DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL POLICY # REVISED TITLE EFFECTIVE DATE PAGE 41 - 13 One-Time Cost Allocations Upon Approval 1 of 8

POLICY

Developmental Services (DS) Regional Centers will meet the needs of individuals served through consistently developed and fiscally responsible One-Time Cost allocations for individuals receiving residential services.

PURPOSE

Individuals living in their own home are expected to pay for their own expenses. When an individual does not have sufficient resources to pay for essential expenses, the Regional Center Service Coordinator (SC) and service provider will assist the individual to explore all possible resources prior to requesting support funded with state dollars.

DEFINITIONS

Immediate Need Due to Health and Safety: an immediate danger which could reasonably be expected to cause death or serious physical harm.

REFERENCES

ADSD Policy 41 – 4 Residential Services Cost of Living Allocations

ADSD Policy 41 – 6 Shared Living Arrangements

ADSD Policy 41 – 8 Administering Agencies and Shared Living Arrangements

ADSD Policy 41 – 12 Creation of Service Authorizations for Supported Living Arrangements

PROCEDURE

A. RESOURCES

- 1. The individual's resources are the first source of revenue for any residential living expense. The Service Coordinator (SC) and service provider will discuss all possible resources, to include:
 - a. Individual's personal resources, such as employment income, including resources available through a trust;
 - b. Social Security funds;
 - c. Supplemental Nutrition Assistance Program (SNAP) funds;
 - d. Housing assistance, such as Housing and Urban Development (HUD) benefits:
 - In general, rent composes a substantial portion of monthly expenses, so any assistance with reducing this expense is of great benefit to the individual. Depending on local resources and funding, assistance may be available for subsidizing rent for a current home and/or specific designated affordable housing;
 - e. Utilities assistance programs;

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL								
POLICY# REVISED TITLE EFFECTIVE DATE PAGE								
41 - 13 One-Time Cost Allocations Upon Approval 2 of 8								

- Many utility companies such as water, electric, gas, phone and cable offer discounts to those with low income and/or disabilities that can be granted upon request and qualifications;
- f. Medicaid, Medicare or private medical insurance: Funding for medications, medical expenses, devices and equipment are typically covered under Medicaid, Medicare or private medical insurance with proper documentation from a prescribing physician and preauthorization. Applicable rules of the medical insurance, such as prior authorization, must be followed in order to receive proper payment; and/or
- g. Items or other assistance that can be provided by the individual's family.
- 2. Once all other possible resources have been explored, the service provider may request assistance from the Regional Center to support the individual through a One-Time Cost expenditure.

B. TYPES OF ONE-TIME COST ASSISTANCE

1. Start-Up Allowance

a. The Regional Center, as budgets permit, will make available limited one-time cost funding to assist with paying for furnishings, deposits, first and last month's rent and cleaning needs. Furniture purchased by the Regional Center for the common areas must remain in the 24-hour Intensive Supported Living Arrangement (ISLA) when the individual served moves out. Bedroom furniture may follow the individual if he/she moves into another residential services setting. If the individual exits the Supported Living Arrangement (SLA) program, bedroom furniture purchased by the Regional Center will remain in the ISLA home.

2. Damage Caused by the Individual

- a. This may be requested when an individual causes damages to the personal or leased property of the individual or another individual, the provider's property, or the provider's employee's property when the individual is unable to pay. The provider is responsible to follow incident reporting procedures, as applicable, for property damage. Repeated occurrences of property damage must be evaluated by the individual's support team for needed updates to the individual's habilitation and/or behavior support plan(s).
- b. Prior to an individual being held responsible for payment (i.e., a Response Cost intervention), the individual's support team must meet to determine the following:
 - 1) Is the individual capable of understanding the link between paying for damage and the damage that they caused?
 - 2) If so, what is a reasonable amount of money that the person can contribute? Note that this may not be the entire amount of the damage.
- c. Emergency Denial of Rights (DOR's) will not be approved for Response Cost interventions. Approval for Response Cost interventions must be obtained through the Human Rights Committee (HRC) and/or the Behavior Intervention Committee (BIC) prior to implementation.

