LME-MCO Joint Communication Bulletin # J391

DATE: March 29, 2021

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

FROM: Renee Rader, Assistant Director for Policy and Programs, DMH/DD/SAS
       Deb Goda, Behavioral Health Unit Manager, NC Medicaid

SUBJECT: State-Funded Community Living and Support Service Implementation

The Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) approved Community Living and Support (CLS) to be added as a new service under the Intellectual and Developmental Disabilities (I/DD) and Traumatic Brain Injury (TBI) benefit plan with an effective implementation date of April 1, 2021.

CLS service requirements are as follows:
• CLS is an individualized service that enables individuals aged 16 years and older to live successfully in their own home or the home of their family or natural supports and be an active member of the community.
• This service supports individuals learning, practicing and improving existing skills related to the following: interpersonal skills, independent living, community living, self-care and self-determination.
• This service requires a NC Support Needs Assessment Profile (SNAP) (Level 3 or higher), Supports Intensity Scale (Level D or higher), or TBI Assessment requiring a moderate to high level of supervision and support in most settings.
• A psychological, neuropsychological, or psychiatric evaluation, supported by appropriate psychological/neuropsychological testing, that denotes a I/DD diagnosis as defined by G.S. 122C-3(12a) must be completed by a qualified licensed professional prior to the provision of this service. For individuals with a TBI, a clinical exam completed by a qualified licensed professional is required noting a TBI diagnosis as defined by G.S. 122C-3(38a).
• Service authorization must be completed by a Qualified Professional prior to the day services are provided.
• 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 CLS (IDD & TBI) services are rendered.
• Maximum group service ratio: Paraprofessional to individuals ratio is 1:3 as long as services outlined within the Person Centered Plan (PCP) or Individual Support Plan (ISP) are able to be fully addressed.
• Individuals receiving this service may not be a HCBS waiver member/beneficiary, or individuals receiving I/DD or TBI-related (b)(3) day services or individuals receiving Medicaid In Lieu of Services (ILOS) which include a meaningful day component.
• This service may not exceed 3 hours per day on school days for individuals 16 – 22 years of age who have not graduated.
• This service may not exceed 28 hours a week.
• Transportation to and from the residence and points of travel in the community as outlined in the PCP or ISP is included to the degree that they are not reimbursed by another funding source and for personal use.
• The paraprofessional is responsible for incidental housekeeping and meal preparation only for the individuals enrolled in this service.

Service Rates: Individual - $8.23/15 minutes and $32.92/hour / Group - $2.74/15 minutes - $10.96/hour
The procedure codes are YM851 (Individual) and YM852 (Group). The 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 LaToya Chancey at 984-236-5044, or email DMHIDDCONTACT@dhhs.nc.gov.

Attachment: Community Living and Support Service Definition (I/DD and TBI)

Previous bulletins can be accessed at: www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins

cc: Kody Kinsley, Behavioral Health & I/DD
    Victor Armstrong, DMH/DD/SAS
    Dave Richard, NC Medicaid
    Jay Ludlam, NC Medicaid
    Karen Burkes, DSOHF
    NC Medicaid Leadership Team
    DMH/DD/SAS Leadership Team