



SUBJECT	PROCEDURE NUMBER	PAGE
Support Living Cost Containment Measures	APD 17-001	2

- D. Handbook. The Developmental Disabilities Waiver Services Medicaid Coverage & Limitations Handbook, dated June 2005, and incorporated by reference in Agency for Health Care Administration (AHCA) rule 59G-13.0812, F.A.C. The Handbook can be found at the AHCA website: <http://floridamedicaid.acs-inc.com/index.jsp>
- E. Prior Service Authorization (PSA). A procedure conducted by the department or an agent of the department to determine medical necessity and cost-effectiveness of services requested by individuals receiving services under the waivers. Selection criteria for those services that must be approved are specified in the operating procedures for that contractor.
- F. Individual. An individual who is eligible for and receiving Medicaid services through APD.
- G. Residential Habilitation with a Behavioral Focus. A waiver service listed in the Handbook which prescribes the minimum service requirements of licensed facilities providing this service and types of individuals eligible for such services.
- H. Intensive Behavioral Residential Habilitation. A waiver service listed in the Handbook which prescribes the minimum service requirements of licensed facilities providing this service and types of individuals eligible for such services.
- I. Support Coordinator. Pursuant to Chapter 393.063, F.S., the term means a person who is designated by the Agency to assist individuals and families in identifying their capacities, needs, and resources, as well as finding and gaining access to necessary supports and services; coordinating the delivery of supports and services; advocating on behalf of the individual and family; maintaining relevant records; and monitoring and evaluating the delivery of supports and services to determine the extent to which they meet the needs and expectations identified by the individual, family, and others who participated in the development of the support plan.
- J. Supported Living. As defined in Chapter 393.063, F.S., the term means a category of individually determined services designed and coordinated in such a manner as to provide assistance to adult individuals who require ongoing supports to live as independently as possible in their own homes, to be integrated into the community, and to participate in community life to the fullest extent possible.
- K. Waivers. Home & Community-Based Services (HCBS) Waivers (waivers). A federally approved Medicaid program, authorized under Section 1915(c) of the Social Security Act and governed by 42 CFR 441, Subpart G, that provides a package of home and community-based supports and services to eligible individuals with developmental disabilities who live at home or in a home-like setting. The HCBS Waivers include the Developmental Disabilities Waiver and the Family and Supported Living Waiver.



<b>SUBJECT</b> Supported Living Cost Containment Measures	<b>PROCEDURE NUMBER</b> APD 17-001	<b>PAGE</b> 4
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- E. The support coordinator will prepare the cost comparison using the Licensed Residential Facility Cost Plan Comparison Form (Appendix I). The form will be used for cost comparison purposes only and should not be confused with a traditional “cost plan.” The completed form and the individual’s current support plan (plus any updates) are all that are required.
- F. If the cost of a supported living arrangement is equal to or less than the cost of a licensed residential facility, the request for supported living will be submitted directly for PSA review by the support coordinator and a copy provided to the Area Office.
- G. If an individual qualifies for residential habilitation with a behavioral focus or Intensive Behavioral Residential Habilitation services, the Area Office behavior analyst will review and make a recommendation to verify they qualify before a cost comparison is prepared.
- H. If an individual has a court order, which limits with whom or where the individual lives (an example would be sex offenders), the request for supported living will be submitted to the Central Office for review.
- I. Subsequent to the cost containment review and approval, if an individual experiences a significant change in condition or circumstance that may require an increase or change to their service array, the individual’s WSC shall submit a request through the established Prior Service Authorization procedure. A new cost containment review is not necessary.

**Due Process Notification**

- A. Individuals who are denied their choice of a supported living arrangement are entitled to notification of their right to due process to challenge APD’s denial (Appendix II).







Please be advised that mediation is not available in this proceeding.

You may request a hearing or obtain assistance with your request for hearing by contacting the following Agency for Persons with Disabilities area office:

*Insert /region Agency for Persons with Disabilities Office*  
Address  
Phone number  
Fax number

If you have any questions about this letter or would like to meet with a representative of the Agency, please contact \_\_\_\_\_ at \_\_\_\_\_ (*insert phone number*). However, if you elect to meet with the Agency's representative, this meeting will not affect your right to request a hearing or the timeframes within which you must request a hearing.

Sincerely,

Attachment: "Guide to Administrative Hearings" brochure