This draft of service definitions and provider qualifications for the Community Care Waiver are pending approval from the Centers for Medicare and Medicaid Services (CMS) and thus, are not final.
## Services

<table>
<thead>
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<th>Description</th>
<th>Examples</th>
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<tr>
<td><strong>Assistive Technology</strong></td>
<td><strong>Evaluation of AT needs</strong></td>
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<tr>
<td></td>
<td><strong>Purchasing, leasing, acquisition of AT</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Designing, fitting, customizing devices</strong></td>
</tr>
</tbody>
</table>

## Description

Assistive technology device means an item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve functional capabilities of participants. Assistive technology service means a service that directly assists a participant in the selection, acquisition, or use of an assistive technology device. Assistive technology includes: (a) the evaluation of the assistive technology needs of a participant, including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the participant in the customary environment of the participant; (b) services consisting of purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for participants; (c) services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices; (d) ongoing maintenance fees to utilize the assistive technology (e.g., remote monitoring devices); (e) coordination and use of necessary therapies, interventions, or services with assistive technology devices, such as therapies, interventions, or services associated with other services in the Service Plan; (f) training or technical assistance for the participant, or, where appropriate, the family members, guardians, advocates, or authorized representatives of the participant; and (g) training or technical assistance for professionals or other individuals who provide services to, or who are employed by participants.

## Limitations

All Assistive Technology services and devices shall meet applicable standards of manufacture, design and installation and are subject to prior approval by DDD. Prior approval will be based on the functional evaluation as described above. Items covered by the Medicaid State Plan cannot be purchased through this service. Assistive technology purchases (including the purchase of new equipment, modification costs to new or already owned equipment, or cost of supplies for created equipment) are limited to $2,500 per year. This is not a stand-alone service and the participant requesting this service, in addition to case management, must also require other ongoing waiver services.

## Qualifications

- Speech/Language Pathologist must be licensed per N.J.A.C. 13:44C- or -
- Assistive Technology Specialist, bachelor's degree in technical services or rehabilitation services related field and a minimum of 1-year working with individuals with ID/DD and must either possess an Assistive Technology Practitioner Certificate from RESNA or qualify to sit for the test -or-
- Physical Therapists must be licensed per N.J.A.C. 13:39A - or -
- Occupational Therapists must be licensed per N.J.A.C. 13:44K

**Assistive Technology Vendor and/or Business Entity**

- Must be an established business as a medical supplier or assistive technology supplier in New Jersey -or-
- Must have license, certification, registration, or authorization from the New Jersey Department of Consumer Affairs or any other endorsing entity and Liability Insurance -or-
- Must be an out-of-state medical or assistive technology supplier who is an approved Medicaid provider in their state of residence

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**Behavioral Management**

**Examples**
- Behavioral assessment
- Development of behavioral plan
- Implementation of plan
- Training and supervision of paid caregivers
- Annual reassessment of behavioral plan

**Description**
Individual and/or group counseling, behavioral interventions, diagnostic evaluations or consultations related to the individual’s developmental disability and necessary for the individual to acquire or maintain appropriate interactions with others. Intervention modalities must relate to an identified challenging behavioral need of the individual. Specific criteria for remediation of the behavior shall be established. The provider(s) shall be identified in the Service Plan and shall have the minimum qualification level necessary to achieve the specific criteria for remediation. Behavioral management includes a complete assessment of the challenging behavior(s), development of a structured behavioral modification plan, implementation of the plan, ongoing training and supervision of caregivers and behavioral aides, and annual reassessment of the plan.

**Limitation**
Behavioral management services are offered in addition to and do not replace treatment services for behavioral health conditions that can be accessed through the State Plan/MBHO and mental health service system. Individuals with co-occurring diagnoses of developmental disabilities and mental health conditions shall have identified needs met by each of the appropriate systems without duplication but with coordination to obtain the best outcome for the individual. Behavioral Management services involving the assessment of the behavior(s), development of a behavior plan, and implementation of the plan are not to exceed a maximum of 60 hours per year. On-going training, supervision of caregivers and behavioral aides, and reassessment of the plan are not to exceed a maximum of 24 hours per year.

