Individual Support Plans for Individuals Receiving Targeted Services Management, Base Funded Services, Consolidated or P/FDS Waiver Services, or Who Reside in an ICF/ID.

SCOPE:

Administrative Entity (AE) Administrators and Directors for Medicaid Waiver Participants
County Mental Health/Intellectual Disability (MH/ID) Programs
Private Intermediate Care Facilities for Persons with Intellectual Disabilities (ICFs/ID) Directors
State ICF/ID Directors
Supports Coordination Organizations (SCOs)
Targeted Services Management Providers
Providers of Consolidated Waiver Services, Person/Family Directed Support (P/FDS) Waiver Services or Base Funded Services
Individuals and Families or Surrogates

PURPOSE:

The purpose of this bulletin is to provide the Office of Developmental Programs' (ODPs) requirements and standardized processes for preparing, completing, documenting, implementing, and monitoring Individual Support Plans (ISPs) for individuals with an intellectual disability to ensure they are:

- Developed to meet the needs of the individual.
- Developed and implemented using the core values of Everyday Lives, Positive Approaches and Practices and Self Determination to result in an enhanced
quality of life for every individual who receives intellectual disability services and supports in Pennsylvania.

- Compliant with the approved Consolidated and Person/Family Directed Support (P/FDS) Waivers and 55 Pa. Code Chapter 51 “Office of Developmental Programs’ Home and Community Based Services” regulations.

This bulletin and attachments have been updated to align with recently approved waiver amendments and provide clarification regarding approved waiver service definitions. A summary of substantive changes made to the ISP manual is included in Attachment 7, Summary of Changes to the ISP Manual.

BACKGROUND:

The Mental Health and Intellectual Disability Act of 1966 (MH/ID Act) provides the statutory basis for the development of community-based services for individuals with an intellectual disability. Section 301(d) of the MH/ID Act (50 P. S. § 4301 (d)) requires County MH/ID Programs to provide access to base-funded services (up to the availability of State allocated funding). The County Intellectual Disabilities regulations, 55 Pa. Code Chapter 6201, were promulgated under Section 201(2) of the MH/ID Act. The 6201 regulations require the assessment of individual and family needs, and the development of a life management plan for individuals and their families. Furthermore, 55 Pa. Code Chapter 51, the "Administrative Entity Operating Agreement" for the Consolidated and P/FDS Waivers, and the ODP "Provider Agreement for Participation in Pennsylvania's Consolidated and P/FDS Waivers" also outline requirements for the development and implementation of an ISP.

Everyday Lives was issued in 2002 as Everyday Lives: Making It Happen. Everyday Lives includes the core values of choice, control, quality, community inclusion, stability, accountability, safety, individuality, relationships, freedom, success, contributing to the community, collaboration, and mentoring. These values exemplify the attributes that every individual with or without disabilities should have in their lives.

Since its issuance, the values and vision expressed in Everyday Lives provided the framework for planning, policy development, service design, and all related activities in the intellectual disability (ID) service system. Some of the improvements to the ID system that have been made to align with the Everyday Lives philosophy include:

- Person-centered planning, which focuses on the individual's strengths, choices, and preferences.
- Positive approaches, which defines the context in which needed clinical and behavioral interventions are provided to teach individuals the skills they need to make safe and appropriate choices.
• Self-determination, which gives individuals who receive services, more control and responsibility in choosing how to live their lives.

Individual Support Planning is based on the very same concepts as person-centered planning, positive approaches, and self-determination. Individual Support Planning also captures the true meaning of working with individuals and team members to create a shared commitment for an individual’s future.

DISCUSSION:

Anyone determined eligible for ID services must have an ISP completed. A full ISP is required for any individual who:

• Is not eligible for Medical Assistance and receives $2,000 or more in non-waiver services in a Fiscal Year.
• Receives Targeted Service Management.
• Is enrolled in the Consolidated or P/FDS Waiver.

Or

• Is eligible for Medical Assistance and in reserved capacity for waiver enrollment.

