

**Children’s Long-Term Support (CLTS) Waiver Program Covered Services & Qualified Provider Requirements
Excerpts from CMS Approved § 1915(c) Home and Community-Based Services (HCBS) Waiver 5-Year Renewal Application
Effective 4/1/2017 - 12/31/2021**

#	Service, SPC & HIPAA Codes	Taxonomy Codes	Service Description	Provider Qualifications: Training, Degree, Work Experience Standards
1	<p>Adaptive Aids</p> <p>adaptive aids-vehicles SPC: 112.57 HIPAA: T2039</p> <p>adaptive aids-other SPC: 112.99 HIPAA: T2028</p>	<p>Category 1: 14 equipment, technology and modifications</p> <p>Sub-Category 1: 14031 equipment and technology</p>	<p>Adaptive aids include controls or appliances which enable people to increase their ability to perform Activities of Daily Living or control the environment in which they live. Adaptive aids also services and material benefits which enable children to access, participate and function in the community. These include the purchase of vehicle modifications (such as van lifts, hand controls for youth learning to drive, equipment modifications, etc.) that allow the vehicle to be used by the participant to access the community, or those costs associated with the maintenance of repair of these items.</p> <p>Examples of Adaptive Aids may include:</p> <ul style="list-style-type: none"> - Hygiene/meal preparation aids - Environmental control units - Accessible computer keyboard - Adaptive security systems - Adaptive door handles and locks - Adaptive bike or tricycle - Adaptive accessories - Computer and necessary software - Control switches - Control switches, pneumatic devices, including sip and puff controls - Electronic control panels - Over the bed tables - Portable ramps - Standing board/frames - Scald preventing showerhead - Specialized clothing - Talking alarm clocks - Van/vehicle lift/transfer unit (manual, hydraulic or electronic) - Vehicle hand controls <p>This service may also include the initial purchase of a service animal and routine veterinary costs for a service animal. Wisconsin Statute § 106.52 (1) (fm) states: "Service animal" means a guide dog, signal dog, or other animal that is individually trained or is being trained to do work or perform tasks for the benefit of a person with a disability, including the work or task of guiding a person with impaired vision, alerting a person with impaired hearing to intruders or sound, providing minimal protection or rescue work, pulling a wheelchair, or fetching dropped items.</p>	<p>Agency – Pharmacy</p> <ul style="list-style-type: none"> • Providers of systems or devices such as adaptive aids shall ensure that all items meet all the applicable standards of manufacture, safety, design and installation such as Underwriters Laboratory and Federal Communication Commission. <p>Agency – Other Providers Appropriately Qualified</p> <ul style="list-style-type: none"> • Providers of systems or devices such as adaptive aids shall ensure that all items meet all the applicable standards of manufacture, safety, design and installation such as Underwriters Laboratory and Federal Communication Commission. <p>Individual – Durable Medical Equipment Provider</p> <ul style="list-style-type: none"> • Providers appropriately qualified to distribute Durable Medical Equipment.

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			<p>As per the Americans with Disabilities Act, service animals are dogs (and in some cases, miniature horses) trained to perform major life tasks to assist people with physical disabilities. For a person to legally qualify to have a service dog, he/she must have a disability that substantially limits his/her ability to perform at least one major life task without assistance.</p> <p>To qualify as a service dog, the dog must be individually trained to perform that major life task. All breeds and sizes of dogs can be trained as service animals. The federal American Disabilities Act (ADA) does NOT require certification or registration of service animals.</p> <p>While no special accreditation is required by the state of Wisconsin, it is recommended that the Waiver Agency strongly consider service dog certification training to realize the full potential of the assistance provided by the service animal.</p> <p><u>Limitations, Exclusions, Frequency</u></p> <ul style="list-style-type: none"> • Excludes food, grooming, and non-routine veterinary care for service animals based on DHS guidelines. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. In addition, the CLTS Waiver Program is the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	
2	Adult Family Home 1-2 Bed (residential care services only)	Category 1: 02 round-the-clock services Sub-Category1:	Adult family home is a residence where one to four persons live and in which care, treatment or service above the level of room and board is provided as a primary function of the facility. The residence is the primary domicile of the Adult Family Home operator(s). Only the costs directly associated with participant care, support and supervision in the adult family home may be	Agency – Adult Family Home <ul style="list-style-type: none"> • (DHS 82) All one to two bed adult family homes shall be certified pursuant to standards established by the Department. Wisconsin Administrative Code DHS 82 contains the

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	SPC: 202.01 HIPAA: 0240 monthly HIPAA: 3109	02011 group living residential habilitation Category 2: 02 round-the-clock Sub-Category 2: 02013 group living, other Category 3: 02 round-the-clock services Sub-Category 3: 02021 shared living, residential habilitation Category 4: 02 round-the-clock services Sub-Category 4: 02031 in-home residential	<p>billed under this service. No costs associated with room and board of the residents may be billed to the CLTS Waiver Program.</p> <p>Adult family home also includes “community care home” until statutory authority is established for community care homes. “Community care home” is a residence where one to four adult residents live and also where the resident(s) receives care, treatment, support or service above the level of room and board. In the community care home the operator owns, rents, or leases the residence and employs staff who provide care and service. The community care home is not the primary domicile of the provider.</p> <p>One and two bed adult family homes shall be certified pursuant to the standards established by the Department of Health Services, which includes requirements regarding the age of individuals permitted to reside at the home.</p> <p>Three or four person adult family homes must be licensed by the Department of Health Services, Division of Quality Assurance or another approved licensing agency. DHS 88, Licensed Adult Family Homes contains the regulations and standards governing this service, including requirements regarding the age of individuals permitted to reside at the home.</p> <p>Specific target group requirements:</p> <ol style="list-style-type: none"> 1. There must be documentation of the specific exceptional needs of the person and the individual psychiatric/behavioral care plan or individual medical care plan that the adult family home provider will implement. 2. There must be documentation of the specific training the adult family home provider received related to the individual’s needs and the psychiatric/behavioral treatment plan or individual medical care plan. <p><u>Limitations, Exclusions, Frequency</u></p> <ul style="list-style-type: none"> • For AFH services, transportation services may be included under this service or separately billed under the service Transportation so long as there is no duplicate billing for any unit of service. • Excludes environmental modifications to the home, adaptive equipment or communication aids under this service. Any needed environmental modification, adaptive equipment or communication aid may be covered by the waiver but must be claimed under the services “Home Modifications,” “Communication Aids,” or “Adaptive Equipment” respectively. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any 	<p>regulations and standards governing this waiver service. Adult Family Home standards are also described in the publication: Medicaid Waiver Standards for Adult Family Homes.</p> <p>Individual – Other persons appropriately qualified as approved by the State and as related to the unique service being provided to the child</p> <ul style="list-style-type: none"> • (DHS 82) All one to two bed adult family homes shall be certified pursuant to standards established by the Department. Wisconsin Administrative Code DHS 82 contains the regulations and standards governing this waiver service. Adult Family Home standards are also described in the publication: Medicaid Waiver Standards for Adult Family Homes.

