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1.0 Description of the Service

Supported Employment services provide assistance with choosing, acquiring, and maintaining a job for individuals ages 16 and older for whom Competitive Integrated Employment has not been achieved and /or has been interrupted or intermittent. Supported Employment services may be either temporary or long-term. Specific versions of this model include:

- A. Job Placement and Coaching Services
- B. Customized Employment
- C. Other evidence-based models supported by Office of Disability Employment Policy (ODEP) specific to supporting individuals with intellectual/developmental disabilities and traumatic brain injury.

The service includes transportation to and from the individual's residence, individual's service delivery location, community locations that support the respective employment phase and to and from the job site. The provider agency's payment for transportation from the individual's residence and the individual's job site is authorized service time.

The intent of Supported Employment services is to assist individuals with developing skills to seek, obtain and maintain Competitive Integrated Employment or develop and operate a micro- enterprise. The employment positions are found based on individual preferences, strengths, and experiences. Job finding should be utilized to support with exploring options for Competitive Integrated Employment and is not based on placement from a pool of jobs that are available or set aside specifically for individuals with disabilities.

Supported Employment services occur in three phases. SE Career Planning Assessment is expected to be provided during Pre-employment Phase and reassessment should typically occur during the Employment Stabilization or Long-Term Support Phase. However, SE Career Assessment can be conducted during any phase to ensure the individual meets their employment goals.

Providers are required to report the individual's wage to the LME/MCO and future BH I/DD Tailored Plan upon initiation of the Employment Stabilization Phase. Providers shall then report the individual's wage at the initiation of each plan year and at the end of the 6th month of the plan year.

Pre-employment Phase: This phase includes but not limited to the following activities that should occur prior to obtaining Competitive Integrated Employment, such as benefits counseling referral, career exploration, discovery, job readiness skills, and job development activities. The goal of this phase is to have the individual work ready and to assist the individual to obtain employment. Detailed documentation should reflect how each the above services are preparing an individual for employment. The Pre-employment Phase does not exceed six months in a typical situation.

Service activities included in this employment phase include the following:

- A. Pre-employment activities to assist an individual to engage in activities that lead to Competitive Integrated Employment may include:

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1. Career/educational counseling,
 2. Career Development & Planning Assessment and creating a Career Development Plan (CDP),
 3. Discovery activities that allow an individual to explore various job opportunities
 4. Active job searching,
 5. Job shadowing,
 6. Assistance in the use of educational resources,
 7. Training in resumé preparation,
 8. Job interview skills,
 9. Study skills, and
 10. Assistance in learning skills necessary for job retention.
- B. Job development activities to identify and secure an employment opportunity.
- C. Assisting an individual to develop self-employment. This assistance should consist of:
1. Aiding the individual to identify potential business opportunities,
 2. Assistance in the development of a business plan, including potential sources of business financing and other assistance; and
 3. Identification of the supports that are necessary for the individual to operate the business.
- D. Providing technical assistance to potential employers regarding Federal ADA (Americans with Disabilities Act) accommodations and requirements.
- E. Helping with the coordination of benefits counseling services along with assisting with gathering supportive documentation for benefit management and/or compliance of work incentive programs.
- F. Development of long-term work travel plans and alternative transportation plans to and from work (i.e., aid in completing paratransit application).

Note: If an individual exceeds the timeframe of the pre-employment phase, an exception request should be made. The request should include the nature of the issue that caused the timeframe not to be met and the steps to prevent the issue from recurring. After one exception for the Pre-employment Phase has occurred, technical assistance may be needed to reassess employment goals.

Technical assistance should include but is not limited to the following:

1. The designated employment staff shall review the individual's employment service delivery record to determine what employment services have been received.
2. Hold a meeting to discuss employment service delivery with the applicable individuals (i.e., paraprofessional staff, the individual, or natural supports) to examine the progress made towards Competitive Integrated Employment and employment barriers.
3. A review of staff's employment competency level should be reassessed to determine if appropriately trained staff is assigned to the individual or another staff could best meet the individual's employment needs.
4. Develop a specific action plan to target employment barriers preventing successful completion of the Pre-employment Phase.

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Employment Stabilization Phase: This phase includes but is not limited to the following activities that should occur when the individual has obtained Competitive Integrated Employment. Typical activities include a variety of approaches to teach the individual how to complete assigned job tasks. The goal of this service is to enable an individual to complete initial job training, develop skills necessary to maintain Competitive Integrated Employment, and successfully assimilate into the workplace. It is critical that job fading occurs early during this phase to allow the individual to develop on-the-job and natural supports.

Service activities included in the Employment Stabilization Phase include the following:

- A. Assistance to ensure the individual's successful participation in employer-provided initial orientation, job training and work task management.
- B. Teaching of job tasks through systematic instruction or other evidence based practice (i.e., demonstration of work activities through hands-on or video modeling).
- C. Introduction and training to use technology to promote the individual to be able to work independently
- D. Illustration of how to complete related work duties (i.e., work duties such as clocking-in/out, reporting time worked, calling-in procedure and accessing work schedules)
- E. Identifying natural supports and on-the-job supports for assistance with work tasks
- F. Providing technical assistance to employers regarding ADA accommodations
- G. Supporting with operational aspects of launching and operating a microenterprise.

