

Site Based and Community Based Prevocational Services Amendments to 14 NYCRR Subparts 635-10 & 635-99

Summary of Proposed Regulations

The proposed amendments make changes to regulations in 14 NYCRR sections 635-10.4 and 635-10.5 concerning prevocational services, day habilitation services and community habilitation services.

The proposed amendments create a new service delivery model for prevocational services by distinguishing between site based prevocational services and community prevocational services. The amendments limit applicability of existing prevocational service regulations to those services provided before July 1, 2015. The amendments add new regulations on the delivery and reimbursement of site based prevocational services and community prevocational services delivered on and after July 1, 2015. The amendments also make corresponding changes to existing provisions on the reimbursement of day habilitation and community habilitation services.

Site Based Prevocational Services:

New requirements for site based prevocational services include the following:

- Site based prevocational services are defined as prevocational services provided in non-residential facilities certified by OPWDD.
- The proposed amendments duplicate allowable activities in existing regulations for prevocational services and add other allowable activities such as: assessing the individual to determine his or her work interests and skills; instruction in benefits planning; instruction in the use of technology that can assist in developing job skills and meeting workplace expectations; assisting the individual to experience a variety of employment options within the community; and developing the individual's service delivery plan..
- The proposed amendments duplicate existing regulations for prevocational services concerning earning capacity of individuals in this service.
- The amendments require OPWDD approval for enrollment into site based prevocational services (where allowed) on and after July 1, 2015 and add eligibility criteria for enrollment into the service. OPWDD approval for enrollment

into site based prevocational services is not required for individuals enrolled in prevocational services at a site prior to July 1, 2015.

- The proposed unit of service requirements for site based prevocational services are duplicative of unit of service requirements in existing prevocational services. Site based prevocational services must be billed on a full and half unit basis.
- The amendments provide billing limits that restructure limits on billable service time in existing regulations on prevocational services to distinguish between weekdays and weekend days, to delete blended services, which are discontinued, and to add limits for community prevocational services.
- The amendments address documentation requirements for documentation of service delivery, development of a service delivery plan, and documentation of the service in the individual's individualized service plan (ISP). For individuals receiving prevocational services at a site, the amendments require providers to identify site based prevocational services in the ISP within a specified timeframe.

Community Prevocational Services

New requirements for community prevocational services include the following:

- Community prevocational services are defined as prevocational services that are provided in the most integrated setting appropriate to the needs of the individual receiving such services. Community prevocational services may also involve service delivery at a site under specified circumstances in which service delivery in the community could jeopardize the health and safety of individuals.
- Allowable activities duplicate activities in existing regulations and those added in the proposed amendments for site based prevocational services. For community prevocational services, the amendments add transportation between activities.
- The amendments limit the number of individuals receiving community prevocational services in a group to no more than 8 individuals.
- The amendments require OPWDD approval for enrollment into community prevocational services on and after July 1, 2015 and add eligibility criteria for enrollment into the service. Prior OPWDD approval is not required for individuals who were enrolled in prevocational services in the community prior to July 1, 2015.

- The amendments specify the unit of service for community prevocational services, which is one hour equaling 60 minutes, reimbursed in 15-minute increments.
- The amendments provide billing limits that restructure limits on billable service time in existing regulations on prevocational services to distinguish between weekdays and weekend days and to add limits for community prevocational services and community habilitation services for individuals living in certified residences.
- The amendments address documentation requirements for documentation of service delivery, development of a service delivery plan and documentation of the service in the individual's ISP. For individuals receiving prevocational services in the community, the amendments require providers to identify community prevocational services in the ISP and the associated unit of service change within a specified timeframe.

Day Habilitation Services

Changes to existing requirements for day habilitation services include the following:

- Limits on billable service time in existing regulations are restructured and revised to distinguish limits for weekdays and weekend days, to delete limits for blended services, which are discontinued, and to address site based and community prevocational services.

Community Habilitation Services

Changes to existing requirements for community habilitation services include the following:

- Limits on billable service time in existing regulations are modified to delete requirements for when community habilitation may not be reimbursed, to delete limits for blended services, which are discontinued, and to address site based and community prevocational services in existing regulations on when community habilitation may be reimbursed.