



Eric Holcomb, Governor
State of Indiana

Division of Aging
MS 21, 402 W. WASHINGTON STREET, P.O. BOX 7083
INDIANAPOLIS, IN 46207-7083
Toll Free: 1-888-673-0002
FAX: 317-232-7867

TO: Providers under the Aged and Disabled (A&D) and Traumatic Brain Injury (TBI) 1915(c) Home and Community Based Medicaid Waivers and Money Follows the Person (MFP) Demonstration Programs

FROM: Leslie Huckleberry, Director, Division of Aging

SUBJECT: Updated Guidance Regarding Service Plan Elements Which Require Manual Review

DATE: March 22, 2024

The purpose of this memorandum is to share updated guidance with all providers regarding the service plans that will be undergoing state-level review, effective immediately. This guidance is a follow up to information shared in January regarding the Indiana Family and Social Service Administration's Medicaid forecast mitigation strategies.

As outlined in that communication, FSSA is working to improve service definition compliance through reinforcement of practices that align with federally approved definitions, and to increase state staff engagement to ensure a person-centered, thoughtful and thorough review process for service plans. The goal is to support the development of service plans that are person-centered and comply with all requirements from the Centers for Medicare and Medicaid Services (CMS).

To date, Diving of Aging staff review all service plans (initial, annual, re-entry or updates) that contain at least one of the following services:

- Home Modification Assessment
- Home Modifications (Install and Maintenance)
- Specialized Medical Equipment and Supplies (New and Repair)
- Vehicle Modification (Install and Maintenance)
- Participant-Directed Home Care Service
- Consumer-Directed Attendant Care Service
- Any plan the Care Manager requests state level review of

Effective immediately, all care managers will flag for state staff review service plans with the following criteria:

- A service plan (initial, annual, re-entry, or update) for an individual 22 years or older that includes more than 240 hours per month of Attendant Care.



- A service plan (initial, annual, re-entry, or update) for an individual under 22 years old that includes more than 80 hours per month of Attendant Care.
- All service plans that include Home and Community Assistance as a service
- Any service plan with more than 1 provider providing the same service (i.e., two attendant care provider agencies)
- Any service plan that has a Legally Responsible Individual (LRI) providing care

Any plan that is flagged for state-level review will be reviewed in its entirety to ensure alignment with waiver service requirements and applicable policy and guidance.

For questions, please contact fssa.daresponseteam@fssa.in.gov.