The Employment Stabilization Phase should end once individual has achieved satisfactory work performance or work task meets employers' expectations. The Employment Stabilization Phase does not typically exceed one calendar year. Continuation in this employment phase is determined by individualized assessment of employment independence, a summary of the need for ongoing employment training or supports, and ability or inability to complete job task to the employer's supervisory expectations as documented in the Career Development Plan that is incorporated in the individual's person-centered plan (PCP) or individual support plan (ISP). The PCP or ISP plan goals should show a progression in skill acquisition or a documented need for ongoing training and/or support.

Discharge planning should start during the initiation of the Employment Stabilization Phase; this includes a fade out plan; technology utilization, documentation of exhausted efforts to maximize on the job and natural supports and attempts to ensure the job fits the individual's abilities. The Employment Stabilization Phase should not continue solely as a means of transportation to and from the worksite. An individualized plan of assistance should be provided to identify appropriate long-term mode of transportation, apply for mode of transportation, and learn how to use mode of transportation.

Note: If an individual exceeds the timeframe of the employment phase, an exception request should be made. The request should include the nature of the issue that caused the timeframe not to be met and the steps to prevent the issue from recurring. After one exception for the Employment Stabilization Phase has occurred, technical assistance may be needed to reassess employment goals.

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Technical assistance should include but is not limited to the following:

1. The designated employment staff shall review the individual's employment service delivery record to determine what employment services and employment training has been received.
2. Hold a meeting to discuss employment service delivery with the applicable individuals (i.e., paraprofessional staff, the individual, natural supports, or employer) to examine the progress made towards maintaining Competitive Integrated Employment and review the challenges which place Competitive Integrated Employment at risk.
3. A review of staff's employment competency level should be reassessed to determine if appropriately trained staff is assigned to the individual or another staff could best meet the individual's employment needs.
4. A review of assistive technology usage should be completed to assess if assistive technology can reduce or eliminate employment challenges at work or offsite barriers.
5. Develop a specific action plan to target employment barriers preventing successful completion of the Employment Stabilization Phase.

Long-Term Supported Employment Phase: This phase includes the various activities designed to continue to support the individual in maintaining Competitive Integrated Employment. The goal of this phase is to enable an individual to work as independently as possible and prepare for reduced level of staff support. In this phase the assessment of long-term support needs will occur, which support ongoing retention, prevent job loss, or make recommendations for discharge. Detailed documentation of goals specific to long-term support needs should reflect how the services being received is preparing the individual for working as independently as possible.

Continuation in this employment phase is determined by individualized assessment of employment goals and the need for ongoing employment support, as well as the ability to perform work tasks at a level of the employer's supervisory expectations. Individuals that continue in Long-Term Supported Employment Phase should have a long-term support plan that outlines the goals, support services and activities provided to prevent employment loss. This service should not exceed documented need for service. Ongoing assessment of promoting the individual's level of independence should be continued throughout this phase and reflected in the Career Development Plan, similarly, to discharge planning initiated in the previous phase.

Service activities in this employment phase include the following:

- A. Coaching and employment support activities that enable an individual to maintain their competitive integrated employment is completed through at least monthly face-to-face activities, such as monitoring, supervision, maintaining skills necessary for job tasks and counseling.
- B. Documented ongoing assistance, counseling and guidance for an individual who operates a microenterprise self-employment once the business has been launched;
- C. Employer consultation with the objective of identifying work related needs of the individual and proactively engaging in supportive activities to address the problem or need.
- D. Providing ongoing technical assistance to employers regarding Federal ADA accommodations and requirements.

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- E. Conducting documented work performance reviews, assisting the individual to understand their level of work performance, and developing a written plan to address work performance deficits.

The transition to Long-Term Supported Employment should occur from successful completion of the Employment Stabilization Phase in a Competitive Integrated Employment setting. At this time, it is expected that staff time will reduce as the individual becomes more independent in their job duties. The Employment Stabilization Phase may be needed again if the individual's job duties change or if a new job is acquired.

Feedback regarding the success and integration of the individual into their position should be obtained from the employer, through employee evaluations that provide information on the level of supervision and oversight that the individual requires. Part of the responsibility of the provider agency staff is to provide ongoing education to the employer regarding ADA accommodations to ensure the transition from the Employment Stabilization Phase to the Long-Term Supported Employment Phase is successful and the individual's needs are met. The individual's employment integration feedback and employer's ADA accommodations need to be documented in the PCP or ISP.

Long-Term Supported Employment may be used on a regular basis to meet specific and detailed documented needs. Long-Term Supported Employment related to medical/behavioral/physical support needs shall require medical or behavioral records and accompanying documentation in the PCP) or ISP supporting the need for individual services as the most appropriate and viable option.

