TO: DDS Qualified Providers, DDS Case Managers
FROM: David David, Director of Service Development and Support, Operations Center
CC: DDS Leadership Team, Assistant Regional Directors
DATE: November 30, 2018
SUBJECT: Electronic Face to Face Supports

The Department of Developmental Services is in the process of rolling out a series of technology-based options for services in the coming months. The first one of these options was detailed in I.D.PR.011 Use of Audio and Video Technology that was effective as of November 19, 2018. This Operations Memo details information about Electronic Face to Face Supports for Individualized Home Supports (IHS) and Individual Supported Employment (ISE) beginning December 1, 2018. Operations Memo FY2019-11 will serve as a procedural guide for DDS qualified providers and DDS case managers.

What are Electronic Face to Face Supports?

It is a real-time, two-way video communication between a provider and the individual that supplements direct in-person service delivery of (1) individualized home supports (IHS) or (2) individual supported employment (ISE). It also meets the intermittent or unscheduled support needs for an individual to live and work in the most integrated setting.

Why use Electronic Face to Face Supports?

Electronic face to face supports promote an individual’s independence and autonomy. These supports assist in the transition from congregate settings in which individuals can become over reliant on staff by providing support and encouragement through electronic two-way communication to enable the individual to complete tasks on their own. Electronic face to face supports give individuals the chance to do more on their own, while remaining healthy and safe.

Who is eligible to receive Electronic Face to Face Supports?

To receive electronic face to face supports, an individual must live in his or her own or family home and already be receiving in-person individualized home supports or individual supported employment services. An individual may receive in-person supports and electronic face to face supports on the same day, but not at the same time.
What is covered under Electronic Face to Face Supports?

Electronic face to face supports are required to be in the scope of individualized home supports or individual supported employment and are limited to:

- Check-ins (e.g., reminders, verbal cues, prompts)
- Consultation (e.g., counseling, problem solving)

Either the individual or the service provider staff may initiate the use of electronic face to face contact.

What is not covered under Electronic Face to Face Supports?

Electronic face to face supports are not covered for any service that duplicates a service offered by the Connecticut Medicaid state plan or through the DDS Home and Community Based Services (HCBS) waivers. Also not covered is technology to gather data using sensing or biometric devices transmitted by telephone or over the internet.

Qualified providers that implement the use of electronic face to face supports may not (1) bill for direct support delivered electronically when the exchange between the individual and the provider is social in nature; (2) bill for direct support delivered electronically when real-time, two-way communication does not occur (e.g., leaving a voicemail, unanswered electronic messaging); or (3) use a global positioning system (GPS), personal emergency response system (PERS) or video devices for the purposes of remote check-in or consultative supports.

What is the process to begin receiving Electronic Face to Face Supports?

- **Planning and Support Team Approval documented in the Individual Plan (IP)**
  1. Electronic face to face supports are chosen as a service delivery method by the individual or the individual’s legal representative, if applicable.
  2. Electronic face to face supports are identified in the scope of the services specified in the IP.
  3. Electronic face to face supports help the individual achieve an identified goal in the IP.
  4. Electronic face to face supports are chosen based upon an individual’s assessed need.
  5. Electronic face to face supports are delivered by a two way communication method or methods that have been approved by the team to meet the individual’s assessed needs.
  6. A general description of the individual’s use of electronic face to face supports including the maximum number of hours authorized per month, the average frequency of its use (i.e., number of times per day, week, or month) and the average duration of the face to face contact (i.e., 1 minute to 30 minutes).

- **Provider Documentation**
  1. Names of staff who delivered electronic face to face services;
  2. Date of electronic face to face service delivery;
  3. Start and end time of service delivery with a.m. or p.m. notations;
  4. Length of time of electronic face to face service delivery;
  5. Method of electronic face to face contact (i.e., Skype, Facetime, or other type of video conferencing); and
  6. Location of the staff (i.e., office or community) where electronic face to face supports occurred.

- **Employer of Record Documentation**
  Information that is required to be included on the timesheet of self-hired staff who deliver electronic face to face services:
  1. Date of electronic face to face service delivery;
2. Start and end time of service delivery with a.m. or p.m. notations;
3. Length of time of electronic face to face service delivery;
4. Method of contact: “DS” direct face to face or “ES” electronic face to face; and
5. Location of staff (i.e., office or community) where electronic face to face supports occurred.

Billing for Electronic Face to Face Supports and Non-Covered Supports

1. Electronic face to face supports are required to be billed in 15-minute intervals.
2. Electronic face to face supports are not covered for any service that duplicates a service offered by the Connecticut Medicaid state plan or through the DDS HCBS waivers.
3. Electronic face to face supports may not be provided without a current authorization for either individualized home supports (IHS) or individual supported employment (ISE).
4. If an individual is receiving electronic face to face supports then in-person individualized home supports or in-person individualized supported employment are required to be scheduled a minimum of once a month, unless prior approval has been received from the Regional Director or his or her designee.
5. To receive electronic face to face supports while receiving in-person individualized supported employment, an individual is required to work independently in his or her own competitive job.
6. An individual may receive in-person supports and electronic face to face supports on the same day but not during the same time period to prevent double billing.
7. Electronic face to face supports do not include technology used to gather data using sensing or biometric devices transmitted by telephone or over the internet.
8. Electronic face to face supports may not be billed for when the exchange between the individual and the provider staff is social in nature.

Best practices for review of Electronic Face to Face service delivery

1. The provider or the employer of record (EOR) shall review with the individual and the individual’s case manager, 45 days after initial approval of electronic face to face service delivery, how the amount of electronic face to face supports and the methods of delivery are meeting the individual’s health and safety needs and planned goals and then document and implement any recommended changes in the use of electronic face to face supports.
2. At the intervals established in the IP, the provider or EOR shall review, document and report to the case manager how electronic face to face methods are meeting the individual’s goals in the IP and any changes to the individual’s health and safety needs.
3. Staff is expected to practice the use of electronic face to face supports with the individual in-person prior to starting electronic face to face contacts.
4. The provider or the EOR are required to develop guidelines on when and where to use electronic face to face supports to ensure the individual’s dignity of risk and confidentiality.

Provider standards and qualifications

Individualized home supports and individual supported employment are services that require DDS Medicaid Home and Community Based Services (HCBS) Waiver enrollment. The electronic face to face supports option is available through qualified providers or self-hire direct service staff who meet the requirements specified in the DDS HCBS Waiver Operations Manual for individualized home supports or individual supported employment.

Service amount, authorization, rates and billing for Electronic Face to Face Supports

Individuals who receive electronic face to face supports are required to have a current DDS authorization for individualized home supports (IHS) or individual supported employment (ISE), which are direct services.

1. Electronic face to face supports will be paid at the established rate for IHS and ISE.
2. In-person and electronic face to face supports are billed in 15-minute intervals.
3. Qualified providers may bill for the full 15 minute interval as long as at least 8 minutes of service has been provided.
4. Electronic face to face supports may not be provided at the same time as in-person individualized home supports or individual supported employment.
5. An individual may use electronic face to face supports in a flexible manner that meets his or her needs.

Please review the information contained in this memo on Electronic Face to Face Supports. If you have questions, please contact David David, Director of Service Development and Support, at David.David@ct.gov.