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			<p>service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin's income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	
3	<p>Adult Family Home 3-4 Bed</p> <p>SPC: 202.02 HIPAA: 0241</p>	<p>Category 1: 02 round-the-clock services</p> <p>Sub-Category1: 02011 group living residential habilitation</p> <p>Category 2: 02 round-the-clock</p> <p>Sub-Category 2: 02013 group living, other</p> <p>Category 3: 02 round-the-clock Services</p> <p>Sub-Category 3: 02021 shared living, residential habilitation</p> <p>Category 4: 02 round-the-clock Services</p>	<p>Adult family home is a residence where one to four persons live and in which care, treatment or service above the level of room and board is provided as a primary function of the facility. The residence is the primary domicile of the Adult Family Home operator(s). Only the costs directly associated with participant care, support and supervision in the adult family home may be billed under this service. No costs associated with room and board of the residents may be billed to the CLTS Waiver Program.</p> <p>Adult family home also includes “community care home” until statutory authority is established for community care homes. “Community care home” is a residence where one to four adult residents live and also where the resident(s) receives care, treatment, support or service above the level of room and board. In the community care home the operator owns, rents, or leases the residence and employs staff who provide care and service. The community care home is not the primary domicile of the provider.</p> <p>One and two bed adult family homes shall be certified pursuant to the standards established by the Department of Health Services, which includes requirements regarding the age of individuals permitted to reside at the home.</p> <p>Three or four person adult family homes must be licensed by the Department of Health Services, Division of Quality Assurance or another approved licensing agency. DHS 88, Licensed Adult Family Homes contains the regulations and standards governing this service, including requirements regarding the age of individuals permitted to reside at the home.</p> <p>Specific target group requirements:</p>	<p>Agency – Adult Family Home</p> <ul style="list-style-type: none"> (DHS 88) The Department of Health Services, Division of Quality Assurance or another approved licensing agency must license adult family homes for three or four persons. Wisconsin Administrative Code DHS 88 contains the regulations and standards governing this waiver service. <p>Individual – Other persons appropriately qualified as approved by the State and as related to the unique service being provided to the child</p> <ul style="list-style-type: none"> (DHS 88) The Department of Health Services, Division of Quality Assurance or another approved licensing agency must license adult family homes for three or four persons. Wisconsin Administrative Code DHS 88 contains the regulations and standards governing this waiver service.

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		Sub-Category 4: 02031 in-home residential	<p>1. There must be documentation of the specific exceptional needs of the person and the individual psychiatric/behavioral care plan or individual medical care plan that the adult family home provider will implement.</p> <p>2. There must be documentation of the specific training the adult family home provider received related to the individual's needs and the psychiatric/behavioral treatment plan or individual medical care plan.</p> <p><u>Limitations, Exclusions, Frequency</u></p> <ul style="list-style-type: none"> • For AFH services, transportation services may be included under this service or separately billed under the service Transportation so long as there is no duplicate billing for any unit of service. • Excludes environmental modifications to the home, adaptive equipment or communication aids under this service. Any needed environmental modification, adaptive equipment or communication aid may be covered by the waiver but must be claimed under the services “Home Modifications,” “Communication Aids,” or “Adaptive Equipment” respectively. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	
4	<p>Assistive Technology / Communication Aids</p> <p>SPC: 112.47</p>	<p>Category 1: 14 equipment, technology, and modifications</p> <p>Sub-Category 1: 14031 equipment</p>	<p>Communication aids/assistive technology aids means an item, piece of equipment or product system, whether acquired commercially, modified or customized, that is used to increase, maintain or improve functional capabilities of children at home, work and in the community. Assistive technology service means a service that directly assists a child/youth in the selection, acquisition, or use of an assistive technology device. Assistive technology includes:</p>	<p>Agency – Providers of Communication Aids</p> <ul style="list-style-type: none"> • Communication aids vendors must be Medicaid certified providers. • Providers of systems or devices such as adaptive aids shall ensure that all items meet all the applicable standards of manufacture, safety, design and installation such as Underwriters

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	HIPAA: E1399	and technology Category 2: 17 other services Sub-Category 2: 17020 interpreter	<p>a. The evaluation of the assistive technology needs of a child, including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the child in the customary environment of the child;</p> <p>b. Services consisting of purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices for children;</p> <p>c. Services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing or replacing assistive technology devices;</p> <p>d. Coordination and use of necessary therapies, interventions or services with assistive technology devices, such as therapies, intervention or services, associated with other services in the service plan;</p> <p>e. Training or technical assistance for the child/youth, or where appropriate, the family members, guardians, advocates or authorized representatives of the child; and</p> <p>f. Training or technical assistance for professionals or other individuals, who provide services to, employ or are otherwise substantially involved in the major life functions of children.</p> <p>Assistive technology includes communication aids that are devices or services needed to assist children with hearing, speech, communication or vision impairments. These items or services assist the individual to effectively communicate with service providers, family, friends and the general public; decrease reliance on paid staff; increase personal safety; enhance independence; and improve social and emotional well-being.</p> <p>Communication aids include any device that addresses these objectives such as augmentative and alternative communication systems, hearing or speech amplification devices, aids and assistive devices, interpreters, and cognitive retraining aids and the repair and/or servicing of such systems. Communication aids also include electronic technology such as tablets or mobile devices and related software that assist with communication, when the use provides assistance to a person who needs such assistance due to her/her disabilities. Applications for mobile devices or other technology also are covered under this service, when the use is primarily medical in nature or provides assistance to a person who needs such assistance due to his/her disabilities. This list is intended to be illustrative and is not exhaustive.</p> <p>Interpreter services are provided to people with hearing impairments and who require sign language translation to effectively communicate with people in the community, employees or others. Interpreters provide sign language services for participants with hearing impairments.</p> <p>Electronic devices must meet UL or FCC standards.</p>	<p>Laboratory and Federal Communication Commission.</p> <p>Individual – Individual Interpreters</p> <ul style="list-style-type: none"> Individual interpreters must be on the state or national interpreter registry.

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			<p>Individual interpreters must be on the state or national interpreter registry.</p> <p>Limitations, Exclusions, Frequency</p> <ul style="list-style-type: none"> • CLTS Waiver funds may only be used for interpreter services when it is not the responsibility of the provider or another party to provide this service. • Excludes interpreter services that are otherwise available, including for communication with the county waiver agency, its contractors or other health care professionals, which are required to provide interpreter services under the State of Wisconsin’s civil right compliance requirements, as part of their rate. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	
5	<p>Child Care Services</p> <p>SPC: 101 HIPAA:</p>	<p>Category 1: 04 day Services</p> <p>Sub-Category 1: 04020 day habilitation</p> <p>Category 2: 04 Day Services</p> <p>Sub-Category 2: 04070 community integration</p>	<p>Child Care services includes the provision of supplementary child care staffing necessary to meet the child’s exceptional care needs above and beyond the cost of basic child care that all families with young children may incur.</p> <p>Child care services may include supplementary supports and supervision services to address exceptional emotional or behavioral needs, or physical or personal care needs for eligible participants.</p> <p>This covered child care waiver service may include supplementary supports and supervision services to address exceptional physical, emotional, behavioral or personal care needs of a child. Child care waiver services may include, but are not limited to services offered by the Department of Children and Families (DCF) licensed or certified family day care, group day care and</p>	<p>Agency – Family Child Care Center</p> <ul style="list-style-type: none"> • (DCF 250) Providers are required to have specialized training related to the child’s unique needs in order to effectively address the needs of each child served in a particular program, and to ensure their health, safety and welfare. If these unique needs are generally related to emotional and behavioral needs the providers must have training specific to the child’s needs and specific psychiatric/behavioral treatment plan. • Staff in a child care setting who work directly with children must have a combination of one year of training in child development or one