1.1 Definitions

- A. **Career Planning** is the provision of a person-centered approach in the delivery of services, designed:
 - a. to prepare and coordinate comprehensive employment plans, such as service strategies, for individuals to ensure access to necessary workforce investment activities and supportive services, using, where feasible, computer-based technologies; and
 - b. to provide job, education, and career counseling, as appropriate during program participation and after job placement; and
 - c. career planning is captured in the Career Development & Planning Assessment document.
- B. **Career Development Plan** is a plan that identifies the individual's employment interests, preferences, and goals; describes the services and supports needed to achieve those goals; the persons, agencies, and providers that will assist the individual to meet those goals; and any obstacles to achieving Competitive Integrated Employment and actions to address those obstacles. The Career Development Plan is incorporated in the PCP or ISP. Document all employment service options presented to individuals on Career Development Plan that are receiving services, even if they refuse Competitive Integrated Employment. The following components should be addressed within the Career Development Plan:

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- a. Be developed under the presumption that all individuals are able to seek, obtain and maintain Competitive Integrated Employment.
- b. Goals and objectives related to obtaining, maintaining, or advancing in Competitive Integrated Employment.
 - i. Goals may include increasing the number of hours an individual desires to work, improving wages and promoting career/advancement opportunities.
- c. Documentation of individualized planning based on an individual's choice to pursue working full-time, part-time, or another goal identified by the individual.

C. Competitive Integrated Employment is employment that:

- a. is typically found in the community, and
- b. the individual is paid at least minimum wage, and
- c. the individual performs duties of the position- to the same extent possible as individuals without disabilities in comparable positions while having the same opportunities for interaction and advancement as their non-disabled coworkers.

D. Reassessment is the reevaluation of the progress achieved in the career plan.

E. Technical Assistance is the formal review and individualized action planning undertaken to address an individual's challenges, barriers, and lack of progress toward obtaining and maintaining Competitive Integrated Employment using evidence based and evidence informed practices that support in obtaining the defined goals and objectives.

F. Telehealth is the use of two-way real-time interactive audio and video to provide and support health care services when participants are in different physical locations.

2.0 Eligibility Criteria

2.1 Provisions

2.1.1 General

An eligible individual shall be enrolled with the LME/MCO on or prior to the date of service, meet the criteria for the IDD or TBI state-funded Benefit Plan and shall meet the criteria in Section 3.0 of this policy.

2.1.2 Specific

State funds shall cover Supported Employment (I/DD & TBI) for an eligible individual who is 16 years of age and older and meets the criteria in Section 3.0 of this policy.

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3.0 When the Service is Covered

3.1 General Criteria Covered

State funds shall cover the service related to this policy when medically necessary, and

- a. the service is individualized, specific, and consistent with symptoms or confirmed diagnosis under treatment, and not in excess of the individual's needs,
- b. the service can be safely furnished, and no equally effective and more conservative or less costly treatment is available statewide; and
- c. the service is furnished in a manner not primarily intended for the convenience of the individual, the individual's caretaker, or the provider.

3.1.1 Telehealth General Criteria Covered

As outlined in Attachment A, select services within this clinical coverage policy can be provided via telehealth. Services delivered via telehealth must follow the requirements and guidance in State-Funded Telehealth and Virtual Communications Services, at

<https://www.ncdhhs.gov/providers/provider-info/mental-health-development-disabilities-and-substance-abuse-services/service-definitions>.

3.2 Specific Criteria Covered

3.2.1 Specific criteria covered by State Funds

State funds shall cover Supported Employment (I/DD & TBI) when ALL of the following criteria are met:

- a. 16 years of age or older and express a desire to obtain and maintain Competitive Integrated Employment,
AND
- b. The individual has a condition that is identified as a developmental disability or Traumatic Brain Injury as defined in G.S. 122-C-3(12a) or G.S. 122-C- 3(38a), respectively
AND
- c. NC-SNAP or Supports Intensity Scale or TBI Assessment or Employment Evaluation completed by Vocational Rehabilitation.

3.2.1.2 Telehealth Specific Criteria

State funds shall cover services delivered via telehealth services when the all the following additional criteria are followed before rendering services via telehealth:

- a. Provider(s) shall ensure that services can be safely and effectively delivered using telehealth;
- b. Provider(s) shall consider a recipient's behavioral, physical and cognitive abilities to participate in services provided using telehealth;

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- c. The recipient's safety must be carefully considered for the complexity of the services provided;
- d. In situations where a caregiver or facilitator is necessary to assist with the delivery of services via telehealth their ability to assist and their safety must also be considered;
- e. Delivery of services using telehealth must conform to professional standards of care: ethical practice, scope of practice, and other relevant federal, state and institutional policies and requirements, such as Practice Act and Licensing Board rules;
- f. Provider(s) shall obtain and document verbal or written consent. In extenuating circumstances when consent is unable to be obtained, this must be documented;
- g. Recipients shall be informed that they are not required to seek services through telehealth and shall be allowed access to in-person services, if the recipient requests;
- h. Provider(s) shall verify the recipient's identity using two points of identification before initiating service delivery via telehealth;
- i. Provider(s) shall ensure that the recipient's privacy and confidentiality is protected to the best of their ability.

