



**SENIOR & LONG TERM CARE DIVISION
COMMUNITY SERVICES BUREAU**

**HOME AND COMMUNITY BASED WAIVER
Policy Manual**

Section: SERVICES

**Subject: Consumer Directed Goods and
Services**

References: ARM: 37.40.1425

DEFINITION

These services, supports, supplies or goods not otherwise provided through this waiver or the Medicaid State Plan.

COVERED SERVICES

These items could include the purchase of appliances and vans, with or without modifications, when criteria and Department approval is in place.

SERVICE REQUIREMENTS

Good and services purchase must address an identified need in the member’s person-centered service and support plan and meet the following requirements. The item or service would:

1. decrease the need for other Medicaid services;
2. promote the inclusion in the community;
3. promote the independence of the member;
4. fulfill a medical, social or functional need based on unique cultural approaches; or
5. increase the member’s safety in the home environment.

In addition, good and services purchased must meet the following criteria:

6. meet the member’s identified needs and outcomes as outlined in their service plan; and
7. must collectively provide an alternative to institutional placement; and

8. be a cost-effective means of addressing an identified need in the service plan; and
9. be of sole benefit to the member.

Department review of the member's service plan, for approval, will determine whether the goods and services address the following outcomes:

10. maintain the member's ability to remain in the community;
11. enhance the member's community inclusion and family involvement;
12. develop or maintain the member's personal, social, physical or work-related skills; and
13. increase the member's independence.

LIMITATIONS

This service is limited to individuals in the Bonanza option.

Goods or services in excess of \$2,500 must receive prior authorization from the Regional Program Officer (RPO). A service plan electing to purchase a van, with or without modifications, must receive approval from the RPO and the Program Manager. The vehicle must relate to a need or goal identified in the individualized service plan.

If a van is purchased without modifications, subsequent modifications would be provided through the existing Environmental Accessibility Adaptations service. (HCBS 711).

The Department will also review the member's service plan for goods and services that **may not** be purchased with waiver funds. This includes any support service or good:

1. available through Medicaid state plan;
2. covered by any other third-party payer such as Medicare, the Veteran's Administration, or state educational or vocational agencies:

3. used for leisure and recreational purposes only and not determined necessary for the member to remain in the home;
4. that is an item or support normally furnished by the member's parents, family or spouse; or
5. that does not meet an identified need.

Consumer Directed goods and services would not be duplicative of Environmental Accessibility Adaptations or Specialized Medical Equipment and Supplies. This is monitored through the prior authorization process completed by the Financial Manager (FM).