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			<p>day camps. In addition, child care services may be delivered by providers chosen by the parent/guardian that meet the DHS child care waiver training and work experience qualification requirements.</p> <p>CLTS waiver funding may be used to cover costs for child care services when a child has aged out of his or her traditional child care settings (typically up to age 12), but due to the child’s disability continues to require care or supervision when the parent/guardian is working or training. Examples include school and community-based settings that children of that age typically participate (e.g., after school programs, 4-H clubs, family residence etc.). The entire cost of child care for participants age 12 years and over may be covered under the CLTS Waiver Program.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • Excludes any service that falls under the definition of daily living skills training, supportive home care, vocational futures planning, mentoring or respite care. • This service excludes the basic cost of day care unrelated to a child’s disability that may be needed by parents or regular caregivers to allow them to work, or participate in educational or vocational training programs. The “basic cost of day care” means the rate charged by and paid to a child care center for children who do not have special needs. The basic cost of child care does not include the provision of supplementary staffing. This cost may be covered by this service. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>year experience working in a program serving children.</p> <p>Agency – Group Child Care Center</p> <ul style="list-style-type: none"> • (DCF 251) Providers are required to have specialized training related to the child’s unique needs in order to effectively address the needs of each child served in a particular program, and to ensure their health, safety and welfare. If these unique needs are generally related to emotional and behavioral needs the providers must have training specific to the child’s needs and specific psychiatric/behavioral treatment plan. • Staff in a Child Care setting for children who work directly with children must have a combination of one year of training in child development or one year experience working in a program serving children. <p>Individual – Certified Child Care Provider</p> <ul style="list-style-type: none"> • (DCF 202) Providers are required to have specialized training related to the child’s unique needs in order to effectively address the needs of each child served in a particular program, and to ensure their health, safety and welfare. If these unique needs are generally related to emotional and behavioral needs the providers must have training specific to the child’s needs and specific psychiatric/behavioral treatment plan. <p>Individual – Parent/Guardian Selected Provider</p> <ul style="list-style-type: none"> • Providers that are selected by the parent/guardian that are not licensed or certified by DCF must complete appropriate training, as approved by DHS, related to the child’s unique needs to effectively address each child being served and to ensure their health, safety and welfare. If the child’s unique needs are generally related to emotional and behavioral needs the providers must have training specific to the child’s approved behavioral treatment plan. In addition, the provider must have one

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6	Children’s Foster Care SPC: 203 HIPAA: H0041	Category 1: 02 round-the-clock services Sub-Category 1: 02011 group living, residential habilitation	<p>A Foster Home is a family-oriented residence operated by a person licensed under s.48.62 of the Wisconsin Statutes and DCF 56 of the Wisconsin Administrative Code as a Foster Home.</p> <p>This service includes supplementary intensive supports and supervision services beyond the maintenance payment made to foster parents and is to address exceptional emotional or behavioral needs, or physical or personal care needs.</p> <p>Limitations, Exclusions, and Frequency</p> <ul style="list-style-type: none"> • This service excludes the cost of room and board provided by the foster home provider. CLTS funding cannot supplant IV-E funding. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>year of experience in working in a program that serves children.</p> <p>Individual – Individual Family Foster Provider</p> <ul style="list-style-type: none"> • (§48.62, Wisconsin Statutes, DCF 56, Administrative Code) All foster care providers must have specialized training related to the child’s unique needs in order to effectively address the needs of each child served in a particular home and to ensure the child’s health, safety and welfare. If these unique needs are generally related to emotional and behavioral needs, then the foster care provider must have training specific to the child’s needs and specific psychiatric/behavioral treatment plan. If these unique needs are generally related to physical, medical and personal care the provider is responsible for implementing specific activities or treatments as outlined in a medical plan of care. <p>Agency – Level 5 Exceptional Foster Home</p> <ul style="list-style-type: none"> • (§48.62, Wisconsin Statutes, DCF 56, Administrative Code) All foster home providers must have specialized training related to the child’s unique needs in order to effectively address the needs of each child served in a particular home and to ensure the child’s health, safety and welfare. If these unique needs are generally related to emotional and behavioral needs, then the foster home provider must have training specific to the child’s needs and specific psychiatric/behavioral treatment plan. If these unique needs are generally related to physical, medical and personal care the provider is responsible for implementing specific activities or treatments as outlined in a medical plan of care.
7	Community Integration Services SPC: 514.00 HIPAA: H2022	Category 1: 04 day services Sub-category 1: 04020 day habilitation	<p>Community Integration Services include services and supports that are identified by the child/parent and the multidisciplinary team as necessary to support a child and family within a community setting based on their strengths and needs. Community Integration services programs benefits families with children who have mental health and/or behavioral concerns by providing intensive case coordination and individualized community based services. Community Integration Services are services designed to provide a</p>	<p>Agency – Social Worker</p> <ul style="list-style-type: none"> • Chapter 457 Wisconsin Statutes <p>Agency – Daily Living Skills Training</p> <ul style="list-style-type: none"> • Providers of daily living skills training must have a minimum of two years experience working with the target population. However, the county

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		<p>Category 2: 04 day services</p> <p>Sub-category 2: 04070 community integration</p>	<p>bundled array of services that extends beyond the traditional financial and geographic boundaries to develop a creative and flexible continuum of care. Typical services include; daily living skills, mentoring, parent education and training, community integration activities and behavior interventions, development and nurturing of natural supports, transportation and respite services. The outcome of this program is to assist, empower and build upon the strengths of the child and family or order that the child can be fully integrated into the community with their family.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • The minimum service requirements are that providers shall attend quarterly team reviews or sooner (or more frequent if requested) if requested by the SSC that would include the child parent or responsible person and child (if deemed appropriate) relevant service provider agency staff/supervisor (when applicable), the overseeing SSC and that person’s supervisor. • Community Integration providers shall complete a written report every six months or sooner if the child’s condition changes or warrants and updated progress towards and identified outcome that details the participant’s past and current level of functioning, as well as the intended outcome and obstacles that stand in the way of those outcomes. This report shall be provided to the county waiver agency SSC. • Excludes experimental or adverse treatments as defined by the Medicaid State Plan. • Excludes residential services as part of the community integration program see relevant residential service definitions foster care or adult family care or institutional respite. • If providers are transporting a child, the county waiver agency must have written documentation on file that the provider has a current valid driver’s license, current liability insurance coverage and the vehicle is mechanically sound as defined under the Transportation services standards. The cost of transportation may be included in the rate paid to the provider of this service, or may be covered and reimbursed under transportation service, but not both. All providers shall ensure that all standards described in the Transportation service are met. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education 	<p>waiver agency may employ qualified providers who are less experienced if the waiver agency ensures the provider receives comprehensive participant specific training to enable them to competently work with the participant to meet the objectives outlined in the care plan.</p> <ul style="list-style-type: none"> • In addition to the other listed qualifications and training, the provider must meet qualifications and training as described in the HCBS Waivers Manual. <p>Individual – Individual Provider</p> <ul style="list-style-type: none"> • Providers of daily living skills training must have a minimum of two years experience working with the target population. However, the county waiver agency may employ qualified providers who are less experienced if the waiver agency ensures the provider receives comprehensive participant specific training to enable them to competently work with the participant to meet the objectives outlined in the care plan. • In addition to the other listed qualifications and training, the provider must meet qualifications and training as described in the HCBS Waivers Manual.