3.2.1.3 Admission Criteria

- To demonstrate an individual has a developmental disability as defined by G.S. 122-C-3(12a) with Autism Spectrum Disorder, Intellectual Disability or Traumatic Brain Injury. OR to demonstrate meeting a Traumatic Brain Injury as defined by G.S. 122-C-3(38a), an individual must have:
 - A psychological, neuropsychological, or psychiatric assessment that includes:
 - Appropriate psychological / neuropsychological testing (with validated tools) performed by a licensed clinician within their scope.
- To demonstrate an individual has a developmental disability as defined by G.S. 122-C-3(12a) without accompanying intellectual disabilities, an individual must have:
 - A physician assessment, substantiating a definitive diagnosis and associated functional limitations consistent with a developmental disability. Associated psychological or neuropsychological testing is not required in this situation.

Relevant clinical information must be obtained and documented in the individual's Person-Centered Plan or Individual Service Plan.

Service authorization must be completed by a Qualified Professional

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prior to the day services are to be provided.

The individual requires this service to obtain Competitive Integrated Employment or maintain their function for Competitive Integrated Employment within the community as documented by detailed work deficiencies and planned goals which reflect strategies to correct deficiencies.

3.2.1.4 Continued Stay Criteria

The individual continues to require this service to obtain or maintain Competitive Integrated Employment or maintain their function for employment within the community as documented by detailed work deficiencies and planned goals which reflect strategies to correct deficiencies.

Prior authorization is required for Supported Employment.

Supported Employment should be maintained when it can be reasonably anticipated that regression, a loss of employment, or an unfavorable change in employment conditions are likely to occur if the service is withdrawn. The individual meets criteria for continued stay if ALL of the following applies under the applicable employment phase:

Pre-employment Phase:

- A. Evidence that the individual is interested in learning about or obtaining Competitive Integrated Employment. This must be documented in the PCP or ISP.

AND

- B. Evidence that continued job development activities are needed to obtain Competitive Integrated Employment, in the event that the timeframe of six months has been exceeded.

AND

- C. Evidence to support that specific tasks within the current Career Development Plan that is integrated in the PCP or ISP have been accomplished (i.e., submitted applications, completed resume, completed job skills training, etc.)

OR

Employment Phase:

- A. Evidence that the individual is interested in and needs Supported Employment to maintain Competitive Integrated Employment or to obtain a change in employment conditions.. This must be documented in the Career Development Plan that is integrated in the PCP or ISP.

AND

- B. Evidence that continued employment supports are needed to maintain Competitive Integrated Employment or to obtain a change in job opportunities, in the event that the timeframe of one year has been exceeded.

AND

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- C. The individual is placed in a job opportunity paying at least minimum wage in a Competitive Integrated Employment setting.

OR

Long-term Supported Employment

- A. Evidence that the individual is interested in and needs Long Term Supported Employment to maintain Competitive Integrated Employment or to obtain a change in job conditions. This must be documented in the Career Development Plan that is integrated in the PCP or ISP.

AND

- B. Evidence that continued long term employment supports are needed to maintain or obtain Competitive Integrated Employment, or to prevent an unfavorable change in employment conditions, in the event that the timeframe of one year has been exceeded.

AND

- C. The individual is placed in Competitive Integrated Employment

3.2.1.5 Transition and Discharge Criteria

The individual no longer needs Supported Employment services to maintain or obtain Competitive Integrated Employment, or no longer benefits from this service. The individual meets criteria for discharge if any ONE of the following applies:

- a. Individual no longer needs Supported Employment services to maintain or obtain Competitive Integrated Employment, or
- b. Insufficient documented evidence to support the need for continued Supported Employment service.
- c. The individual chooses to withdraw from Supported Employment (I/DD & TBI), or the legally responsible person(s) chooses to withdraw the individual from services.

The PCP and a documented discharge plan must be discussed with the individual and documented in the PCP or ISP.

4.0 When the Service is Not Covered

4.1 General Criteria Not Covered

State funds shall not cover the service related to this policy when:

- a. the individual does not meet the eligibility requirements listed in Section 2.0;
- b. the individual does not meet the criteria listed in Section 3.0;
- c. the service duplicates another provider's service; or
- d. the service is experimental, investigational, or part of a clinical trial.

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4.2 Specific Criteria Not Covered

4.2.1 Specific Criteria Not Covered by State Funds

None that apply.

5.0 Requirements for and Limitations on Coverage

5.1 Prior Approval

State funded Supported Employment (I/DD & TBI) shall require prior approval. Refer to Subsection 5.3 for additional limitations.

