

## **MEDICAID 1915 (B) (3)**

### **SERVICE NAME/AUTHORIZATION LEVEL:**

Skill Building Assistance/Level I Service

**SERVICE DESCRIPTION:** Skill Building Assistance is defined as Skills Training and Development. Skill building assistance consists of activities **identified in the individual plan of service** that assist a beneficiary to increase their **economic self-sufficiency and/or to engage in meaningful activities such as school, work and/or volunteering**. The services should **provide knowledge and specialized skill development and/or support**. Skill building assistance may be provided in the **beneficiary's residence or in community settings**.

**STANDARD PROCEDURE CODE:** H2014

**UNIT OF MEASURE:** 15 minute increment

### **ELIGIBILITY CRITERIA AND SERVICE PRIORITIES:**

1. Beneficiary is experiencing a severe emotional disturbance, severe mental illness, or a developmental disability and meets eligibility requirements for specialty services, as defined in the Population Specific Practice Guidelines/Eligibility Chapter of this manual.
2. The service has been determined to meet Medical Necessity Criteria (see section on "Medical Necessity" for specific criteria, located in the Thumb Alliance Guiding Principles)
3. The service has been identified during the person-centered planning process
4. The service must be within the least restrictive environment (most integrated home, work, community that meet the individual's needs and desires), unless previous similar least restrictive arrangements have been demonstrated to be unsuccessful for the beneficiary
5. The service must be within individual's choice/control, unless there is documentation that health and safety would otherwise be jeopardized
6. The service is expected to achieve **one or more** of the following goals:
  - a. **Community Inclusion and Participation:**
    - \* Individual uses community services and participates in community activities in the same manner as the typical community citizen
    - \* Examples: recreation (parks, writing classes, theater classes, art classes, sporting events), socialization (visiting friends, attending club meetings), and civic activities (volunteering, voting)
    - \* A beneficiary's use of, and participation in, community activities **are expected to be integrated with that of the typical citizen (beneficiary would attend a community**

yoga class at the community rec. center, rather than a “special” yoga class for persons with mental illness)

b. **Independence:**

- \* Within the B3 context, **independence** is defined by how the **individual defines their extent of “freedom”** (from another’s influence, control, and determination) during the person-centered planning process
- \* Examples: living on their own, controlling their own budget, controlling what and when they eat, when to go to bed and arise
- \* For children/adolescents, independence may mean the support given by parents to help children/adolescents achieve the skills they need to be successful in school, enter adulthood, and then live independently

c. **Productivity:**

- \* Engaged in activities that result in or lead to maintenance of or increased self-sufficiency, which are typically going to school and work
- \* Please note that the definition of productivity may be influenced by age-appropriateness (person who is 76 may choose to volunteer; however, a for a 5 year old, successful participation in school may be indicative of productivity)
- \* Individuals would be expected to prepare for, or go to, school or work in the same places that the typical citizen uses.

7. The beneficiary has an expressed need related to the **acquisition, retention, or improvement in self-help, socialization, and adaptive skills and they are experiencing emotional, behavioral, or adaptive deficits that prevent them from maximized integration into the community.**
8. Beneficiary is NOT currently eligible for Sheltered Work Services provided by Michigan Rehabilitation Services (MRS). **\*\*This must be documented in the beneficiary’s case record and information must be updated when the beneficiary’s MRS eligibility conditions change.**

## **PROVIDER QUALIFICATIONS:**

1. Skill Training and Development activities must be identified in the individual plan of service and designed by the qualified professional performing within their scope of practice; however, **services may be Delivered by an Aide and/or certified Peer Support**

## **TYPICAL SERVICE UTILIZATION PATTERN:**

1. Decisions regarding the authorization of any B3 service (**including amount, scope, and duration**) must take into account the PIHP’s **capacity to reasonably and equitably serve other beneficiaries with Medicaid, who also have needs for these services:**

- a. B3 supports and services are **NOT** intended to meet all of the individual's needs and preferences, as some needs may be **better met by community and other natural supports** (which should be thoroughly explored by the provider before instituting B3 supports/services)
  - \* Natural Supports would be defined as any unpaid assistance provided to the beneficiary by people in their network who are willing and able to provide such assistance
  - \* The use of Natural supports must be documented in the beneficiary's individual plan of service

## 2. Skill Building Assistance Coverage Includes:

- a. **Out of home adaptive skills training:** Assistance with acquisition, retention, or improvement in self-help, socialization, and adaptive skills; and supports services incidental to the provision of that assistance, including:
  - i) Aides helping the beneficiary with their mobility, transferring, and personal hygiene functions at the various sites where adaptive skills training is provided in the community
  - ii) Aides helping the person to engage in the adaptive skills training activities (i.e.: interpreting)
- b. **Work Preparatory Services:** aimed at preparing a beneficiary for paid **OR** unpaid employment, but **are Not job task-oriented**; they include:
  - i) Teaching concepts such as: attendance, task completion, problem solving, and safety
  - ii) Should be provided to people that are **not able to join the general workforce OR are unable to participate in a transitional sheltered workshop within one year (excluding supported employment programs)**
  - iii) Activities should be directed primarily at reaching **habilitative goals** (ie: improving attention span/motor skills), **Not at teaching specific skills**
  - iv) These services must be reflected in the beneficiary's person-centered plan **and directed to habilitative or rehabilitative objectives, rather than employment objectives**
- c. **Transportation:**
  - i) From the beneficiary's place of residence to the skill building assistance training
  - ii) Between skills training sites
  - iii) Back to beneficiary's place of residence from the skill building assistance training site

## 3. Service provision:

- a. Services should occur on a **regularly scheduled** basis (minimally, several hours per day, one or more days per week) as determined in the individual plan of service

- b. Services should be coordinated with any physical, occupational, or speech therapies listed in the plan of supports/services
- c. Services may serve to **Reinforce skills/lessons taught in school, therapy, etc.**
- d. **Typical service utilization should never go beyond 6 hrs/day (24 units) or 30 hours (120 units) per week, with clear supporting clinical documentation of the specific need for utilization**

## **ASSOCIATED OUTCOMES:**

- \* Increased Recovery
- \* Increased Community Integration
- \* Increased Independence
- \* Increased Productivity
- \* Increased ability to function adaptively in interpersonal and social relationships, within a safe and healthy environment
- \* Increased Economic Self-Sufficiency
- \* Increased Psychological/Natural Supports to assist beneficiaries in assessing/obtaining needed services/supports
- \* Decreased symptomatology of severe disorder/illness
- \* Increased independence in accessing needed services/supports within the community

**NOTE:** The above outcomes indicate potential results, based on individual needs. Some of these potential outcomes may not be applicable to particular beneficiaries of Skill Building Assistance.