DDRS Policy Manual Date Effective: Feb. 28, 2011 Policy Number: BDDS 460 0228 015 Ind. Personal Info - Site

POLICY: INDIVIDUAL'S PERSONAL INFORMATION: SITE OF SERVICE **DELIVERY**

POLICY STATEMENT: It is the policy of the Bureau of Developmental Disabilities Services (BDDS) that the Provider specified in the Individual's Individualized Support Plan (ISP) as being responsible for maintaining the Individual's personal information shall maintain personal information for the Individual at the Individual's residence or the primary location where the Individual receives services.

DETAILED POLICY STATEMENT

- 1. The Provider specified in the Individual's ISP as being responsible for maintaining the Individual's personal information shall maintain information for the Individual at:
 - a. the Individual's residence; or
 - b. the primary location where the Individual receives services.
- 2. This information must be kept in compliance with HIPAA and all other Federal and State privacy statutes.
- 3. The Individual's personal information shall include at minimum:
 - a. The Individual's current ISP.
 - b. A photograph of the Individual.
 - c. Telephone numbers for emergency services that may be required by the Individual to include at minimum:
 - i. The local emergency number, for example, 911.
 - ii. The Individual's Legal representative, if applicable.
 - iii. The local BDDS office.
 - iv. The Individual's Case Manager.
 - v. Adult Protective Services or Child Protection Services as applicable.
 - vi. The developmental disabilities waiver ombudsman.
 - vii. Other service Providers as identified by the Individualized Support Team (IST) and documented in the Individual's ISP.
 - viii. Any other telephone number identified for inclusion by the Individual or the Individual's Legal representative.
 - d. Consent by the Individual or the Individual's Legal representative for emergency treatment for the Individual.
 - e. Systems outlined in the Health Care Coordination policy, as indicated for the Individual.
 - f. The Individual's history of allergies, if applicable.
 - g. Copies of medical, dental and vision services summary documentation to include:
 - i. The most current medical, dental and vision consults and summary documentation, regardless of date of visit or service; and

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ii. All medical, dental and vision consults and summary documentation for visits or services during the previous two months.

- h. A copy of the Individual's risk plans, if applicable
- i. All risk plan documentation for the past 60 days.
- j. All medication administration recording forms for the previous two months.
- k. Documentation of:
 - i. changes in the Individual's physical condition or mental status during the last two months:
 - ii. an unusual event such as vomiting, choking, falling, disorientation or confusion, behavioral problems, or seizures occurring during the last two months; and
 - iii. the response of each Provider to the observed change or unusual event.
- 1. A copy of the Individual's Behavioral Support Plan (BSP), if applicable.
- m. All Behavioral Support Services documentation for the previous two months.
- n. If an Individual's outcomes include bill paying and other financial matters and the provider is the residential provider or the representative payee:
 - i. the Individual's checkbook with clear documentation that the checkbook has been balanced; and
 - ii. bank statements with clear documentation that the bank statements and the Individual's checkbook has been reconciled.
- o. All ISP outcome directed documentation for the previous two months.
- p. A listing of all adaptive equipment used by the Individual that includes contact information for the person or Entity responsible for replacement or repair of each piece of adaptive equipment.
- q. All environmental assessments conducted during the previous two months, with the signature of the person or persons conducting the assessment on the assessment.
- 4. Personal information as described in this section shall be maintained by the Provider in a manner that allows for review at the time a verbal or written request is made by the Family and Social Services Administration (FSSA), the Division of Disability and Rehabilitative Services (DDRS), the Office of Medicaid Policy and Planning (OMPP) or their agents or contractor.

DEFINITIONS

"BDDS" means bureau of developmental disabilities services as created under IC 12-11-1.1-1.

"Case Manager" means a person employed to provide Case Management services by DDRS or the DDRS approved Case Management vendor.

"Developmental disabilities waiver ombudsman" means the statewide waiver ombudsman described in IC 12-11-13.

"DDRS" means the division of disability and rehabilitative services as established by IC 12-9-1-1.

"FSSA" means Indiana Family and Social Services Administration, established per IC 12-8-1-1, which works with Indiana's families, children, senior citizens, people with disabilities and people with mental illness, providing services to promote self-sufficiency, independence, health and safety.

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"HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, enacted by the 104th congress of the United States of America.

"Individualized Support Plan" or "ISP" means a plan that establishes supports and strategies, based upon the Person centered planning process, intended to accomplish the Individual's long term and short term outcomes by accommodating the financial and human resources offered to the Individual through paid Provider services, volunteer services, or both, as designed and agreed upon by the Individualized Support Team.

"Individualized Support Team" means a team of persons, including:

- 1. an Individual;
- 2. the Individual's Legal representative, if applicable;
- 3. the Individual's Providers;
- 4. the Individual's Case Manager, if indicated;
- 5. a BDDS representative; and
- 6. other persons identified by the Individual or the Individual's Legal representative, if applicable, who assist the Individual in the development and implementation of the Individual's ISP.

"OMPP" means the Office of Medicaid Policy and Planning as established by IC 12-8-6-1.

REFERENCES

IC 12-8-8-4

IC 12-9-2-3

IC 12-11-1.1-1

Approved by: Julia Holloway, DDRS Director - Julia Holloway