An abbreviated ISP may be completed for any individual who is not eligible for Medical Assistance and receives under $2,000 in non-waiver services in a Fiscal Year. Base-Funded Case Management services are not included in the $2,000 limit. Administrative Entities or Supports Coordination Organizations still have the option of completing a full ISP and are encouraged to do so.

All ISPs, including abbreviated ISPs, must:

• Be completed using the standardized format in the Home and Community Service Information System (HCSIS).
• Be based on assessed needs of the individual.
• Be developed using a person-centered planning process to capture information including health, welfare, the individual’s preferences, and desires, all of which are intended to identify and implement appropriate services and supports.
• Be updated, approved, and have services authorized at least annually (every 365 calendar days) and when warranted by changes in the individual’s needs.

The Consolidated and P/FDS Waivers state that ISPs for individuals enrolled or enrolling in either of these waivers must contain the following additional information:

• All unpaid natural supports and funded supports to meet assessed needs. The ISP shall include documentation of services provided through other agencies (for
example, Insurance, Office of Vocational Rehabilitation, Aging, Drug and Alcohol, and Education).

- The frequency, amount, type, and duration of each service.

Further, the Consolidated and P/FDS Waiver stipulate that Supports Coordination Organizations must ensure that ISPs are thoroughly reviewed to assure services accurately reflect an individual's needs prior to submission to the Administrative Entity for approval and authorization. Upon receipt of the ISP, the Administrative Entity is responsible for:
  - Ensuring all necessary services (both paid and unpaid by ODP) are included on the ISP prior to approval.
  - Ensuring the services accurately reflect an individual’s needs are eligible for reimbursement prior to approval and making a service authorization decision.

Once the ISP is approved and authorized by the Administrative Entity, the Supports Coordinator is responsible to provide a completed copy of the signature form to all team members and distribute all approved ISPs to all appropriate team members unless otherwise requested. Providers that have access to the approved ISP in HCSIS are responsible for distributing the ISP to all appropriate staff within their agency.

ISPs are not required, but are encouraged, for individuals residing in an Intermediate Care Facility for Persons with an Intellectual Disability (ICF/ID). For individuals residing in ICFs/ID, the ICF/ID personnel are responsible for developing the individual plan (outside of HCSIS) in accordance with ICF/ID regulations. This includes ensuring that services in the plan meet the individual's needs. Although Supports Coordinators are not required to develop an ISP for individuals residing in State Centers and private ICFs/ID, they are responsible for maintaining regular contact with the ICF/ID facility, evaluating the individual, and participating in plan development as required under the County Mental Retardation Service regulations. See 55 Pa. Code §6201.14, (relating to aftercare services). For individuals residing in State Centers and private ICFs/ID, the County Program is not responsible to authorize the plan.

The standardized forms attached to this bulletin must be used as follows:

- Attachment 3 - Individual Support Plan Signature Form (DP#1032): Utilized to validate individual and team member participation and the development of the ISP. It also validates that critical information was reviewed and discussed at the ISP meeting. This document must be maintained in the individual's file at the SCO for five calendar years after the case is closed.

- Attachment 6 - Office of Developmental Programs Waiver Service Request Form (DP #1022): Utilized when the following requests did not result in team concurrence: a change to an existing waiver service or a new service request.
ATTACHMENTS:

Attachment 1: ISP Manual for Individuals with an Intellectual Disability
Attachment 2: ODP Role Expectations and Required Timeline for ISP Activities
Attachment 3: DP 1032 Individual Support Plan Signature Form
Attachment 4: Annotated Individual Support Plan
Attachment 5: Questions to Help Facilitate the Development of the ISP
Attachment 6: DP #1022 Waiver Service Request Form
Attachment 7: Summary of Revisions Made to the ISP Manual

OBSOLETE DOCUMENTS:

Bulletin 00-15-01, Individual Support Plans (ISPs)

Informational Memo 085-15, ISP Review Checklist – Elimination of Six-Month Review