A service order must be signed prior to or on the first day Supported Employment (IDD & TBI) are rendered. Refer to Subsection 5.4 of this policy.

5.2 Prior Approval Requirements

5.2.1 General

The provider(s) shall submit to the LME-MCO both of the following:

- the prior approval request; and
- all health records and any other records that support the individual has met the specific criteria in Subsection 3.2 of this policy.

5.2.2 Specific

Utilization management of covered services is a part of the assurance of medically necessary service provision. Authorization, which is an aspect of utilization management, validates approval to provide a medically necessary covered service to an eligible individual.

Initial Authorization

Services are based upon a finding of medical necessity, must be directly related to the individual's diagnostic and clinical needs, and are expected to achieve the specific employment goals detailed in the individual's Career Development Plan that is integrated in the PCP or ISP. The goals should be designed to support with increasing individual's level of independence; therefore, employment goals for individuals with IDD and TBI should be specifically documented within the Career Development Plan that crosswalk to identified needs from the Career Development and Planning Assessment. Medical necessity is determined by North Carolina community practice standards, as verified by the LME/MCO who evaluates the request to determine if medical necessity supports intensive services. Medically necessary services are authorized in the most cost-effective modes, if the treatment that is made available is similarly efficacious as services requested by the individual's physician, therapist, or another licensed qualified provider. The medically necessary service must be recognized as an accepted method of treatment.

To request an initial authorization, the psychological evaluation, service order for medical necessity, PCP or ISP, SIS evaluation and/or SNAP evaluation, or TBI assessment where applicable, the required

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LME/MCO authorization request form must be submitted to the LME/MCO. Refer to Subsection 5.4 for Service Order requirements.

Reauthorization

Reauthorization requests must be submitted to the LME/MCO 14-days prior to the end date of the individual's active authorization.

Reauthorization is based on medical necessity documented in the Career Development Plan that is integrated in the PCP or ISP, the authorization request form, and supporting documentation to include a current SNAP, SIS or TBI assessment, where applicable. The duration and frequency at which Supported Employment (IDD & TBI) is provided must be based on medical necessity and ongoing need for Supported Employment services to obtain or maintain Competitive Integrated Employment consistent with the goals outlined in Career Development Plan that is integrated in the PCP.

If medical necessity dictates the need for increased service duration and frequency, the individual and their person centered planning team should reconvene to examine and plan around service need and delivery.

Note: Any denial, reduction, suspension, or termination of service requires notification to the individual, legally responsible person or both about the individual's appeal rights pursuant to G.S. 143B-147(a)(9) and Rules 10A NCAC 27I .0601-.0609.

5.3 Additional Limitations or Requirements

- a. Supported Employment does not cover incentive payments made to an employer to encourage or subsidize the employer's participation in a Supported Employment program;
- b. Payments that are passed through to users of Supported Employment programs; or
- c. Payments for training that are not directly related to a individuals' Supported Employment program.
- d. State-funded Supported Employment services may not be utilized to employ and provide services to the same individual at the provider agency location.
- e. For individuals who are eligible for educational services under the Individuals with Disability Educational Act, Supported Employment does not include transportation to/from school settings. This includes transportation to/from the individual's home, provider's home where the individual may be receiving services before or after school or any other community location where the individual may be receiving services before or after school.
- f. Supported Employment services do not occur in licensed community facilities, inclusive of day programs.
- g. This service is not available at the same time of day as any other

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- state funded service, Medicaid waiver service or one of the State Plan Medicaid services that works directly with the Individual.
- h. An individual can receive Supported Employment (IDD & TBI) from only one provider organization during an active authorization period.
 - i. Family members or legally responsible person(s) of the individual are not eligible to provide this service to the individual.
 - j. Individuals receiving this service may not be a HCBS Waiver members/beneficiaries or individuals eligible for or receiving Medicaid funded employment services (i.e., Supported Employment in Innovations Waiver & TBI Waiver, 1915(i) and 1915(b)(3) inclusive of Medicaid ICF-IID In Lieu of Services (ILOS) with employment component).
 - k. Supported Employment services (I/DD & TBI) must not be duplicative of any other services the individual is receiving.
 - l. Individuals must have completed the application process with NC Vocational Rehabilitation and the Eligibility Decision outcome be documented noting ineligibility or closure for NC Vocational Rehabilitation Services prior to receiving state funded Supported Employment.
 - m. Transportation for family members or the individual outside of what is outlined in the PCP or ISP.
 - n. Time spent performing, attending, or participating in recreational activities unless tied to specific planned social skill assistance.
 - o. Clinical and administrative supervision of the Paraprofessional at which is covered as an indirect cost and part of the rate.
 - p. Covered services that have not been rendered.
 - q. Childcare services or services provided as a substitute for the parent or other individuals responsible for providing care and supervision.
 - r. Services provided to teach academic subjects or as a substitute for education personnel.
 - s. Interventions not identified in the individual's Person-Centered Plan or Individual Support Plan.
 - t. Services provided without prior authorization.
 - u. Services provided to children, spouse, parents, or siblings of the individual under service delivery or others in the individual's life to address problems not directly related to the individual's needs and not listed on the Person-Centered Plan or Individual Support Plan.