**Qualifications**
- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff -and-
- Successfully completed training in Positive Behavior Supports (PBS) -and-
- Successfully completed training mandated by DDD

And meet the following criteria:

**Staff who are conducting assessments, developing plans, and training/supervising caregivers must have the following qualifications:**
- Clinician holding NADD certification -or-
- Master’s/PhD level Behaviorist -or-
- Professional with Master’s or PhD in human services field with coursework and documented experience in providing behavioral supports to individuals with developmental disabilities -or-
- Board Certified Behavior Analyst, or Masters Level Clinician with Positive Behavioral Support (Basic and Advanced) Training -or-
- Bachelor level staff with direct oversight by Board Certified Behavior Analyst or Masters Level Clinician with Positive Behavioral Support (Basic and Advanced) Training -or-
- Bachelor Level with 3 years of experience, specific training ABA and PBS with oversight by a Masters Level or Board Certified Behavioral Analyst

**Staff who are monitoring the implementation of the plan:**
- Course work or specific training in behavioral supports, including data monitoring and analysis -and-
- Master’s degree in psychology, special education, sociology, guidance and counseling, or social work -or-
- Bachelor’s degree in psychology, special education, sociology, guidance and counseling, social work -or-
- Bachelor’s degree in another human services related degree program and one year of experience in working with individuals with ID/DD
### Services

**Career Planning**

**Examples**
- Situational (Community-Based) Assessments (Job Sampling)
- Job preference inventories
- Identification of career options/job matches

**Description**

Career planning is a person-centered, comprehensive employment planning and support service that provides assistance for program participants to obtain, maintain or advance in competitive employment or self-employment. It is a focused, time-limited service engaging a participant in identifying a career direction and developing a plan for achieving competitive, integrated employment at or above the state’s minimum wage. The outcome of this service is documentation of the participant’s stated career objective and a career plan used to guide individual employment support. If a participant is employed and receiving supported employment services, career planning may be used to find other competitive employment more consistent with the person’s skills and interests or to explore advancement opportunities in his or her chosen career.

**Limitation**

This service is available to participants in accordance with the DHS/DDD Employment Services and Supports Policy Manual, and as authorized in their Service Plan. Documentation is maintained in the file of each individual receiving this service that the service is not available under a program funded under Section 110 of the Rehabilitation Act of 1973, the IDEA (20 U.S.C. 1401) or P.L. 94-142. This service is available to participants at a maximum of 80 hours per Service Plan year.

**Qualifications**

- Certified Rehabilitation Counselors (CRC) -or-
- Certified Vocational Evaluator (CVE) -or-
- Employment Specialist

And meet the following criteria:
- Minimum 20 years of age -and-
- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff -and-
- Valid NJ driver’s license and abstract (not to exceed 5 points) if driving is required -and-
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual -and-
- Successfully complete all training mandated for employment specialist/job coach approved by DDD (unless Certified Rehabilitation Counselor or Certified Vocational Evaluator)

**Employment Agency**

- Licensed by DCA as per N.J.S.A. 34:8-43 and N.J.S.A. 56:8-1 -and-
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual

**Division of Vocational Rehabilitation Services (DVRS) Approved Time-limited Job Coaching and/or Supported Employment Provider**

- Comply with N.J.A.C. 12:51-20 and N.J.A.C. 12:51-6 -and-
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual

**Community Based Organization/Provider in Business to serve people with intellectual/developmental disabilities**

- Medicaid and/or DDD Enrolled Provider -and-
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual
## Case Management

### Description
Services that assist individuals in gaining access to needed waiver and State Plan services as well as needed medical, social, educational and other services. Will be provided by DDD State staff.

### Limitation

### Qualifications
- Must meet the qualifications for a Qualified Intellectual/Developmental Disabilities Professional (QIDP) and a Bachelor’s Degree or higher.
- State, Federal Criminal Background checks and Central Registry check at the time of hire.
- Must qualify for and when offered pass a NJ Civil Service Test.
- Must be employed in a position.
### Community Transition Services

**Description**
Community Transition Services are non-recurring set-up expenses for individuals who are transitioning from an institutional or another provider-operated living arrangement to a living arrangement in a private residence where the person is directly responsible for his or her own living expenses. Allowable expenses are those necessary to enable a person to establish a basic household that do not constitute room and board and may include: (a) security deposits that are required to obtain a lease on an apartment or home; (b) essential household furnishings and moving expenses required to occupy and use a community domicile, including furniture, window coverings, food preparation items, and bed/bath linens; (c) set up fees or deposits for utility or service access, including telephone, electricity, heating and water; (d) services necessary for the individual’s health and safety such as pest eradication and one-time cleaning prior to occupancy; (e) moving expenses; (f) necessary home accessibility adaptations; and (g) activities to assess need, arrange for and procure needed resources.

