



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

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**LME-MCO Joint Communication Bulletin # J408**

**DATE:** March 31, 2022

**TO:** Local Management Entities-Managed Care Organizations (LME-MCOs)

**FROM:** Saarah Waleed, Interim Assistant Director for Policy and Programs, DMH/DD/SAS  
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**SUBJECT:** UPDATE to Implementation Dates for State-Funded Residential Supports (RS) (I/DD & TBI) Service and Supported Living Periodic (SLP) (I/DD & TBI) Service and Explanation of the Grandfathering Request Process

This bulletin replaces Joint Communication Bulletin #J407 which informed LME-MCOs of changes in the Intellectual and Developmental Disabilities (I/DD) benefit plan for the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) state-funded amended service definition for Residential Supports (RS) I/DD & Traumatic Brain Injury (TBI) and the new state-funded service definition for Supported Living Periodic I/DD & TBI.

This bulletin extends the implementation date for the policy changes related to these services from March 1, 2022, to June 1, 2022. The bulletin also explains the process for grandfathering in individuals enrolled in state-funded residential services prior to the implementation date for this service who would no longer meet the new eligibility criteria for the RS service to continue service.

### **Residential Supports (I/DD & TBI)**

The service requirements for Residential Supports (I/DD & TBI) are as follows:

- Demonstration that the individual has a developmental disability as defined by G.S. 122-C-3(12a) for Autism Spectrum Disorder, Intellectual Disability or TBI, an individual must have:
  - A psychological, neuropsychological, or psychiatric assessment that includes Appropriate psychological / neuropsychological testing (with validated tools) performed by a licensed clinician within their scope.
  - A disability that manifested before the person attains age 22, unless the disability is caused by a TBI, in which case the disability may be manifested after attaining age 22.

**NC DEPARTMENT OF HEALTH AND HUMAN SERVICES**

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**DIVISION OF MENTAL HEALTH, DEVELOPMENTAL  
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- Demonstration that the individual has a developmental disability as defined by G.S. 122-C-3(12a) without accompanying intellectual disabilities, an individual must have:
  - A physician assessment, substantiating a definitive diagnosis and associated functional limitations consistent with a developmental disability. Associated psychological or neuropsychological testing is not required in this situation.
- Residential Supports is an individualized service for the I/DD population, including individuals with TBI that meet G.S. 122C-3(12a) that helps individuals aged 16 years and older with learning and practicing new skills and improving existing skills to assist the individual in increasing their level of independence. For TBI population, the service includes training and support for relearning skills, developing compensatory strategies and practicing new skills and improving existing skills to assist the individual in achieving the greatest level of independence possible.
- The service is provided in a licensed group home or licensed or unlicensed Alternative Family Living (AFL) setting that serves individuals with I/DD or TBI in accordance with G.S. 122C-3(12a).
- For Residential Supports provided in an AFL, the site must be the primary residence of the AFL provider who receives reimbursement for the cost of care. These sites are licensed or unlicensed in accordance with **10A NCAC 27G .5600**. All unlicensed AFL sites will be reviewed using the LME-MCO AFL checklist for health and safety related issues.
- The service must be provided in .5600 Supervised Living, Type B, Type C and Type F on June 1, 2022.
- The following are bed capacity requirements for new and existing .5600 Supervised Living, Type B and Type C facilities on June 1, 2022.
  - Four beds or less for newly developed facilities; six beds or more for existing facilities
- Respite may also be used to provide temporary relief to individuals who reside in Licensed and Unlicensed AFLs. Residential Supports may not be billed on the same day as Respite if Respite is billed for more than four hours on that day.
- The service requires a NC Support Needs Assessment Profile (SNAP) (Level 2 – Level 4) or Supports Intensity Scale (SIS) (Level C – Level E) requiring a moderate to high level of supervision and support in most settings.
- A service order must be signed by a qualified professional, physician, licensed psychologist, physician assistant, or nurse practitioner, consistent with their scope of practice prior to or on the first day Residential Supports (I/DD & TBI) services are rendered.
- Individuals receiving this service may not be a Home and Community Based Services (HCBS) Waiver member or individual receiving Medicaid funded residential services, inclusive of Medicaid ICF-IID In Lieu of Services (ILOS) with a residential component.
- Individuals who receive Residential Supports may not receive Community Living and Supports, Supported Living Periodic, Developmental Therapy, Personal Care Services, State Funded Personal Care or Personal Assistance.
- The service is not available at the same time of day as state-funded periodic services or State Plan Medicaid Services that work directly with the individual, such as Private Duty Nursing.
- The service is a daily 24/7 service.
- Transportation to and from the residence and points of travel in the community as outlined in the Person-Centered Plan (PCP) or Individual Support Plan (ISP) is included to the degree that they are not reimbursed by another funding source and not used for personal use.

Service Rates:

Level 1: The service rate is \$193.54, 1 unit = 1 day. The procedure code is YM846.

Level 2: The service rate is \$220.08, 1 unit = 1 day. The procedure code is YM847.

Level 3: The service rate is \$246.16, 1 unit = 1 day. The procedure code is YM848.

LME-MCOs maintain rate setting authority.

Billing should be completed as follows:

- Individuals NEW to the Residential Supports service should enroll in Residential Supports (Levels 1-3) and utilize the new appropriate NCTracks procedure code based upon assigned level effective June 1, 2022.
- Individuals with I/DD or TBI CURRENTLY enrolled in the following services may transition to Residential Support (Levels 1-3), Supported Living Periodic or another available service by Nov. 30, 2022. Upon transitioning to the new service, the expectation is to utilize the new NCTracks procedure code. The current NCTracks procedure codes below will terminate on Nov. 30, 2022.