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL								
POLICY # REVISED TITLE EFFECTIVE DATE PAGE								
41 - 13		One-Time Cost Allocations	Upon Approval	3 of 8				

- d. Individuals must not be coerced into payment, therefore if the individual is able but unwilling to pay for the damages, the service provider will inform the SC so the support team and the individual can discuss appropriate payment for the damages.
- e. Reimbursement for agency or staff property will only be made if the property is something that is reasonable that the staff would bring with them to work. These items would include vehicles, clothing, glasses, etc. No reimbursement will be made for agency or staff property that is not necessary for the staff to bring to work.
 - 1) Staff must demonstrate that they made a reasonable effort to protect their property and were following habilitation and any other support plans at the time the damage occurred.
 - 2) Costs for clothing will not be reimbursed for designer or "high end" clothing.
 - 3) The agency or staff will utilize available insurance for damaged agency or staff property, including vehicles, prior to requesting reimbursement from the Regional Center. Reimbursement for damage caused by individuals to agency or staff property, including vehicles, will not exceed the cost of the insurance deductible or the actual cost of the repair or replacement of the item, whichever is less.
 - 4) The provider may not require the individual to reimburse the provider for damaged agency or staff property that has been denied by the Regional Center.

3. Health and Safety

- a. Requests for reimbursement of medical bills, dental bills and durable medical equipment can be made when:
 - 1) The cost is not covered by individual's existing insurance and other area resources that cover these expenses have been fully explored and documented; and
 - 2) The team has determined a reasonable amount of money that the person can contribute towards the cost.
- b. Approval for the medical, dental and durable medical equipment costs must be approved by the Program Manager or designee and is contingent upon availability of funding.
- 4. Home Maintenance and Item Replacement
 - a. It is expected that all individuals living in SLA environments are supported to fully participate in their home including safely performing routine home maintenance tasks such as changing light bulbs, replacing batteries and changing air filters. Costs associated with these types of routine maintenance do not typically require a one-time cost and are included in the individual's ongoing cost of living in accordance with ADSD Policy 41-4 Residential Services Cost of Living Allocations for Personal Needs or Other Monthly Costs.

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL								
POLICY # REVISED TITLE EFFECTIVE DATE PAGE								
41 - 13	41 - 13 One-Time Cost Allocations Upon Approval 4 of 8							

- b. The Regional Center, as budgets permit, may make available limited one-time cost funding to assist with home maintenance and/or replacement of worn items. Furniture purchased by the Regional Center for the common areas must remain in the 24-hour Intensive Supported Living Arrangement (ISLA) when the individual served moves out. Bedroom furniture may follow the individual if he/she moves into another residential services setting. If the individual exits the SLA program, bedroom furniture purchased by the Regional Center will remain in the ISLA home for future residents.
- c. For home maintenance requests or replacement of property that belongs to the property owner, the Service Coordinator, Supervisor and SLA Provider must first discuss if the property owner should be responsible for the cost per the lease agreement. Efforts must be made to have the property owner complete applicable home maintenance and replacement of items per the lease agreement before a one-time cost is requested. Note: Due to extreme usage in a 24-hour ISLA environment, property owners are not expected to replace broken washers and dryers.

C. PROGRAM MANAGER APPROVAL

- 1. All requests must be reviewed and approved by the Program Manager or designee, in consultation with the Administrative Services Officer (ASO) or designee regarding availability of funding, prior to the purchase of items. Approval is contingent upon available funding within the Regional Center.
 - a. Requests which are for an immediate need due to health and safety may be completed without prior approval but must be submitted within one (1) working day. The health and safety issue should be clearly indicated on the One-Time Cost Request Form (attachment B).
- 2. All amounts requested should fall within the guidelines found in the Developmental Services SLA Expenditure Guidelines (attachment A).