**Limitation**
Community Transition Services are furnished only to the extent that they are reasonable and necessary as determined through the service plan development process clearly identified in the service plan and the person is unable to meet such expense or when the services cannot be obtained from other sources. County Transition Services do not include monthly rental or mortgage expense; food, regular utility charges; and/or household appliances or times that are intended for purely diversional/recreational purposes.

**Qualifications**
- As applicable, license, certification, registration or authorization from the New Jersey Department of Consumer Affairs (NJDCA) or any other endorsing entity
- Meets the qualifications of state, county and local municipality
- Liability Insurance
<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Habilitation</td>
<td>• Day programs (adult training centers)</td>
</tr>
</tbody>
</table>

**Description**

Services that provide education and training to acquire the skills and experience needed to participate in the community, consistent with the participant’s Service Plan. This may include activities to support participants with building problem-solving skills, self-help, social skills, adaptive skills, daily living skills, and leisure skills. Activities and environments are designed to foster the acquisition of skills, building positive social behavior and interpersonal competence, greater independence and personal choice. Day Habilitation may be offered in a center-based or community-based setting. Transportation to or from a Day Habilitation site is included in the service when it is incorporated in a contract with a provider agency. Transportation will be provided between the individual’s place of residence and the site of the habilitation services, and between habilitation sites (in the cases where the individual receives habilitation services in more than one place) as a component part of habilitation services.

**Limitation**

Day Habilitation does not include services, activities or training which the participant may be entitled to under federal or state programs of public elementary or secondary education, State Plan services, or federally aided vocational rehabilitation. Transportation as defined above will be provided to service recipients from their place of residence or pick up/drop off site to the habilitation site within 38 miles and/or for a total of one hour and fifteen minutes one way, based upon whichever limit is reached first. Day Habilitation is limited to a total of 30 hours per week (transportation not included). In circumstances where an individual is only receiving case management and Day Habilitation Services and elects to utilize both Day Habilitation Services and Adult Day Health Services (State Plan) the combination of hours per week cannot exceed 30 hours and the majority of those hours must be in a Day Habilitation Service. Day Habilitation Services and Adult Day Health Services (State Plan) are mutually exclusive and cannot be provided to an individual on the same day.

**Qualifications**

- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff -and-
- Minimum 18 years of age -and-
- Valid NJ driver’s license and abstract (not to exceed 5 points) if driving is required -and-
- Successfully complete all training mandated by DDD

And meet the following criteria:

Agencies authorized to render habilitation services in Pennsylvania:

- Must comply with Title 55 PA Code: Chapter 2380

**Adult Activities Center**

- Must comply with Standards for Adult Day Programs Manual
<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
</table>
| Environmental Modifications | • Ramps  
• Grab-bars  
• Widening of doorways  
• Modifications of bathrooms  
• Stair Lifts  
• Ceiling track systems for transfers |

**Description**

Those physical adaptations to the private residence of the participant or the participant’s family, based on assessment and as required by the participant’s Service Plan, that are necessary to ensure the health, welfare and safety of the participant or that enable the participant to function with greater independence in the home. Such adaptations include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or the installation of specialized electric and plumbing systems that are necessary to accommodate the medical equipment and supplies that are necessary for the welfare of the participant.

**Limitation**

All services shall be provided in accordance with applicable State or local building codes and are subject to prior approval on an individual basis by DDD. Excluded items are those adaptations or improvements to the home that are of general utility, and are not of direct medical or remedial benefit to the participant, such as carpeting, roof repair, central air conditioning, etc. Adaptations that add to the total square footage of the home are excluded from this benefit except when necessary to complete an adaptation (e.g., in order to improve entrance/egress to a residence or to configure a bathroom to accommodate a wheelchair). Environmental modifications are limited to $2,500 per waiver year. Items covered by the Medicaid state plan cannot be purchased through this benefit. This is not a stand-alone service and the participant requesting this service, in addition to case management, must also require ongoing waiver services. This service is not available to participants living in alternate living arrangements (licensed settings).