Termination of NCTracks Codes under IDD/TBI Benefit Plan on Nov. 30, 2022	
Name of Service	NCTracks Code
Residential Supports	YM850
Family Living Low	YM740
Family Living Moderate	YP750
Family Living High	YM755
Group Living Low	YP760
Group Living Moderate	YP770
Group Living High	YP780
Supervised Living Low	YP710
Supervised Living Moderate	YP720
Supervised Living 1-6	YM811, YM812, YM813, YM814, YM815, and YM816

The NCTracks procedure codes above will terminate on Nov. 30, 2022. However, all individuals with I/DD or TBI enrolled in one of the state-funded residential services above on Sept. 30, 2022, and do not meet service criteria for Residential Supports (I/DD & TBI) will be grandfathered into the most appropriate service following the request process noted below. **Note:** The NCTracks procedure codes above will remain intact for individuals with Mental Health and Substance Use as this change is specific to the I/DD benefit plan.

In the event that individuals currently enrolled in the above residential services for IDD & TBI on Sept. 30, 2022 do not meet the service criteria for Residential Supports (I/DD & TBI), LME-MCOs must submit an encrypted grandfather request form listing the individuals impacted in their catchment area to [DMHIDDContact@dhhs.nc.gov](mailto:DMHIDDContact@dhhs.nc.gov) by Oct. 7, 2022.

DMH/DD/SAS does not have a state-funded service requirement where current individuals accessing services must obtain updated psychological assessments to access the updated service definitions. However, LME-MCOs should retain documentation that supports the individual meeting the applicable benefit plan and service criteria.

**Note:** Individuals with TBI may access Residential Supports (I/DD) or Supported Living (I/DD & TBI) per eligibility requirements in the applicable service definition. However, individuals meeting this eligibility requirement for G.S. 122C-3(38a) may also access TBI Long Term Residential Rehabilitation Service, slated to be released by Fall 2022.

### **Supported Living Periodic (SLP) (I/DD & TBI)**

The service requirements for Supported Living Periodic (I/DD & TBI) are as follows:

- Demonstration that the individual has a developmental disability as defined by G.S. 122-C-3(12a) with Autism Spectrum Disorder, Intellectual Disability or TBI. OR to demonstrate meeting a TBI as defined by G.S. 122-C-3(38a), an individual must have:
  - A psychological, neuropsychological, or psychiatric assessment that includes:
    - Appropriate psychological / neuropsychological testing (with validated tools) performed by a licensed clinician within their scope.
- Demonstration that the individual has a developmental disability as defined by G.S. 122-C-3(12a) without accompanying intellectual disabilities, an individual must have:
  - A physician assessment, substantiating a definitive diagnosis and associated functional limitations consistent with a developmental disability. Associated psychological or neuropsychological testing is not required in this situation.
- Supported living Periodic (I/DD & TBI) is an individualized service that provides assistance to individuals with activities of daily living, household chores essential to the health and safety of the individual, budget management, attending appointments, and interpersonal and social skill building to enable the individual to live independently in the community.
- The service is provided in the home of the individual.
- Training activities, supervision, and assistance may be provided to allow the individual to participate in home or community activities. Other activities include assistance with monitoring health status and physical conditions and assistance with transferring, ambulation and use of special mobility devices.
- The service requires an NC SNAP (Level 2 or lower), SIS (Level C or lower), or TBI Assessment requiring low level of supervision and support in most settings.
- A service order must be signed by a qualified professional, physician, licensed psychologist, physician assistant, or nurse practitioner, consistent with their scope of practice prior to or on the first day Supported Living Periodic (IDD & TBI) services are rendered.
- Individuals who receive Supported Living Periodic may not receive Community Living and Support, Residential Supports, Developmental Therapy, Personal Care Services, State Plan Personal Care or Personal Assistance.
- The service is not available at the same time of day as state-funded periodic services or State Plan Medicaid Services that work directly with the individual, such as Private Duty Nursing.
- Individuals receiving the service may not be an HCBS Waiver member or individual receiving Medicaid funded residential services, inclusive of Medicaid ICF-IID ILOS with a residential component.
- Supported Living Periodic services (I/DD & TBI) must not be duplicative of any other services the individual is receiving.
- Relatives may not provide Supported Living Periodic.
- All individuals receiving Supported Living Periodic (I/DD & TBI) services who live in the same household must be on the lease unless the individual is a live-in caregiver. A Supported Living Periodic home must have no more than three (3) residents including any live-in caregiver providing supports per S.L. 2011-202/H509. A live-in caregiver is defined as an individual unrelated to the individual and who provides services in the individual's home through the Supported Living Periodic provider agency and is not on the lease.
- Transportation is an inclusive component of Supported Living Periodic to achieve goals and objectives related to these activities with the exception of transportation by another funding source and to and from medical services completed by natural supports.
- The service may not exceed 28 hours a week.
 

Service Rate:

The service rate is \$8.01 per 15 minutes, 1 unit = 15 minutes. The procedure code is YM854. LME-MCOs maintain rate setting authority.

Ethical concerns should be submitted to DMH/DD/SAS Consumer Rights Team for review. If validated,

additional review and action may be taken by the State.

If you have any questions, please contact Stephanie Jones at 984-236-5043 or [DMHIDDCONTACT@dhhs.nc.gov](mailto:DMHIDDCONTACT@dhhs.nc.gov).

Attachment(s): Residential Supports (I/DD & TBI) service definition  
Residential Supports (I/DD & TBI) FAQ (Frequently Asked Questions)  
Residential Supports (IDD & TBI) Grandfather Request Form  
Supported Living Periodic (I/DD & TBI) service definition  
Supported Living Periodic (I/DD & TBI) FAQ (Frequently Asked Questions)

Previous bulletins can be accessed at: [www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins](http://www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins)

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