Support Employment Services (I/DD & TBI) must not be duplicative of other state funded services the individual is receiving.

5.4 Service Orders

Service orders are a mechanism to demonstrate medical necessity for a service and are based upon an assessment of the individual's needs. A signed service order must be completed by a qualified professional,

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physician, licensed psychologist, physician assistant, or nurse practitioner, per the individual's scope of practice.

ALL the following apply to a service order:

- a. Backdating of the service order is not allowed;
- b. Each service order must be signed and dated by the authorizing professional and must indicate the date on which the service was ordered;
- c. A service order must be in place prior to or on the first day that the service is initially provided to bill state funds for the service; and
- d. Service orders are valid for one calendar year. Medical necessity must be reviewed, and service must be ordered at least annually, based on the date of the original PCP or ISP service order.

5.5 Documentation Requirements

Documentation is required as specified in the Records Management and Documentation Manual and service definition.

The service record documents the nature and course of an individual's progress in treatment. To bill state funds, providers must ensure that their documentation is consistent with the requirements contained in this policy. The staff member who provides the service is responsible for documenting the services billed to and reimbursed by state funds. The staff person who provides the service shall sign and date the written entry. A Service Note or a Service Grid, as outlined in the Records Management and Documentation Manual, may be utilized for this service.

The Career Development & Planning Assessment, which includes the Career Development Plan, should be attached to the ISP or PCP and the information documented in the assessment is utilized to support the development of the long term support needs outlined in the Career Development Plan) and can be the bases for technical assistance meetings.

5.5.1 Contents of a Service Record

For this service, a full service note or service grid for each contact or intervention for each date of service. More than one intervention, activity, or goal may be reported in one service note, if applicable. The minimum requirements must include ALL of the following elements:

- a. Name of the individual on each page;
- b. The service record number or unique identifier on each page;
- c. Date [month/day/year] that the service was provided;
- d. Name of the service being provided on each page [e.g., Supported Employment];

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- e. Type of contact(face-to-face, telehealth) Services eligible to be provided via telehealth must be provided according to State-Funded Telehealth and Virtual Communications Services policy, at:
<https://www.ncdhhs.gov/providers/provider-info/mental-health-development-disabilities-and-substance-abuse-services/service-definitions;>
- f. Goals addressed;
- g. A number or letter as specified in the appropriate key that reflects the intervention, activities, and/or tasks performed;
- h. A number/letter/symbol as specified in the appropriate key that reflects the assessment of the individual's progress toward goals;
- i. Duration;
- j. Initials of the individual providing the service – the initials shall correspond to a full signature and initials on the signature log section of the note/grid; and
- k. A comment section for entering additional or clarifying information, e.g., to further explain the interventions/activities provided, or to further describe the individual's response to the interventions provided and progress toward goals. Each entry in the comment section must be dated.

6.0 Provider(s) Eligible to Bill for the Service

To be eligible to bill for the service related to this policy, the provider(s) shall:

- a. meet LME-MCO qualifications for participation; and
- b. have a current and signed Department of Health and Human Services (DHHS) Provider Administrative Participation Agreement.

6.1 Provider Qualifications and Occupational Licensing Entity Regulations

Supported Employment (I/DD & TBI) Services must be delivered by qualified professionals employed by organizations that:

- a. meet the provider qualification policies, procedures, and standards established by the NC Division of MH/DD/SAS;
- b. meet the requirements of 10A NCAC 27G;
- c. demonstrate that they meet these standards by being contracted by an LME/MCO;
- d. within one calendar year of enrollment as a provider with the LME/MCO, achieve national accreditation with at least one of the designated accrediting agencies; and
- e. become established as a legally constituted entity capable of meeting all the requirements of the DMH/DD/SUS Bulletins and service implementation standards. These policies and procedures set forth the administrative, financial, clinical, quality improvement, and information services infrastructure necessary to provide services.

Supported employment is designed to be a supportive, therapeutic employment relationship between the provider and the individual which addresses and/or implements interventions outlined in the Career Development Plan that is integrated in the person centered/individual support plan.

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Supported Employment providers:

- a. Help develop community involvement and relationships that promote full citizenship,
- b. Coordinate education and assistance related to finances, healthcare, and other needs,
- c. Assist with day-to-day planning and problem solving,
- d. Train and support people who assist the individual incidental to the PCP,
- e. Train and support individuals on accessing public transportation,
- f. Train and support individuals with new skill acquisition related to interpersonal skill development, independent living, community living, self-care, and self-determination.

6.2 Provider Certifications

Supported Employment (I/DD & TBI) must be provided by an IDD or TBI agency contracted with the LME/MCO and must be established as a legally constituted entity capable of meeting all of the requirements of the LME/MCO.