**Qualifications**

Staff performing modifications:

- Contractors must be registered contractor per N.J.S.A. 56:8-136 -and-
- Licensed in the State of NJ for specific service to be rendered (i.e. Electrical, plumbing, general contractor) -and-
- Service provided must be provided in accordance with applicable state or local building codes

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### Services

<table>
<thead>
<tr>
<th>Individual Supports</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Examples</strong></td>
</tr>
<tr>
<td>• Assistance and training an individual in basic self-care tasks and activities of daily living</td>
</tr>
</tbody>
</table>

### Description

**Individual support services** are self-care and habilitation-related tasks performed and/or supervised by service provider staff or an approved individual caregiver in an individual’s own or family home or in other community-based settings, in accordance with approved Service Plans. Assistance to, as well as training and supervision of, individuals as they learn and perform the various tasks that are included in basic self-care, social skills, activities of daily living and behavior shaping will be provided. The Service Plan will specify the actual tasks to be performed and the anticipated outcomes. Individual support services may include personal assistance, including attendant care, household chores, errand services and training.

### Limitation

Individual Support providers may be members of the individual’s family. Payment will not be made for services furnished by the individual’s parent (or stepparent), spouse, guardian, legally responsible relative or relative residing in the recipient’s residence with the following exception: relatives residing in the individual's home will be permitted to render services for a period of no more than 30 days annually at no more than 40 hours/week, during transition/hiring of new staff. Family members who provide Individual Support services must meet the same standards as providers who are unrelated to the individual.

### Qualifications

- Minimum 18 years of age
- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff
- Valid NJ driver’s license and abstract (not to exceed 5 points) if driving is required
- Ability to communicate in individual’s primary language
- Successfully complete all training mandated by DDD

**Licensed, Certified Home Health Agencies:**
- Licensed per N.J.A.C. 8:42 and Certified by the Centers for Medicare and Medicaid Services

**Registered, Accredited Health Care Service Firm:**
- Licensed per N.J.A.C. 13:45 and Certified by the Centers for Medicare and Medicaid Services
- Accredited by one of the following: New Jersey Commission on Accreditation for Home Care Inc. (CAHC); Health Accreditation Program (CHAP); Joint Commission on Accreditation of Healthcare Organizations (JCAHO); or National Association for Home Care and Hospice (NAHC)

**Residential Agency**
- Licensed per N.J.A.C. 10:44A and/or N.J.A.C 10:44C or Title 55 PA Code; Chapter 6400

**Community Care Residence (CCR) Provider:**
- Licensed per N.J.A.C. 10:44B
## Services

### Occupational Therapy

#### Examples

- Occupational therapy activities as prescribed by the appropriate health care professional

#### Description

The scope and nature of these services do not otherwise differ from the Occupational Therapy services described in the State Plan. They may be either rehabilitative or habilitative in nature. Services that are rehabilitative in nature are only provided when the limits of occupational therapy services under the approved State Plan are exhausted. A quarterly reassessment must be completed to justify need for continuation of service. The provider qualifications specified in the State Plan apply. Occupational Therapy may be provided on an individual basis or in groups. A group session is limited to one therapist with a maximum of five participants.

#### Limitation

These services are only available as specified in the participant’s Service Plan and when prescribed by an appropriate health care professional. These services can be delivered on an individual basis or in groups. A group session is limited to one therapist with a maximum of five participants and may not exceed 60 minutes in length. The therapist must record the time the therapy session started and when it ended in the participant’s clinical record. Occupational Therapy services for an individual cannot exceed 1.5 hours (6 units) total per week, inclusive of both individual and group sessions.

#### Qualifications

- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff
- Licensed Occupational Therapists must be licensed per N.J.A.C. 13:344K
- Licensed Occupational Therapy Assistant must be licensed per N.J.A.C. 13:44K

**Licensed, Certified Home Health Agencies:**

- Licensed per N.J.A.C. 8:42 and Certified by the Centers for Medicare and Medicaid Services
<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
</table>
| **Personal Emergency Response System (PERS)** | • PERS equipment  
                                • Cost of installation & testing  
                                • Monthly cost of response center services |

**Description**

PERS is an electronic device which enables individuals to secure help in an emergency. The individual may also wear a portable "help" button to allow for mobility. The system is connected to the participant’s phone and programmed to signal a response center once a "help" button is activated. The response center is staffed by trained professionals, as specified herein. The service may include the purchase, the installation, a monthly service fee, or all of the above.