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			<p>services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	
8	<p>Consumer Education and Training</p> <p>SPC: 113.00 HIPAA: S9445</p>	<p>Category 1: 09 caregiver support</p> <p>Sub-Category 1: 09020 caregiver counseling and/or training</p>	<p>The provision of consumer education and training services helps the waiver participant acquire the skills needed to exercise control and responsibility over their other supportive services. Covered expenses may include enrollment fees, books and other educational materials and transportation related to participation in training courses, conferences and other similar events that address the objectives of this service category.</p> <p>This service includes education and training for participants, their parents/guardians or caregivers that is directly related to building or acquiring the participant’s skills as described in the definition above.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service excludes payment for hotel and meal expenses while participants or their legal representatives attend allowable training/education events. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>Individual - Any persons appropriately qualified as approved by the State and as related to the unique service being provided to the target group</p> <p>Agency - Any agency appropriately qualified as approved by the State and as related to the unique service being provided to the child</p> <ul style="list-style-type: none"> • Each provider must have demonstrated skills related to the specific area of training and the applicability of that information to children with disabilities and their families.

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9	<p>Counseling and Therapeutic Services</p> <p>SPC: 507.03 HIPAA: G0716 HIPAA: T2036 HIPAA: T2037</p>	<p>Category 1: 11 other health and therapeutic services</p> <p>Sub-Category 1: 11040 nutrition consultation</p> <p>Category 2: 11 other health and therapeutic services</p> <p>Sub-Category 2: 11020 health assessment</p> <p>Category 3: 11 other health and therapeutic Services</p> <p>Sub-Category 3: 11130 other therapies</p>	<p>Counseling and therapeutic services includes the provision of professional evaluation and consultation services to participants identified needs for physical, personal, social, cognitive, developmental, emotional, or substance abuse services. The goal of counseling and therapeutic services is to maintain or improve participant health, welfare or functioning in the community. The therapy service may be provided in a natural setting or in a service provider’s office. Includes therapies provided by state licensed or certified medical professionals which are not available under the Medicaid State Plan. Providers of counseling and therapeutic services shall deliver services limited to their areas of formal education and training, as directed by their professional code of ethics.</p> <p>Any counseling or therapeutic service funded by the CLTS Waiver Program must address an individual's assessed need and be directly related to a therapeutic goal.</p> <p>Services may include assistance with interpersonal relationships, music therapy, art therapy, hippotherapy, equine assisted therapy, and day/summer camp. Counseling and therapeutic services must meet clearly defined outcome, be proven effective for the child’s condition or outcome and be cost effective.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • Counseling and therapeutic supports and services may not be experimental or aversive in nature nor may they otherwise jeopardize the health and safety of the participant. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. In addition, the CLTS Waiver Program is the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of 	<p>Individual - Other persons appropriately qualified as approved by the State and as related to the unique service being provided</p> <ul style="list-style-type: none"> • Providers of counseling and therapeutic services shall maintain current state licensure or certification in their field of practice. Providers of counseling and therapeutic services shall provide services limited to their areas of formal education and training, as directed by their professional code of ethics. Services provided by trained technicians, therapy assistants or other specially trained persons who do not require state licensure or certification must be reviewed, authorized, and endorsed by a licensed or certified professional. <p>Individual – Art Therapist</p> <ul style="list-style-type: none"> • (Chapter 440 Wisconsin Statutes) Providers of counseling and therapeutic services shall maintain current state licensure or certification in their field of practice. Providers of counseling and therapeutic services shall provide services limited to their areas of formal education and training, as directed by their professional code of ethics. Services provided by trained technicians, therapy assistants or other specially trained persons who do not require state licensure or certification must be reviewed, authorized, and endorsed by a licensed or certified professional. <p>Individual – Music Therapist</p> <ul style="list-style-type: none"> • (Chapter 440 Wisconsin Statutes) Providers of counseling and therapeutic services shall maintain current state licensure or certification in their field of practice. Providers of counseling and therapeutic services shall provide services limited to their areas of formal education and training, as directed by their professional code of ethics. Services provided by trained technicians, therapy assistants or other specially trained persons who do not require state licensure or certification must be reviewed, authorized, and endorsed by a licensed or certified professional.

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			these other funding sources.	<p>Agency – Home Health Agency</p> <ul style="list-style-type: none"> (Chapter 50.49 Wisconsin Statutes; 42 CFR 484 Code of Regulations; Administrative Rules DHS 131 and DHS 12 including Appendix A) Providers of counseling and therapeutic services shall maintain current state licensure or certification in their field of practice. Services provided by trained technicians, therapy assistants or other specially trained persons who do not require state licensure or certification, must be authorized by a medical professional. <p>Individual – Hippotherapist</p> <ul style="list-style-type: none"> (Chapter 440 Wisconsin Statutes) Providers of counseling and therapeutic services shall maintain current state licensure or certification in their field of practice. Providers of counseling and therapeutic services shall provide services limited to their areas of formal education and training, as directed by their professional code of ethics. Services provided by trained technicians, therapy assistants or other specially trained persons who do not require state licensure or certification must be reviewed, authorized, and endorsed by a licensed or certified professional. <p>Individual – Equine-Assisted Therapist</p> <ul style="list-style-type: none"> (Chapter 440 Wisconsin Statutes) Providers of counseling and therapeutic services shall maintain current state licensure or certification in their field of practice. Providers of counseling and therapeutic services shall provide services limited to their areas of formal education and training, as directed by their professional code of ethics. Services provided by trained technicians, therapy assistants or other specially trained persons who do not require state licensure or certification must be reviewed, authorized, and endorsed by a licensed or certified professional. <p>Agency – Others Appropriately Qualified</p> <ul style="list-style-type: none"> Providers of counseling and therapeutic

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				<p>services shall maintain current state licensure or certification in their field of practice. Providers of counseling and therapeutic services shall provide services limited to their areas of formal education and training, as directed by their professional code of ethics. Services provided by trained technicians, therapy assistants or other specially trained persons who do not require state licensure or certification must be reviewed, authorized, and endorsed by a licensed or certified professional.</p>
10	<p>Daily Living Skills Training</p> <p>SPC: 110.00 HIPAA: T2012 HIPAA: T2013 HIPAA: T2017 HIPAA: T2019</p>	<p>Category 1: 08 home-based services</p> <p>Sub-Category 1: 08010 home-based habilitation</p>	<p>Daily living skills training services provide education and skill development or training to improve an individual's ability to independently perform routine daily activities and effectively utilize community resources. Services are instructional, focused on skill development and are not intended to provide substitute task performance. This service includes funding for educational or training services that are of a direct benefit to the child.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>Agency – Providers of Daily Living Skills Training</p> <ul style="list-style-type: none"> • Providers of daily living skills training must have a minimum of two years’ experience working with the target population. However, the waiver agency may employ qualified providers who are less experienced if the waiver agency ensures the provider receives comprehensive participant-specific training to enable them to competently work with the participant to meet the objectives outlined in the care plan. <p>Individual - Other persons appropriately qualified as approved by the State and as related to the unique service being provided</p> <ul style="list-style-type: none"> • Providers of daily living skills training must have a minimum of two years’ experience working with the target population. • However, providers who are less experienced that have received comprehensive participant-specific training to enable them to competently work with the participant and meet the objectives outlined in the care plan can meet the daily living skills training qualifications. • Providers shall ensure Daily Living Skills Training staff are knowledgeable in the adaptation and use of specialized equipment and in the modification of participant environments and that these staff complete regular training/continuing education coursework to maintain/update their level of expertise.
11	Day Services	Category 1:	Day Services are the provision of services that provide children with regularly	Agency – Group Child Care Center

