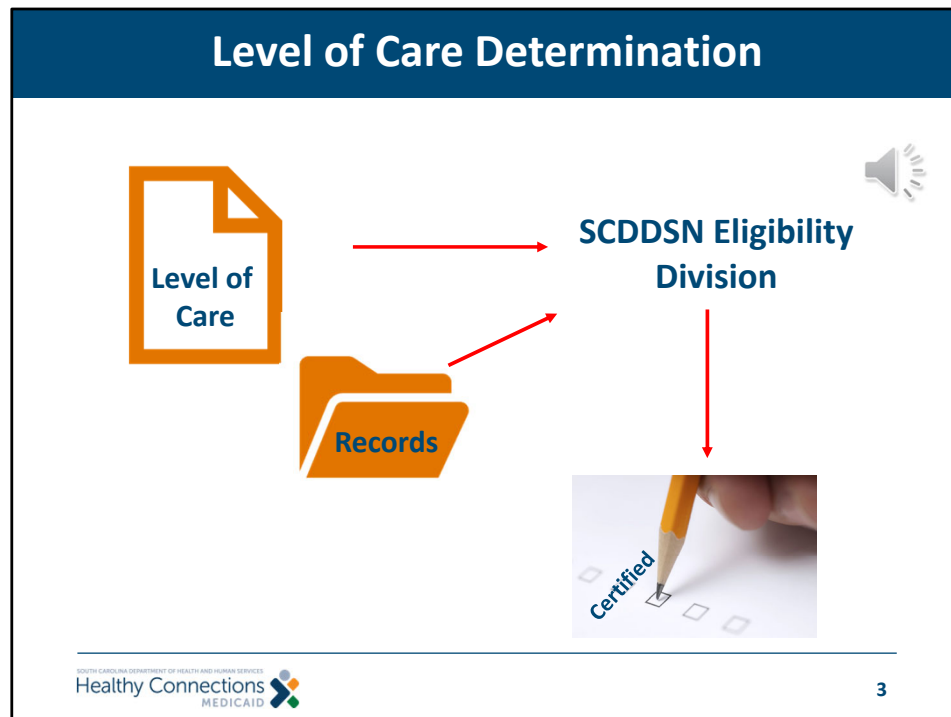
Medicaid Eligible

Waiver Slot

Services in the home/community



In order to be enrolled in the Community Supports Waiver, the participant must have an intellectual disability or related disability as determined by the South Carolina Department of Disabilities and Special Needs. They must also be eligible to receive Medicaid, be allocated a waiver slot, choose to receive services in his/her home and community; and meet Intermediate Care Facility for Individuals with Intellectual Disabilities or ICF/IID Level of Care.



The SCDDSN Eligibility Division makes the initial determination of ICF/IID Level of Care. The Waiver Case Manager must complete an initial CS Waiver Level of Care and submit it to the SCDDSN Eligibility Division for approval. In addition, the Waiver Case Manager must forward records that support the Level of Care. Once the information is received, the SCDDSN Eligibility Division will review the information and when the Level of Care determination has been made, the SCDDSN Eligibility Division will certify if the person meets ICF/IID Level of Care criteria or not.

See the Community Supports Waiver Manual for recommended records to include.

Waiver Enrollment

Level of Care
Determination Date



30 days

Waiver Enrollment



180 days



Waiver Enrollment must occur within 30 calendar days of the Level of Care Determination date. If the potential individual's Level of Care Determination was completed 30 calendar days or more prior to waiver enrollment, a new SCDDSN Certification Letter must be issued. If a Waiver applicant's Level of Care has expired prior to enrollment in the Community Supports Waiver, a recertification does not have to be done immediately. As long as enrollment occurs within 180 days of the initial Level of Care, it may be updated once all enrollment issues have been resolved.

See the CS Waiver Manual for more specific information relating to enrollments.