**Limitation**

All PERS shall meet applicable standards of manufacture, design and installation.

**Qualifications**

- Certified by the Centers for Medicare and Medicaid Services
- UL/ETL Approved Devices
### Services

<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Therapy</td>
<td>• Physical therapy activities as prescribed by the appropriate health care professional.</td>
</tr>
</tbody>
</table>

### Description

The scope and nature of these services do not otherwise differ from the Physical Therapy services described in the State Plan. They may be either rehabilitative or habilitative in nature. Services that are rehabilitative in nature are only provided when the limits of physical therapy services under the approved State Plan are exhausted. The provider qualifications specified in the State plan apply. Physical Therapy may be provided on an individual basis or in groups. A group session is limited to one therapist with maximum of five participants.

### Limitation

These services are only available as specified in participant’s Service Plan and when prescribed by an appropriate health care professional. These services can be delivered on an individual basis or in groups. A group session is limited to 1 therapist with 5 participants and may not exceed 60 minutes in length. The therapist must record the time the therapy session started and when it ended in the participant’s clinical record. Physical Therapy services for an individual cannot exceed 1.5 hours (6 units) total per week, inclusive of both individual and group sessions.

### Qualifications

- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff
- Licensed Physical Therapists must be licensed per N.J.A.C. 13:39A
- Licensed Physical Therapy Assistant must be licensed per N.J.A.C. 13:39A

**Licensed, Certified Home Health Agencies:**

- Licensed per N.J.A.C. 8:42 and Certified by the Centers for Medicare and Medicaid Services
<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
</table>
| **Prevocational Training** | - Job Clubs  
- Utilizing the One Stop & other related services  
- Classroom style programs/training/experiences, that are administered in compliance with the *DHS/DDD Employment Services & Supports Policy Manual*  
- Volunteer experiences (in compliance with the *Fair Labor Standards Act*) |

**Description**

Services that provide learning and work experiences, including volunteer work, where the individual can develop general, non-job-task-specific strengths and skills that contribute to employability in paid employment in integrated community settings. Services may include training in effective communication with supervisors, co-workers and customers; generally accepted community workplace conduct and dress; ability to follow directions; ability to attend to tasks; workplace problem solving skills and strategies; and general workplace safety and mobility training. Prevocational Training is intended to be a service that participants receive over a defined period of time and with specific outcomes to be achieved in preparation for securing competitive, integrated employment in the community for which an individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. Prevocational Training services cannot be delivered within a sheltered workshop. Supports are delivered in a face-to-face setting, either one-on-one with the participant or in a group of two to eight participants.

**Limitation**

This service is available to participants in accordance with the DHS/DDD Employment Services and Supports Policy Manual, and as authorized in their Service Plan. Documentation is maintained in the file of each individual receiving this service that the service is not available under a program funded under section 110 of the Rehabilitation Act of 1973, the IDEA (20 U.S.C. 1401) or P.L. 94-142. Prevocational Training is limited to 30 hours per week. Transportation to or from a Prevocational Training site is not included in the service.

**Qualifications**

**Community Based Organization/Provider in Business to serve people with intellectual/developmental disabilities:**

- Must comply with the standards for DDD Employment Services and Supports Policy Manual

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<table>
<thead>
<tr>
<th>Services</th>
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</tr>
</thead>
</table>
| Respite  | • Individual in-home respite  
• Individual out-of-home respite  
• Weekend/evening drop-off programs |

**Description**

Services provided to participants unable to care for themselves that are furnished on a short-term basis because of the absence or need for relief of those persons who normally provide care for the participant. Respite may be delivered in multiple periods of duration such as partial hour, hourly, daily without overnight, or daily with overnight. Respite may be provided in the participant’s home, a DHS licensed group home, or another community-based setting approved by DHS. Some settings, such as a hotel, may be approved by the State for use when options using other settings have been exhausted.

**Limitation**

Respite may be billed hourly up to a maximum of 10 hours; anything over 10 hours must be billed at the per diem rate. Room and board costs will not be paid when services are provided in the participant’s home. Respite providers who are approved by DDD may be members of the individual’s family, except that payment will not be made for services furnished by the individual’s parent (or stepparent), spouse guardian, or a legally responsible relative or relative residing in the service recipient’s residence.