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	SPC: 706.20 HIPAA: T2027	04 day services Sub-Category 1: 04020 day habilitation Category 2: 04 day services Sub-Category 2: 04070 community integration	<p>scheduled activities for part of the day. Services include coordination and intervention directed at skill development and maintenance, physical health promotion and maintenance, language development, cognitive development, socialization, social and community integration, and domestic and economic management. Services are typically provided up to five days per week in a non-residential setting and may occur in a single physical environment or in multiple environments, including natural settings in the community. Coordination activities may involve the implementation of components of the child's family-centered and individualized service plans and may involve family, professionals, and others involved with the child as directed by the child's plan.</p> <p>Limitations, Exclusions, and Frequency</p> <ul style="list-style-type: none"> Excludes any service that falls under the definition of daily living skills training, supportive home care, vocational futures planning, child care, mentoring or respite care. Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin's income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<ul style="list-style-type: none"> (DCF 251) Providers are required to have specialized training related to the child's unique needs in order to effectively address the needs of each child served in a particular program, and to ensure their health, safety and welfare. If these unique needs are generally related to emotional and behavioral needs the providers must have training specific to the child's needs and specific psychiatric/behavioral treatment plan. Staff in a Child Care setting who works directly with children must have a combination of one year of training in child development or 1 year experience working in a program serving children. <p>Agency – Family Child Care Center</p> <ul style="list-style-type: none"> (DCF 20) Providers are required to have specialized training related to the child's unique needs in order to effectively address the needs of each child served in a particular program, and to ensure their health, safety and welfare. If these unique needs are generally related to emotional and behavioral needs the providers must have training specific to the child's needs and specific psychiatric/behavioral treatment plan. Staff in a Child Care setting for Children who work directly with children must have a combination of one year of training in child development or 1 year experience working in a program serving children. <p>Individual - Any persons appropriately qualified as approved by the State and as related to the unique service being provided to the child</p> <ul style="list-style-type: none"> Child specific training.
12	<p>Financial Management / Fiscal Intermediary Services</p> <p>SPC: 619.00</p>	Category 1: 12 services supporting self-direction Sub-Category 1: 12010 financial management	<p>Financial Management Services are those services that assist participants and their families to manage waiver service funding. This service involves a person or agency paying service providers after the county waiver agency and/or the participant's, parent/guardian has authorized payment for delivered services included in the participant's approved Individualized Service Plan (ISP). Financial Management Service providers, sometimes referred to as fiscal intermediaries, are organizations or individuals that issue payments for personnel costs, tax withholding, unemployment insurance,</p>	<p>Individual – Accountant</p> <ul style="list-style-type: none"> (Chapter 442 Wisconsin Statutes) Providers must be an agency, unit of an agency or individual that is qualified to provide all of the financial services involved. Providers must have training and experience in accounting or bookkeeping. The Financial Management Services provider must be bonded.

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	rep payee – follow-up services, annual review HIPAA: 99499 15 minutes HIPAA: T2040 rep payee HIPAA: T2041	services in support of self-direction	<p>worker’s compensation, health insurance and other taxes and benefits appropriate for the specific provider consistent with the individuals ISP. The financial management service provider or fiscal intermediary serves upon the authorization of the county waiver agency and is made available to the participant/family to ensure appropriate compensation is issued to providers of services. The Financial Management Services provider is accountable for insuring compliance with all federal and state laws associated with tax withholding and all other employee benefits.</p> <p>This service also includes paying bills authorized by the participant or their guardian, keeping an account of disbursements and assisting the participant to ensure sufficient funds are available for his or her needs.</p> <p>Limitations, Exclusions, and Frequency</p> <ul style="list-style-type: none"> Excludes payments to court-appointed guardians or court-appointed protective payees if the court has directed them to perform any of these functions. Excludes payment for the cost of room and board. This service may not duplicate any service that is provided under another waiver service category. Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>Agency – Fiscal Intermediary Agency</p> <ul style="list-style-type: none"> Providers must be an agency, unit of an agency or individual that is qualified to provide all of the financial services involved. Providers must have training and experience in accounting or bookkeeping. The Financial Management Services provider must be bonded. <p>Individual - Other persons appropriately qualified as approved by the State and as related to the unique service being provided to the child</p> <ul style="list-style-type: none"> Providers must be an agency, unit of an agency or individual that is qualified to provide all of the financial services involved. Providers must have training and experience in accounting or bookkeeping. The Financial Management Services provider must be bonded.
13	<p>Home Modifications</p> <p>SPC: 112.56 HIPAA: S5165</p>	<p>Category 1: 14 equipment, technology, and modifications</p> <p>Sub-Category 1: 14020 home and/or vehicle</p>	<p>Home modifications include services designed to assess the need for, arrange for and provide modifications and/or improvements to a child’s residence that address a need identified to improve health, safety, accessibility or provide for the maximization of independent functioning. Home modifications are generally permanent fixtures/changes to a physical structure. Home modifications include the cost of the permit to authorize the changes, the materials, and services needed to complete the installation of specific equipment, the modification of the physical structure or the</p>	<p>Individual - Other persons appropriately qualified as approved by the State and as related to the unique service being provided</p> <ul style="list-style-type: none"> The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building

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		accessibility adaptations	<p>reconfiguration of essential systems within the home.</p> <p>Home modifications may include adaptations, including, but not limited to:</p> <ul style="list-style-type: none"> • Ramps (fixed), ramp extensions and platforms • Porch/stair lifts • Doors/doorways, door handles/door opening devices • Adaptive door bells, locks/security items or devices • Plumbing, electrical modifications related to adaptations • Medically necessary heating, cooling or ventilation systems • Shower, sink, tub and toilet modifications • Faucets/water controls • Accessible cabinetry, counter tops or work surfaces • Grab bars (see exception below), handrails, accessible closets • Smoke/fire alarms and fire safety adaptations • Adaptive lighting/light switches • Flooring and/or floor covering to address health and safety • Wall protection <p>Modifications not specifically described above may be approved if the item or service meets the definition and the standards for allowable home modifications. Home modifications increase self-reliance and independence, or ensure safe, accessible means of ingress/egress to a participant's living quarters, or otherwise provide safe access to rooms, facilities or equipment within the participant's living quarters, or adjacent buildings that are part of the residence.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • Excludes any service that falls under the definition of daily living skills training, supportive home care, vocational futures planning, child care, mentoring or respite care. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin's income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. 	<p>trades.</p> <ul style="list-style-type: none"> • All modifications must be made in accordance with any applicable local and state housing or building codes and are subject to any inspection required by the municipality responsible for administration of the codes. <p>Individual – Plumber</p> <ul style="list-style-type: none"> • (Chapter 443 Wisconsin Statutes) The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building trades. • All modifications must be made in accordance with any applicable local and state housing or building codes and are subject to any inspection required by the municipality responsible for administration of the codes. <p>Individual – Electrician</p> <ul style="list-style-type: none"> • (Chapter 443 Wisconsin Statutes) The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building trades. • All modifications must be made in accordance with any applicable local and state housing or building codes and are subject to any inspection required by the municipality responsible for administration of the codes. <p>Agency – Independent Living Center</p> <ul style="list-style-type: none"> • The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building trades. • All modifications must be made in accordance with any applicable local and state housing or

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			<p>Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	<p>building codes and are subject to any inspection required by the municipality responsible for administration of the codes.</p> <p>Agency – Contractor</p> <ul style="list-style-type: none"> The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building trades. All modifications must be made in accordance with any applicable local and state housing or building codes and are subject to any inspection required by the municipality responsible for administration of the codes. <p>Individual – Heating and Air Conditioning</p> <ul style="list-style-type: none"> (Chapter 443 Wisconsin Statutes) The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building trades. All modifications must be made in accordance with any applicable local and state housing or building codes and are subject to any inspection required by the municipality responsible for administration of the codes. <p>Agency – Building Supply Company</p> <ul style="list-style-type: none"> The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building trades. All modifications must be made in accordance with any applicable local and state housing or building codes and are subject to any inspection required by the municipality responsible for administration of the codes.