6.2.1 Staffing Requirements

The Supported Employment (I/DD & TBI) service is provided by qualified providers with the capacity and adequate workforce to offer this service to individuals meeting the IDD/TBI state-funded Benefit Plan. The service must be available during times that meet the needs of the individual which may include evening, weekends, or both. The service must have designated competent developmental disability and/or traumatic brain injury qualified professionals to provide supervision to the paraprofessional. The Supported Employment (I/DD & TBI) paraprofessional must meet the requirements according to 10A NCAC 27G .0104 (15).

Paraprofessionals providing this service must be supervised by a Qualified Professional. Supervision must be provided according to supervision requirements specified in 10A NCAC 27G.0204 (b) (c) (f) and according to licensure or certification requirements of the appropriate discipline. It is required that individuals providing supervision of this service have completed competency-based training in an evidenced-based supported employment model endorsed and/or supported by the Office of Disability Employment Policy (ODEP) and/or NC DHHS. Additionally, Qualified Professionals with experience providing employment services are recommended to have completed certification requirements of either Association of Community Rehabilitation Educators (ACRE), including ACRE with a focus on Customized Employment OR Association of People Supporting Employment First (APSE) (i.e., Certified Employment Support Professional (CESP)).

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6.2.2 Staff Training Requirements

The provider shall ensure that staff (i.e., paraprofessionals, Direct Support Professionals) who are providing Supported Employment have completed competency-based training in an evidenced-based supported employment model endorsed and/or supported by the Office of Disability Employment Policy (ODEP) and/or NC DHHS.

Minimally, staff (i.e., paraprofessionals, Direct Support Professionals) providing the services are **required** to have completed Job Coach training. Job Coach training requires pre-approval from NC DHHS in accordance with the published employment training list housed on the DHHS website.

Additionally, staff (i.e., paraprofessionals, Direct Support Professionals) providing Supported Employment services are recommended to have initiated training to meet certification requirements of either Association of Community Rehabilitation Educators (ACRE), including ACRE with a focus on Customized Employment OR Association of People Supporting Employment First (APSE) (i.e., Certified Employment Support Professional (CESP)) within one year of the onset of Supported Employment services.

In addition, staff should receive special population training based on staff experience and training needs (e.g., intellectual and developmental disabilities, geriatric, traumatic brain injury, deaf and hard of hearing, co- occurring intellectual and mental health and co-occurring intellectual and developmental disabilities and substance use disorder) as required. Such training should be completed prior to working with individuals and updated as individuals' needs change.

Agency staff that work with individuals:

- Are at least 18 years of age
- If providing transportation, have a valid North Carolina driver's license or other valid driver's license and a safe driving record and has an acceptable level of automobile liability insurance
- Criminal background check presents no health and safety risk to person/s
- Not listed in the North Carolina Health Care Abuse Registry
- Qualified in CPR and First Aid
- Staff that work with person/s must be qualified in the customized needs of the individual as described in the PCP or ISP.
- Staff that work with individuals who are responsible for medication administration must be trained in medication administration in accordance with 10A NCAC 27G .0209, as applicable.
- Staff that work with individuals must be trained in alternatives to

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restrictive Intervention and restrictive intervention training (as appropriate).

- High school diploma or high school equivalency (GED).

Professional Competency

Paraprofessionals have competency in the following areas:

- Communication - The Paraprofessional builds trust and productive relationships with people he/she supports, co-workers and others through respectful and clear verbal and written communication.
- Person-Centered Practices - The Paraprofessional uses person- centered practices, assisting individuals to make choices and plan goals, and provides services to help individuals achieve their goals.
- Evaluation and Observation - The Paraprofessional closely monitors an individual's physical and emotional health, gathers information about the individual, and communicates observations to guide services.
- Crisis Prevention and Intervention - The Paraprofessional identifies risk and behaviors that can lead to a crisis and uses effective strategies to prevent or intervene in the crisis in collaboration with others.
- Professionalism and Ethics - The Paraprofessional works in a professional and ethical manner, maintaining confidentiality and respecting individual and family rights.
- Health and Wellness - The Paraprofessional plays a vital role in helping individuals to achieve and maintain good physical and emotional health essential to their well-being.
- Community Inclusion and Networking - The Paraprofessional helps individuals to be a part of the community through valued roles and relationships and assists individuals with major transitions that occur in community life.
- Cultural Competency - The Paraprofessional respects cultural differences and provides services and supports that fit with an individual's preferences.
- Education, Training and Self-Development - The Paraprofessional obtains and maintains necessary certifications and seeks opportunities to improve their skills and work practices through further education and training.

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6.3 Expected Outcomes

The expected outcomes for this service are ongoing job retention in Competitive Integrated Employment and meeting the identified employment goals in the individual's Career Development Plan that is integrated in the PCP or ISP. Further, expected outcomes of Supported Employment (I/DD & TBI) is the following:

1. To maintain and advance in Competitive Integrated Employment
2. To increase the Individual's employment skills and independent living,
3. Maximize self-sufficiency,
4. Increase self-determination, and
5. Ensure the individual's opportunity to have full membership in their community as defined within the PCP and ISP goals.