**Qualifications**

- Minimum 18 years of age - and -
- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff - and -
- Valid NJ driver’s license and abstract (not to exceed 5 points) if driving is required - and -
- Successfully complete all trainings mandated by DDD

Licensed, Community Care Residence (CCR) Provider:

- Licensed under N.J.A.C.10:44B

Residential Agency, licensed for individuals with TBI

- Licensed under N.J.A.C.10:44C

Residential Agency (Group Home, Supervised Apartment)

- Licensed under N.J.A.C. 10:44A

Authorized Camps

- Authorized by the New Jersey Department of Health and Senior Services under N.J.A.C. 8:25

Registered, accredited Health Care Service Firm

- Licensed per N.J.A.C. 13:45B -and-
- Accredited by one of the following: New Jersey Commission on Accreditation for Home Care Inc. (CAHC); Community Health Accreditation Program (CHAP); Joint Commission on Accreditation of Healthcare Organizations (JCAHO); or National Association for Home Care and Hospice (NAHC)

Licensed, Certified Home Health Agency

- Licensed per N.J.A.C. 8:42 and Certified by the Centers for Medicare and Medicaid Services
### Speech, Language and Hearing Therapy

<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speech, Language and Hearing Therapy</td>
<td>• Speech, language and hearing therapy activities as prescribed by the appropriate health care professional.</td>
</tr>
</tbody>
</table>

### Description

The scope and nature of these services do not otherwise differ from the Speech Therapy services described in the State Plan. They may be either rehabilitative or habilitative in nature. Services that are rehabilitative in nature are only provided when the limits of speech therapy services under the approved State Plan are exhausted. The provider qualifications specified in the State plan apply. Speech, Language or Hearing Therapy may be provided on an individual basis or in groups. A group session is limited to one therapist with maximum of five participants.

### Limitation

These services are only available as specified in participant’s Service Plan and when prescribed by an appropriate health care professional. These services can be delivered on an individual basis or in groups. Group sessions are limited to one therapist with five participants and may not exceed 60 minutes in length. The therapist must record the time the therapy session started and when it ended in the participant’s clinical record. Speech, Language, and Hearing Therapy services for an individual cannot exceed 1.5 hours (6 units) total per week, inclusive of both individual and group sessions.

### Qualifications

- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff.
- Licensed Speech Therapists must be licensed per N.J.A.C. 13:44C

**Licensed, Certified Home Health Agencies:**
- Licensed per N.J.A.C. 8:42 and Certified by the Centers for Medicare and Medicaid Services
### Services

<table>
<thead>
<tr>
<th><strong>Examples</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly mandated care management service</td>
</tr>
<tr>
<td>Assists in building a person-centered service plan</td>
</tr>
<tr>
<td>Assists with finding service providers and linking to needed services and supports</td>
</tr>
<tr>
<td>Monthly monitoring</td>
</tr>
</tbody>
</table>

### Support Coordination

**Description**
Facilitative process that assists participants to expand individual choice and control over the services and supports they need to live in their communities. The Support Coordinator assists in building a person-centered service plan around a participant's preferences, strengths, and abilities. The Support Coordinator provides information about the range of services and supports offered through the waiver, writes the service plan, assists with finding service providers and linking to needed services and supports, completes all necessary modifications and updates to the plan, and conducts ongoing monitoring. The Support Coordinator ensures that individuals are offered informed choice of service providers and assists participants in remaining compliant with New Jersey’s Employment First policies.

**Additional Deliverables**
- Zero-Reject and Zero-Discharge
- Plan, develop, approve, modify, monitor and distribute the Individualized Service Plan
- Link to services, provide choice and ensure capacity
- Address health and safety concerns
- Monthly contact, quarterly face-to-face, annual home visit
- 24 hour coverage
- Adhere to all guidelines in the Provider Agreement and Policy Manual