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				<p>Individual – Engineer</p> <ul style="list-style-type: none"> • (Chapter 433 Wisconsin Statutes) The providers and designers of any home modifications must meet all of the applicable state and local requirements for professional licensure for building contractors, plumbers, electricians, engineers or any other building trades. • All modifications must be made in accordance with any applicable local and state housing or building codes and are subject to any inspection required by the municipality responsible for administration of the codes.
14	<p>Housing Counseling</p> <p>SPC: 610 HIPAA: T2013</p>	<p>Category 1: 17 other services</p> <p>Sub-Category 1: 17030 housing consultation</p>	<p>Housing Counseling is the provision of services to waiver participants to provide comprehensive guidance on housing opportunities available to meet their needs and preferences. This service includes guidance on how a participant may gain access to available public and private resources to assist the person to obtain or retain safe, decent, accessible, and affordable housing and avoid institutionalization.</p> <p>Housing Counseling includes planning, guidance and assistance in accessing resources related to home ownership, financing, accessibility and architectural services and consultation, as well as health and safety evaluations of physical property.</p> <p>The provider delivers consultation by meeting with the participant and their family and collecting individual specific information. This information is used to provide guidance and assistance which is appropriate to the individual situation.</p> <p>The depth of knowledge required to provide this service will typically include an expertise in a housing-related field and is often found in providers who have background and expertise in housing and disabilities.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education 	<p>Agency – Housing Counseling Agency</p> <ul style="list-style-type: none"> • A qualified provider must be an agency or unit of an agency that provides Housing Counseling as a regular part of its mission. • Counseling must be provided by staff with specialized training and experience in any of the following housing issues; home ownership, both pre and post purchase, home financing and refinancing, home maintenance, repair and improvements including abating environmental hazards, rental counseling, not including any cash assistance, accessibility and architectural services and consultation, weatherization evaluation and assistance in accessing these services, lead-based paint abatement evaluation, low-income energy assistance evaluation, access to transitional or permanent housing, accessibility inventory design, health and safety evaluations of physical property, debt/credit counseling, and homelessness and eviction prevention counseling.

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			<p>services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	
15	<p>Mentoring</p> <p>SPC: 513 HIPAA: H0038</p>	<p>Category 1: 04 day services</p> <p>Sub-category 1: 04020 day habilitation</p> <p>Category 2: 04 day services</p> <p>Sub-category 2: 04070 community</p>	<p>Mentoring services are supports intended to improve the CLTS waiver participant’s ability to interact in their community in socially appropriate ways. The mentor provides the participant with such services as peer interaction, social/recreational and employability skill-building opportunities. The mentor supports the participant by practicing, modeling, guiding and shadowing them in the community. Interventions are spontaneous and in real-life situations, rather than in a classroom-type environment. Covered expenses may include meals, admission fees, and transportation for the mentor related to participation in community events that address the objectives and meet the identified outcomes of the child’s service plan.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>Individual – Mentors</p> <ul style="list-style-type: none"> • Providers of mentoring services must be 18 years or older. The waiver agency must ensure that the provider receives child specific training provided by the agency, SSC and parent/guardian, and there must be documentation of this training in the child’s record. • Individual mentors must receive child specific training provided by the case manager, service coordinator, parent, guardian, and/or other relevant professional who is knowledgeable of the participant’s daily needs. Providers shall be involved in frequent and ongoing communication with the case manager/support and service coordinator, agency, and family, regarding child specific updates, information, and concerns. • In addition to the other listed qualifications and training, the provider must meet qualifications and training as described in the CLTS Waiver Program Manual. <p>Agency - Any agency appropriately qualified as approved by the State and as related to the unique service being provided</p> <ul style="list-style-type: none"> • Providers of mentoring services must be 18 years or older. The waiver agency must ensure that the provider receives child specific training provided by the agency, SSC and parent/guardian, and there must be documentation of this training in the child’s record. Providers shall be involved in frequent and ongoing communication with the SSC,

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				agency, and family, regarding child specific updates, information, and concerns. <ul style="list-style-type: none"> In addition to the other listed qualifications and training, the provider must meet qualifications and training as described in the CLTS Waiver Program Manual.
16	Nursing Services (Independent/Private Duty Nursing, Skilled Nursing) SPC: 710.00 skilled nursing, RN HIPAA: S9123 skilled nursing, LPN HIPAA: S9124	Category 1: 05 nursing Sub-category 1: 05020 skilled nursing	<p>Nursing services are those medically necessary, skilled nursing services that may only be provided safely and effectively by a nurse practitioner, a registered nurse, or a licensed practical nurse working under the supervision of a registered nurse. The nursing services provided must be within the scope of the Wisconsin Nurse Practice Act and are not otherwise available to the participant under the Medicaid state plan or Healthcheck/EPSDT. Nursing services may include periodic assessment of the participant’s medical condition when the condition requires a skilled nurse to identify and evaluate the need for medical intervention or to monitor and/or modify the medical treatment services provided by non-professional care providers. Services may also include regular, ongoing monitoring of a participant’s fragile or complex medical condition as well as the monitoring of a participant with a history of noncompliance with medication or other medical treatment needs. The need for skilled nursing services must be recommended or prescribed by the participant’s physician and reviewed by the support and service coordination.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> This service may not duplicate any service that is provided under another waiver service category. Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. In addition, the CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>Individual – Registered Nurse</p> <ul style="list-style-type: none"> Chapter 441 Wisconsin Statutes <p>Agency – Home Health Agency</p> <ul style="list-style-type: none"> 42 CFR 484 Code of Federal Regulations; 50.49, Wisconsin Statutes; DHS 131, Administrative Code <p>Individual – Nurse Practitioner</p> <ul style="list-style-type: none"> Chapter 441 Wisconsin Statutes <p>Individual – Licensed Practical Nurse</p> <ul style="list-style-type: none"> Chapter 441 Wisconsin Statutes
17	Personal Emergency	Category 1:	Personal emergency response system (PERS) provides a direct telephonic,	Individual – Community Based Electronic