ICF/IID Level of Care Evaluations

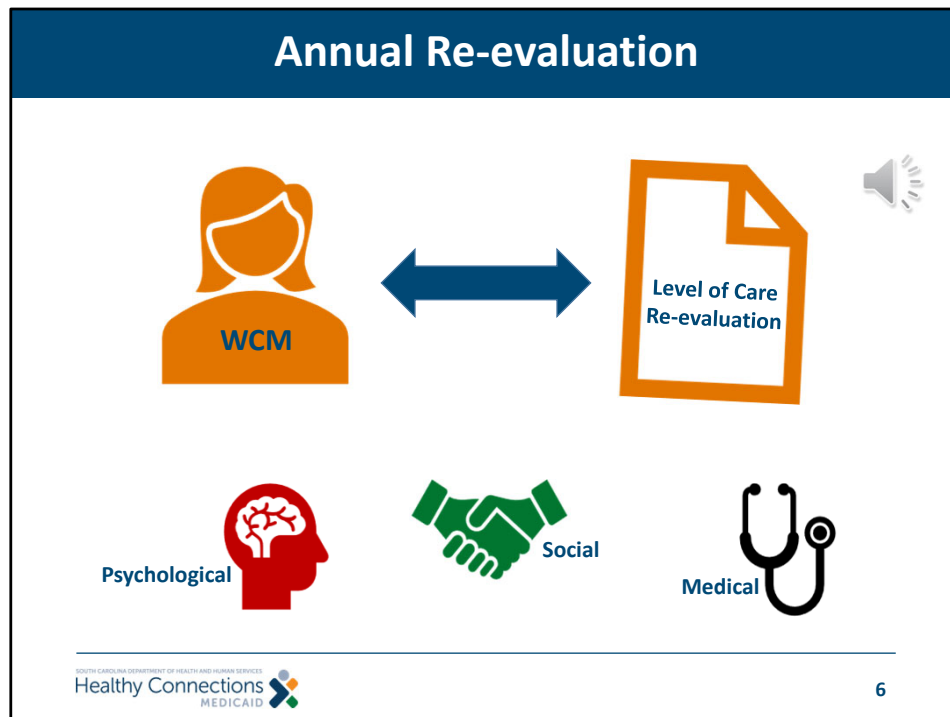
SUN	MON	TUE	WED	THU	FRI	SAT
27	28	29	30	31	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

365 days



Each individual must be evaluated at least every 365 calendar days from the plan date and certified to meet ICF/IID Level of Care in order to continue to receive services funded through the Community Supports Waiver. You will be responsible for completing annual re-evaluations and certifications on all participants except for those who are eligible on a time-limited basis.

See the CS Waiver Manual for more specific information relating to Level of Care Re-evaluations/Re-determinations.



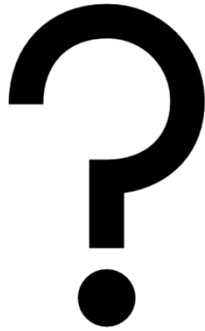
For participants not enrolled in the CS Waiver, the Waiver Case Manager is responsible for the annual re-evaluation of ICF/IID Level of Care. These re-evaluations must be conducted within 365 calendar days of the previous Level of Care Determination/Assessment date. The review will, at a minimum, consist of a review of the most recent psychological, social and medical information along with a review of the current Individualized Family Service Plan (IFSP) or Family Service Plan (FSP), Support Plan, and/or Individualized Education Plan (IEP).

Re-evaluation and Re-determination



Based on the review of the information, you must complete the Level of Care Determination for ICF/IID. All decisions must be reviewed by your Supervisor or the Executive Director of your DSN Board/Provider. All Level of Care re-evaluations must be documented along with the review from the Supervisor or Executive Director. Once the Supervisory review is complete, the Level of Care Determination for ICF/IID should be placed in the participant's file.

Conclusion



This concludes the Community Supports Waiver Level of Care annual training. Please see your Supervisor for any additional questions or concerns.