**Qualifications**
- Bachelor’s Degree or higher in any field - and-
- 1 year of experience working with adult (21 or older) individuals with developmental disabilities
  - The experience must be the equivalent of a year of full-time documented experience working with adults (21 or older) with intellectual/developmental disabilities;
  - This experience can include paid employment, volunteer experience, and/or being a family caregiver of an adult with a developmental disability;
  - If you have previously provided care coordination to a different population and some percentage of the individuals you served had developmental disabilities, you may be able to demonstrate the equivalence of a year of experience working with adults with developmental disabilities - and-
- Support Coordination Supervisors must meet all of the qualifications of a Support Coordinator - and-
- Support Coordination Supervisors cannot be related by blood or marriage to anyone who’s plan they will supervise or sign off on - and-
- State, Federal Criminal Background checks and Central Registry check at the time of hire - and-
- Successfully complete trainings required by DDD before rendering services.
<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
</table>
| Supported Employment – Individual Employment Support | • Training and systematic instruction  
• Job coaching  
• Benefit support  
• Job development  
• Travel training  
• Training that will enable an individual to be successful in integrating on a job setting (even where not specifically related to job-skills)  
• Job site analysis |

**Description**

Activities needed to help a participant obtain and maintain an individual job in competitive or customized employment, or self-employment, in an integrated work setting in the general workforce for which an individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. The service may be delivered for an intensive period upon the participant’s initial employment to support the participant who, because of their disability, would not be able to sustain employment without supports. Supports in the intensive period are delivered in a face-to-face setting, one-on-one. The service may also be delivered to a participant on a less intensive, ongoing basis (“follow along”) where supports are delivered either face-to-face or by phone with the participant and/or his or her employer. Services are individualized and may include but are not limited to: training and systematic instruction, job coaching, benefit support, travel training, and other workplace support services including services not specifically related to job-skill training that enable the participant to be successful in integrating into the job setting.

**Limitation**

This service is available to participants in accordance with the DHS/DDD Employment Services and Supports Policy Manual, and as authorized in their Service Plan. Documentation is maintained in the file of each individual receiving this service that the service is not available under a program funded under section 110 of the Rehabilitation Act of 1973, the IDEA (20 U.S.C. 1401) or P.L. 94-142. Supported Employment – Individual Employment Support is limited to 30 hours per week. Transportation to or from a Supported Employment site is not included in the service. When Supported Employment is provided at a work site in which people without disabilities are employed, payment will be made only for the adaptations, supervision and training required for participants as a result of their disabilities and will not include payment for the supervisory activities rendered as a normal part of the business setting or for incentive payments, subsidies or unrelated training expenses.

**Qualifications**

- Minimum 20 years of age  
- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff  
- Valid NJ driver’s license and abstract (not to exceed 5 points) if driving is required  
- Successfully complete all DDD approved employment specialist/job coach series of training  
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual

**Division of Vocational Rehabilitation Services (DVRS) Approved Supported Employment Provider:**

- Must comply with N.J.A.C. 12:51-20  
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual
<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
</table>
| **Supported Employment – Small Group Employment Support** | • Mobile crews  
• Group placement (enclaves)  
• Social enterprises in which employees are making commensurate wages  
• On-site job training  
• Job development  
• Job site analysis |

**Description**

Services and training activities provided to participants in regular business, industry and community settings for groups of two to eight workers with disabilities. Services may include mobile crews and other business-based workgroups employing small groups of workers with disabilities in employment in the community. Services must be provided in a manner that promotes integration into the workplace and interaction between participants and people without disabilities. Services may include but are not limited to: job placement, job development, negotiation with prospective employers, job analysis, training and systematic instruction, job coaching, benefit support, travel training and planning.

**Limitation**

This service is available to participants in accordance with the DHS/DDD Employment Services and Supports Policy Manual, and as authorized in their Service Plan. Documentation is maintained in the file of each individual receiving this service that the service is not available under a program funded under section 110 of the Rehabilitation Act of 1973, the IDEA (20 U.S.C. 1401) or P.L. 94-142. Supported Employment – Small Group Employment Support is limited to 30 hours per week. Transportation to or from a Supported Employment site is not included in the service. When Supported Employment is provided at a work site in which people without disabilities are employed, payment will be made only for the adaptations, supervision and training required for participants as a result of their disabilities and will not include payment for the supervisory activities rendered as a normal part of the business setting or for incentive payments, subsidies or unrelated training expenses.