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	<p>Response System (PERS)</p> <p>SPC: 112.46</p> <p>installation and testing HIPAA: S5160</p> <p>monthly service fee HIPAA: S5161</p>	<p>14 equipment, technology, and modifications</p> <p>Sub-Category 1: 14010 personal emergency response system (PERS)</p>	<p>global positioning system (GPS) or other electronic communications link between someone living in the community and health professionals to secure immediate response and assistance in the event of a physical, emotional or environmental emergency. This service may include devices and services necessary for operation of PERS when otherwise not available. This service may also include installation, upkeep and maintenance of devices or systems as appropriate. Electronic devices must meet Underwriters Laboratories® (UL) Standards. Telephonic devices must meet Federal Communications Commission (FCC) regulations.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. <p>Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	<p>Communications Unit</p> <ul style="list-style-type: none"> • Underwriter’s Laboratory and/or Federal Communication Commission or equivalent standard. <p>Individual – Telephone service including cellular</p> <ul style="list-style-type: none"> • Underwriter’s Laboratory and/or Federal Communication Commission or equivalent standard.
18	<p>Relocation Services</p> <p>SPC: 106 HIPAA:</p>	<p>Category 1: 16 Community Transition Services</p> <p>Sub-Category 1: 16010 Community Transition Services</p>	<p>Relocation services are services and essential items needed to establish a community living arrangement for children who are relocating from an institution, foster home or who are moving out of the family home to a less restrictive or independent setting. This service includes person-specific services, supports or goods that will be put in place in preparation for the child/youth relocation to a safe, accessible and affordable community living arrangement.</p> <p>Relocation services may include the purchase of necessary furniture, telephone(s), cooking/serving utensils, basic cleaning equipment, household supplies, bathroom and bedroom furnishings and kitchen appliances not otherwise included in a rental arrangement if applicable.</p> <p>Relocation services may include the payment of a security deposit, utility</p>	<p>Agency – Moving companies, public utilities, real estate agencies, vendors of home furnishings</p> <ul style="list-style-type: none"> • Reputable contractor with compliance history. Compliance history with Wisconsin or any other state’s licensing requirements or federal certification requirements, including any license revocation or denial. Fraud or substantial or repeated violations of applicable laws and rules in the operation of any business. Financial history and financial stability, including: <ul style="list-style-type: none"> – Financial history and financial viability of the owner or related organization. – Outstanding debts or amounts due to the

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			<p>connection costs and telephone installation charges. This service includes payment for moving the child/youth’s personal belongings to the new community living arrangement and general cleaning and household organization services needed to prepare the selected community living arrangement for occupancy.</p> <p>Limitations, Exclusions, and Frequency</p> <ul style="list-style-type: none"> • Services or items covered by this service may not be purchased more than 180 days prior to the date the child/youth relocates to the community living arrangement. Excludes the purchase of food, the payment of rent, or the purchase of leisure or recreational devices or services (e.g., television or video equipment, cable or satellite service, etc.). • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>department or other government agencies, including unpaid forfeitures and fines.</p> <p>Individual – Individual movers/individual landlords</p> <ul style="list-style-type: none"> • Provider with reputable compliance history. Compliance history with Wisconsin or any other state’s licensing requirements or federal certification requirements, including any license revocation or denial. • Fraud or substantial or repeated violations of applicable laws and rules in the operation of any business. Financial history and financial stability, including: <ul style="list-style-type: none"> – Financial history and financial viability of the owner or related organization. – Outstanding debts or amounts due to the department or other government agencies, including unpaid forfeitures and fines.
19	<p>Respite</p> <p>residential respite - day SPC: 103.22 HIPAA: H0045</p> <p>residential respite-15 min HIPAA: T1005</p> <p>institutional respite SPC: 103.24</p>	<p>Category 1: 09 caregiver support</p> <p>Sub-Category 1: 09012 respite, in-home</p> <p>Category 2: 09 caregiver support</p> <p>Sub-Category 2: 09011 respite, out of home</p>	<p>Respite care services are services provided for a child on a short-term basis to ease the child’s family or other primary caregiver(s) from daily stress and care demands. Respite care can be provided in any of the provider settings listed in the provider category section of this application.</p> <p>Limitations, Exclusions, and Frequency</p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The 	<p>Agency – Community-Based Residential Facility</p> <ul style="list-style-type: none"> • Ch. 50, Wisconsin Statutes; DHS 83, Administrative Code <p>Agency – Shelter Care Facilities</p> <ul style="list-style-type: none"> • DCF 59, Administrative Code. <p>Agency – Foster Homes</p> <ul style="list-style-type: none"> • Wisconsin Statute 48; DCF 56 Wisconsin Admin Code <p>Agency – Respite Agency</p>

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	HIPAA: 0660 home based respite SPC 103.26 other setting respite SPC: 103.99 HIPAA: T1005		<p>CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin's income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin.</p> <p>Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	<ul style="list-style-type: none"> • Training specific to meeting the person’s support and care needs. The provider shall complete required training within six months of beginning employment unless training is needed before providing service is specified in the person’s individualized service plan. Persons providing respite must meet the DHS training requirements for Supportive Home Care. This includes training on at least the following subjects pertaining to the person(s) served: <ol style="list-style-type: none"> 1. Policies, procedures, and expectations of the contract agency including training on person and provider rights and responsibilities; record keeping and reporting; and other information deemed necessary and appropriate. 2. Information about the person(s) to be served, including information specific to disabilities, abilities, needs, functional deficits, and strengths of the population to be served. This training should be person-specific for the people to be served and generally focused. 3. Recognizing and appropriately responding to all conditions that might adversely affect the person’s health and safety including how to respond to emergencies and Critical Incidents as defined in CLTS Waiver Program Manual. 4. Developing interpersonal and communications skills and appropriate attitudes for working effectively within the population to be served. These skills include: understanding the principles of person-centered services; person rights; respect for age; cultural, linguistic and ethnic differences; active listening, responding with emotional support and empathy; ethics in dealings with people including: family and other providers; conflict resolution skills; ability to deal with death and dying; and other topics relevant to the specific population to be

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				<p>served.</p> <ol style="list-style-type: none"> 5. Understanding of all confidentiality and privacy laws and rules. 6. Understanding of procedures for handling complaints. 7. Understanding of the person who needs support, including personal hygiene needs, preferences, and techniques for assisting with activities of daily living including, where relevant, bathing, grooming, skin care, transfer, ambulation, exercise, feeding, dressing, and use of adaptive aids and equipment. 8. Understanding of the specific homemaking and household services, meal planning and preparation, shopping, housekeeping techniques and proper maintenance of a clean, safe and healthy living environment. 9. Understanding the personal health and wellness-related needs of the person needing supports including nutrition, dietary needs, exercise needs, and weight monitoring and control. In addition to the other listed qualifications and training, the provider must meet qualifications and training as described in the CLTS Waiver Program Manual. <p>Agency – Group Homes for Children</p> <ul style="list-style-type: none"> • 48.67, Wisconsin Statutes ;DCF 57, Administrative Code <p>Individual – Family Child Care Center</p> <ul style="list-style-type: none"> • 250, DCF Administrative Code <p>Agency – Residential Care Center (RCC) for Children and Youth</p> <ul style="list-style-type: none"> • (§48.68 Wisconsin Statutes, DCF 52 Wisconsin Admin Code) RCC respite staff shall have respite care training designed around the unique needs related to the child’s mental health needs and the psychiatric/behavioral treatment plan or individual medical care plan of