D. APPROVAL PROCESS FOR ONE-TIME COSTS

- 1. Start-Up Allowance Approval
 - a. For all individuals, start-up allowances are limited to a maximum of \$1500 per person for necessary expenditures upon moving to a new residence.
 - 1) Requests for start-up allowances exceeding \$1500 must be accompanied by a written justification for the additional items and expense and requires authorization from the Program Manager or designee.
 - b. To request a one-time cost for a start-up allowance, the following must be submitted in a WellSky documentation note:
 - 1) One-Time Cost Request Form (attachment B); and
 - 2) Start-Up Checklist (attachment C) which includes an estimated cost of necessary purchases.

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL								
POLICY #	POLICY# REVISED TITLE EFFECTIVE DATE PAGE							
41 - 13	41 - 13 One-Time Cost Allocations Upon Approval 5 of 8							

- c. Residential start-up allowance requests must be submitted to and approved by the Program Manager or designee prior to making purchases. The Program Manager or designee will review the request within 15 calendar days of submittal.
- d. The Service Coordinator, or other assigned staff, will notify the provider of the decision of the Program Manager or designee within two (2) working days of the decision.
- e. If approved, the one-time cost service authorization will be entered into WellSky within ten (10) working days of the decision.
- 2. Damage Caused by the Individual Approval
 - a. Damages which represent an immediate need due to health and safety, such as broken glass, inoperable outside doors, flooding, etc., must be repaired as soon as possible and are not subject to the estimate requirements of D.2.b.3 and D.2.b.4 below.
 - 1) Immediate efforts must be made to ensure the health and safety of the individual(s) living in the home (e.g., sweeping broken glass, turning off water, etc.).
 - 2) The Regional Center must be notified within one (1) hour of the damage that occurs during business hours or by 9:00 am the following business day for damage that occurs outside of business hours.
 - 3) The provider must submit the One-Time Cost Request Form (attachment B) within one (1) working day along with the receipt for repairs and services completed.
 - b. To request a one-time cost for damage caused by the individual, the following must be submitted in a WellSky documentation note:
 - 1) One-Time Cost Request Form (attachment B);
 - 2) A reference to the relevant incident report and the incident report number, if applicable; and
 - 3) For damages at or exceeding \$1500:
 - i. Three written estimates or documentation from a:
 - (a) Licensed and bonded contractor;
 - (b) Bonded service repair person; and/or
 - (c) Retail store carrying the item(s) to be replaced.
 - ii. The individual's Positive Behavior Support Plan (BSP) developed to respond to the behavior(s) that resulted in the damage if applicable; or
 - iii. Changes to the Positive BSP that have been made since it was last submitted unless the damage is a result of an accident or an isolated incident; and
 - 4) For damages under \$1500:
 - i. At least one written estimate or documentation from a:

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL								
POLICY # REVISED TITLE EFFECTIVE DATE PAGE								
41 - 13	41 - 13 One-Time Cost Allocations Upon Approval 6 of 8							

- (a) Licensed and bonded contractor;
- (b) Bonded service repair person; or
- (c) Retail store carrying the item to be replaced.
- c. The individual, the individual's legal representative, the Service Coordinator, the Supervising Developmental Specialist IV (DSIV), or the Program Manager may request an additional estimate for any requests.
- d. The amount of reimbursement must not exceed the estimate or the replacement value of the article.
- e. Damages that have been caused by a provider's negligence in following the support needs identified in the individual's Positive BSP or the Person-Centered Plan (PCP) will NOT be reimbursed by the Regional Center. This will be monitored by:
 - 1) Tracking of incident reports; and
 - 2) Data supporting implementation and adherence to the Positive BSP or PCP.
- f. The one-time cost request must be submitted to and approved by the Program Manager or designee prior to making purchases, except for damages which represent an immediate need for health and safety. The Program Manager or designee will review the request within 15 calendar days of submittal.
- g. The Service Coordinator, or other assigned staff, will notify the provider of the decision of the Program Manager or designee within two (2) working days of the decision.
- h. If approved, the one-time cost service authorization will be entered into WellSky within ten (10) working days of the decision.
- 3. Health and Safety Approval
 - a. To request a one-time cost for health and safety, the following must be submitted in a WellSky documentation note:
 - 1) One-Time Cost Request Form (attachment B); and
 - 2) The quote for the medical procedure, dental procedure or durable medical equipment.
 - b. The one-time cost request must be submitted to and approved by the Program Manager or designee prior to making purchases. The Program Manager or designee will review the request within 15 calendar days of submittal.
 - c. The Service Coordinator, or other assigned staff, will notify the provider of the decision of the Program Manager or designee within two (2) working days of the decision.
 - d. If approved, the one-time cost service authorization will be entered into WellSky within ten (10) working days of the decision.