**Qualifications**

**Community Based Organization/Provider in Business to serve people with Intellectual/developmental disabilities:**

- Medicaid and/or DDD Enrolled Provider -and-
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual

**Division of Vocational Rehabilitation Services (DVRS) Approved Supported Employment Provider:**

- Must comply with N.J.A.C. 12:51-20 -and-
- Must comply with the Standards for DHS/DDD Employment Services and Supports Policy Manual

This draft of service definitions and provider qualifications for the Community Care Waiver are pending approval from the Centers for Medicare and Medicaid Services (CMS) and thus, are **not final**.
### Services

<table>
<thead>
<tr>
<th>Description</th>
<th>Transportation</th>
</tr>
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<tbody>
<tr>
<td>Service offered in order to enable participants to gain access to services, activities and resources, as specified by the Service Plan. This service is offered in addition to medical transportation required under 42 CFR §431.53 and transportation services under the State Plan, defined at 42 CFR §440.170(a) (if applicable), and does not replace them. Whenever possible, family, neighbors, friends, or community agencies which can provide this service without charge are utilized. Transportation services are only provided as independent waiver services when transportation is not included in the rate charged for the related waiver service. The need for transportation must be related to enabling an individual to fulfill outcomes in their Service Plan and must be documented in the Service Plan. Transportation services in this category include drivers, taxi fares, train and bus tickets, or transportation services such as AccessLink or other private contractors. The selected service chosen must be the most cost effective means of transportation that the individual is able to access. Reimbursement for mileage will not exceed the rate established by the State.</td>
<td></td>
</tr>
<tr>
<td>Limitation</td>
<td>Medicaid payment for transportation under the approved waiver plan is not available through medical transportation, transportation available through the State plan, transportation that is available at no charge, or as part of administrative expenditures. Additional transportation supports will not be available to residential or day support providers contracted to provide transportation to and from the person’s residence to the site(s) of a day program when payment for transportation is included in the established rate paid to the community living or support provider. Transportation providers who are approved by DDD may be members of the individual’s family, except that payment will not be made for services furnished by the individual’s parent (or stepparent), spouse, or a guardian, legally responsible relative or relative residing in the waiver participant’s residence.</td>
</tr>
</tbody>
</table>

### Qualifications

#### Staff:
- State/Federal Criminal Background checks and Central Registry checks must be completed for all staff
- Minimum 18 years of age
- Valid NJ driver’s license and abstract (not to exceed 5 points) if driving is required
- Provide proof of liability insurance
- Maintain vehicle registration, insurance and inspections.

#### Requirements for Home Health Agencies or Health Care Service Firms:
- Licensed per N.J.A.C. 8:42 and Certified by the Centers for Medicare and Medicaid Services
- Accredited by one of the following:
  - New Jersey Commission on Accreditation for Home Care Inc. (CAHC)
  - Community Health Accreditation Program (CHAP)
  - Joint Commission on Accreditation of Healthcare Organizations (JCAHO)
  - National Association for Home Care and Hospice (NAHC)

### Community Transportation Provider:

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This draft of service definitions and provider qualifications for the **Community Care Waiver** are pending approval from the Centers for Medicare and Medicaid Services (CMS) and thus, are **not final**.
Must be in compliance with the accepted standards for state, community and local businesses and laws regarding businesses.
### Vehicle Modifications

<table>
<thead>
<tr>
<th>Services</th>
<th>Examples</th>
</tr>
</thead>
</table>
| Vehicle Modifications | • Vehicle Steering/Brake controls  
• Vehicle Lift  
• Vehicle Ramp  
• Raising/lowering vehicle roof/floor |

**Description**
Assessments, Adaptations, or alterations to an automobile or van that is the participant’s primary means of transportation in order to accommodate the special needs of the participant. Vehicle modifications are specified by the Service Plan, are necessary to enable the participant to integrate more fully into the community and to ensure the health, welfare and safety of the participant.

**Limitation**
All Vehicle Modifications are subject to prior approval on an individual basis by DDD. The following are specifically excluded: (1) Adaptations or improvements to the vehicle that are of general utility, and are not of direct medical or remedial benefit to the individual; (2) Purchase or lease of a vehicle; (3) Regularly scheduled upkeep and maintenance of a vehicle except upkeep and maintenance of the modifications; and (4) Modifications made to vehicles owned or leased by a residential provider. All services shall be provided in accordance with applicable NJ State motor vehicle codes. Vehicle modifications are limited to $2,500 per waiver year. Items covered by the Medicaid state plan cannot be purchased through this benefit. This is not a stand-alone service and the participant requesting this service, in addition to case management, must also require ongoing waiver services.

**Qualifications**
- Accredited by the National Mobility Equipment Dealers Association (NMEDA) recognized Quality Assurance Program, or its equivalent -and-
- Compliance with NJ State motor vehicle codes