Innovations Waiver:
What are Limits on Sets of Service?

Clinical Coverage Policy 8P pg. 122 (Attachment D)

The care manager's scope of work includes educating members about the services available to them and the limitations of the service hours related to the rules of the waiver. Limits on sets of services allow the care manager/care coordinator to determine if the services being requested fall within the amounts allowed for in the Innovations Waiver.

The following limits apply:

1. **An adult beneficiary (age 22 and over) who receives residential/supported living:**
   No more than 40 hours per week are authorized for any combination of community networking, day supports and supported employment services.

2. **A child beneficiary (through age 21) who receives residential/supported living:**

   a. During the school year: No more than 20 hours per week are authorized for any combination of community living and supports, community networking, day supports and supported employment services.

   b. When school is not in session: Up to 40 hours per week may be authorized.

   If the beneficiary is age 18 or older and has graduated (graduation with a degree or occupational course of study or GED indicating a standard course of study) the beneficiary may access the adult level of limits on sets of services.

3. **An adult beneficiary living in a private home:**
   No more than 84 hours per week are authorized for any combination of community networking, day supports, supported employment and/or community living and supports.

4. **A child beneficiary living in a private home:**

   a. During the school year: No more than 54 hours per week are authorized for any combination of community networking, day supports, supported employment and/or community living and supports.

   b. When school is not in session: Up to 84 hours per week may be authorized.

   If a beneficiary is age 18 or older and has graduated (graduation with a degree or occupational course of study or GED indicating a standard course of study) the beneficiary may access the adult level of limits on sets of services.

5. **Adult and child beneficiaries who live in private homes with exceptional support needs:**
   These beneficiaries may receive additional hours of community living and supports to allow for 24 hours per day of support with the prior approval of the PIHP.

Continued

Limits on Sets of Services: Additional Information

- If a member needs more hours of service than is allowable in Attachment D: Limits on Sets of Services due to extraordinary medical or behavioral health needs a revision will need to be completed to request these hours with documentation showing this need. Authorization periods will need to be more frequent and a step-down plan will be needed.
  - Community living and supports is typically the service that is requested to meet the member's exceptional medical or behavioral needs that require services to go beyond 12 hours per day.
    - Requests for 12 hours per day may be authorized for the entire plan year.
    - Requests for up to 16 hours per day may be authorized for a 6-month time frame during the plan year.
    - Requests for more than 16 hours per day are authorized for up to a 90-day period during the plan year. If additional authorizations are needed for this level of service, UM may approve based on medical necessity.

Child vs. Adult Beneficiary

A member is considered an adult at 18 and able to get hours for an adult beneficiary if they have graduated from high school and have a diploma, GED or occupational course of study. A certificate of completion would not qualify the member as an adult beneficiary.

If a parent pulls the member out of school before they turn 22, the member would only quality as a child beneficiary and be tied to the child hours in Attachment D: Limits on Sets of Services.