7.0 Additional Requirements

7.1 Compliance

Provider(s) shall comply with the following in effect at the time the service is rendered:

- a. All applicable agreements, federal, state and local laws and regulations including the Health Insurance Portability and Accountability Act (HIPAA), 42 CFR Part 2 and record retention requirements; and
- b. All NC Division of MH/DD/SUS's service definitions, guidelines, policies, provider manuals, implementation updates, and bulletins, DHHS, DHHS division(s) or fiscal contractor(s).

8.0 Policy Implementation and History

Original Effective Date:

History:

Date	Section or Subsection Amended	Change
	All Sections and Attachment(s)	

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Attachment A: Claims-Related Information

Provider(s) shall comply with the, NCTRAKCS Provider Claims and Billing Assistance Guide, DMH/DD/SUS bulletins, fee schedules, NC Division of MH/DD/SUS's service definitions and any other relevant documents for specific coverage and reimbursement for state funds:

A. Claim Type

B. International Classification of Diseases and Related Health Problems, Tenth Revisions, Clinical Modification (ICD-10-CM) and Procedural Coding System(PCS)

Provider(s) shall report the ICD-10-CM and Procedural Coding System (PCS) to the highest level of specificity that supports medical necessity. Provider(s) shall use the current ICD-10 edition and any subsequent editions in effect at the time of service. Provider(s) shall refer to the applicable edition for code description, as it is no longer documented in the policy.

C. Code(s)

Provider(s) shall report the most specific billing code that accurately and completely describes the procedure, product or service provided. Provider(s) shall use the Current Procedural Terminology(CPT), Health Care Procedure Coding System (HCPCS), and UB-04 Data Specifications Manual(for a complete listing of valid revenue codes) and any subsequent editions in effect at the time of service. Provider(s) shall refer to the applicable edition for the code description, as it is no longer documented in the policy. If no such specific CPT or HCPCS code exists, then the provider(s) shall report the procedure, product or service using the appropriate unlisted procedure or service code.

HCPCS Code(s)		Billing Unit
Individual	YP642	1 unit = 15 minutes

Unlisted Procedure or Service

CPT: The provider(s) shall refer to and comply with the Instructions for Use of the CPT Codebook, Unlisted Procedure or Service, and Special Report as documented in the current CPT in effect at the time of service.

HCPCS: The provider(s) shall refer to and comply with the Instructions for Use of HCPCS National Level II codes, Unlisted Procedure or Service and Special Report as documented in the current HCPCS edition in effect at the time of service.

D. Modifiers

Telehealth Claims: Modifier GT must be appended to the HCPCS code to indicate that a service has been provided via interactive audio-visual communication.

Use the following modifiers to notate the phase of employment:

- A. Pre-employment phase - **BD**

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B. Career Planning Assessment - **BE**

C. Employment phase - **BF**

D. Long Term Supported Employment Phase - **BG**

E. Billing Units

Provider(s) shall report the appropriate code(s) used which determines the billing unit(s).

Units are billed in 15-minute increments.

LME/MCOs and provider agencies shall monitor utilization of service by conducting record reviews and internal audits of units of service billed. LME/MCOs shall assess their Supported Employment (I/DD & TBI) network providers' adherence to service guidelines to assure quality services for individuals served..

F. Place of Service

Supported Employment (I/DD & TBI) is a direct periodic service provided in a range of community settings. This service is not Medicaid billable. Supported Employment services is provided to individuals in a setting that meets the home and community-based characteristic established by Centers for Medicare & Medicaid Services and adopted by NC Department of Health Services. Additionally, Supported Employment must occur in a Competitive Integrated Employment setting, providing meaningful full or part-time work at minimum wage or higher, with wages and benefits similar to those without disabilities performing the same work, and fully integrated with coworkers without disabilities (Reference Workforce Innovation and Opportunities Act).

Supported Employment (I/DD & TBI) service may be provided in a hotel, shelter, church, or alternative facility-based setting or the home of a direct care worker due to COVID-19 related issues, as long as ALL the following criteria are met:

- a. health and safety of the recipient can be maintained;
- b. the individual's ISP and PCP plan has been updated indicating service delivery needed in an alternative location due to COVID-19 related issue; and
- c. documentation provided confirming a COVID-19 diagnosis.

This service is not Medicaid billable.

G. Co-payments

Not applicable

H. Reimbursement

Provider(s) shall bill their usual and customary charges. When the GT modifier is appended to a code billed for professional services, the service is paid at the allowed amount of the fee schedule. Reimbursement for these services is subject to the same

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restrictions as face-to-face contacts (such as: place of service, allowable providers, multiple service limitations, prior authorization).

Note: DMH/DD/SUS will not reimburse for conversion therapy.