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL								
POLICY# REVISED TITLE EFFECTIVE DATE PAGE								
41 - 13 One-Time Cost Allocations Upon Approval 7 of 8								

- 4. Routine Maintenance and Replacement Approval
 - a. To request a one-time cost for routine maintenance and replacement, the following must be submitted in a WellSky documentation note:
 - 1) One-Time Cost Request Form (attachment B); and
 - 2) For maintenance or replacement items at or exceeding \$1500:
 - i. Three written estimates or documentation from a:
 - (a) Licensed and bonded contractor;
 - (b) Bonded service repair person; and/or
 - (c) Retail store carrying the item(s) to be replaced.
 - 3) For maintenance or replacement items under \$1500:
 - i. At least one written estimate or documentation from a:
 - (a) Licensed and bonded contractor;
 - (b) Bonded service repair person; or
 - (c) Retail store carrying the item to be replaced.
 - b. The one-time cost request must be submitted to and approved by the Program Manager or designee prior to making purchases. The Program Manager or designee will review the request within 15 calendar days of submittal.
 - c. The Service Coordinator, or other assigned staff, will notify the provider of the decision of the Program Manager or designee within two (2) working days of the decision.
 - d. If approved, the one-time cost service authorization will be entered into WellSky within ten (10) working days of the decision.

E. ONE-TIME COST PAYMENT SUBMISSIONS

- Service providers will submit claims in WellSky for completed One-Time Costs within 30 days of the service month. The service provider retains the original purchase receipt(s) and/or invoice(s). Prior to submitting the claim in WellSky, a legible copy of the receipt(s) and/or invoice(s) for items and/or services purchased must be submitted in a WellSky documentation note.
 - a. Receipts should indicate all items purchased.
 - b. Invoices must be itemized, to include parts and labor. Failure of the provider to submit an itemized invoice will result in the invoice being denied.
- 2. Items or services purchased through a one-time cost must align with the one-time cost request. For example, an approved one-time cost request for a new couch must be used to purchase a new couch. However, if the exact couch that was submitted for the one-time cost estimate is not available or a different, preferrable couch can be obtained for the same or lower cost as the original estimate, it is acceptable to purchase the different couch.
- 3. Any desired changes to the approved one-time cost, including total cost or type of product/service purchased, must be approved by the Program Manager prior to

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES DIVISION POLICY MANUAL							
POLICY # REVISED TITLE EFFECTIVE DATE PAGE							
41 - 13		One-Time Cost Allocations	Upon Approval	8 of 8			

purchase. Items or services purchased which are not authorized in the approved one-time cost will not be reimbursed.

- 4. The provider will work with the Regional Center to make sure One-Time costs are current as the Regional Center will not provide reimbursement for claims that are not processed within 180 days or by July 15th for purchases made in the previous fiscal year, whichever is sooner.
- 5. The provider may not require the individual to reimburse for one-time cost items that were either denied by the Regional Center or not submitted for approval to the Regional Center.

ATTACHMENTS (CLICK BELOW)

Attachment A – Developmental Services SLA Expenditure Guidelines

Attachment B – One-Time Cost Request form

Attachment C – Start Up Checklist

			Approved By	
Title			Signature	Date
Deputy Administrator			min ple	3/22/21
Division Administrator or Designee			Deva Shmidt	3/20/21
Document	t History			
Revision	Date	Change		