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				<p>the child.</p> <p>Agency – Day Camps</p> <ul style="list-style-type: none"> • DCF 252 • Accredited by a nationally recognized entity • Comparable training specific to the target groups as for similar services <p>Individual – Adult Family Home</p> <ul style="list-style-type: none"> • License: Chapter 50, Wisconsin Statutes; DHS 88, Administrative Code for 3 or 4 beds • Certificate: DHS 82, Administrative Code for 1 or 2 beds. <p>Agency – Group Child Care Center</p> <ul style="list-style-type: none"> • Chapter 48, Wisconsin Statutes; DCF 251, Wisconsin Administrative Code <p>Individual - Other person appropriately qualified as approved by the State and as related to the unique service being provided</p> <ul style="list-style-type: none"> • Training specific to meeting the person’s support and care needs. The provider shall complete required training within six months of beginning employment unless training is needed before providing service is specified in the person’s individualized service plan. Persons providing respite must meet the DHS training requirements for Supportive Home Care. This includes training on at least the following subjects pertaining to the person(s) served: <ol style="list-style-type: none"> 1. Policies, procedures, and expectations of the contract agency including training on person and provider rights and responsibilities; record keeping and reporting; and other information deemed necessary and appropriate. 2. Information about the person(s) to be served, including information specific to disabilities, abilities, needs, functional deficits, and strengths of the population to be served. This training should be person-specific for the people to be

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				<p>served and generally focused.</p> <ol style="list-style-type: none"> 3. Recognizing and appropriately responding to all conditions that might adversely affect the person’s health and safety including how to respond to emergencies and Critical Incidents as defined in CLTS Waiver Program Manual. 4. Developing interpersonal and communications skills and appropriate attitudes for working effectively within the population to be served. These skills include: understanding the principles of person-centered services; person rights; respect for age; cultural, linguistic and ethnic differences; active listening, responding with emotional support and empathy; ethics in dealings with people including: family and other providers; conflict resolution skills; ability to deal with death and dying; and other topics relevant to the specific population to be served. 5. Understanding of all confidentiality and privacy laws and rules. 6. Understanding of procedures for handling complaints. 7. Understanding of the person who needs support, including personal hygiene needs, preferences, and techniques for assisting with activities of daily living including, where relevant, bathing, grooming, skin care, transfer, ambulation, exercise, feeding, dressing, and use of adaptive aids and equipment. 8. Understanding of the specific homemaking and household services, meal planning and preparation, shopping, housekeeping techniques and proper maintenance of a clean, safe and healthy living environment. 9. Understanding the personal health and wellness-related needs of the person needing supports including nutrition, dietary needs, exercise needs, and

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				weight monitoring and control. In addition to the other listed qualifications and training, the provider must meet qualifications and training as described in the CLTS Waiver Program Manual.
20	<p>Specialized Medical and Therapeutic Supplies</p> <p>SPC: 112.55 HIPAA: A9999</p>	<p>Category 1: 14 equipment, technology, and modifications</p> <p>Sub-Category 1: 14031 equipment and technology</p> <p>Category 2: 14 equipment, technology, and modification</p> <p>Sub-Category 2: 14032 supplies</p> <p>Category 1: 03 supported employment</p> <p>Sub-Category 1: 03021 ongoing supported employment, individual</p> <p>Category 2: 03 supported employment</p> <p>Sub-Category 2: 03010 job development</p>	<p>Specialized medical and therapeutic supplies include items necessary to maintain the child’s health, manage a medical or physical condition, improve functioning or enhance independence. The cost of items, or devices provided, may be in excess of the quantity of medical equipment or supplies covered under the Medicaid state plan, when coverage of the additional items or devices is denied. Items or devices provided must demonstrate direct medical or remedial benefit to the participant.</p> <p>Allowable items may include books and other therapy aids designed to augment a professional therapy or treatment plan. Room air conditioners, air purifiers, humidifiers and water treatment systems.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. In addition, the CLTS Waiver Program is the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>Agency – Medical Supply Company</p> <ul style="list-style-type: none"> • (Certified under DHS 105 Wisconsin Administrative Code) Underwriter’s Laboratory and/or Federal Communication Commission. <p>Individual - Other providers appropriately qualified as approved by the State as related to unique service being delivered to the child</p> <ul style="list-style-type: none"> • Underwriter’s Laboratory and/or Federal Communication Commission. <p>Individual – Authorized Dealers</p> <ul style="list-style-type: none"> • Underwriter’s Laboratory and/or Federal Communication Commission.
21	<p>Support and Service Coordination</p> <p>SPC: 604 HIPAA: T1016</p>	<p>Category 1: 01 case management</p> <p>Sub-Category 1:</p>	<p>CLTS Waiver Program support and service coordination is the provision of services to locate, manage, coordinate and monitor all covered supports and services, other program services, regardless of their funding source, and informal community supports for eligible children and their families. The Support and Service Coordinator, who is employed by county</p>	<p>Individual - Other Person appropriately qualified as approved by the State and as related to the unique service being provided</p> <ul style="list-style-type: none"> • A Support and Service Coordinator (SSC) shall have the skills and knowledge typically acquired

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	case management SPC: 604 HIPAA: 1017 HIPAA: T2022 HIPAA: T2022	01010 case management	<p>human/social/community departments, must assure that CLTS waiver services are delivered in accordance with program requirements.</p> <p>This service also includes assisting applicants and participants with establishing Medicaid financial, nonfinancial and functional eligibility, and all other aspects of an individual’s CLTS Waiver Program eligibility. Support and service coordination also includes assisting the participant to access Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit (known as HealthCheck in Wisconsin), Medicaid State Plan services, as well as school-based special education services through the Department of Public Instruction and rehabilitation or college and career ready services through the Department of Workforce Development, Division of Rehabilitation. County waiver agency’s Support and Services Coordinators also refer participants and their families and help facilitate access to county administered mental health, public health, and social services programs, as well as locating resources for natural supports. Support and Service Coordinators are also mandated reporters for child abuse and neglect, and as part of the county human/social/community service infrastructure, must issue referrals to county child protection and child welfare services, when warranted.</p> <p>Beyond the participant’s person-centered plan development and other monthly case management activities, the Support and Service Coordinator’s role includes the primary responsibility of assuring the participant’s health, safety and welfare. This service includes coordinating or facilitating access to all services and supports, both formal and informal, which are needed by the child and family to meet their identified outcomes. This includes locating, managing, coordinating and monitoring a full range of services and educational assessments, as well as informal supports, consistent with the child and family’s assessed needs, in a planned, coordinated, and cost effective manner. The Support and Service Coordinator assures that services are delivered in accordance with waiver program requirements, and the child’s assessed needs and outcomes. This service also includes an assessment of the family’s needs so they may adequately support their child in the home or other community setting. The Support and Service Coordinator facilitates establishing and maintaining the child and family’s individualized support system. Services provided to children include assuring effective implementation of the child and family’s support plan; developing, implementing, and updating the family-centered transition plan, and coordinating across systems, in order to meet the assessed needs.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service excludes the optional targeted case management benefit under the Medicaid State Plan. • This service may not duplicate any service that is provided under another 	<p>through a course of study and practice experience that meets requirements for state certification/licensure as a social worker and also one year experience with the target group, or through a course of study leading to a BA/BS degree in a health or human services related field and one year of experience working with persons of the specific target group for which they are employed, or through a minimum of four years experience as a long-term support SSC, or through an equivalent combination of training and experience that equals four years of long-term support practice in long-term support case management practice, or the completion of a course of study leading to a human services degree and one year of employment working with persons of the specific target group for which they are employed.</p> <p>Individual – Social Worker</p> <ul style="list-style-type: none"> • (Licensed under Chapter 457 Wisconsin Statutes and Certified under Chapter 457.09 Wisconsin Statutes) A minimum of one year of employment working with persons of the specific target group for which they are employed. A Support and Service Coordinator (SSC) shall have the skills and knowledge typically acquired through a course of study and practice experience that meets requirements for state certification/licensure as a social worker and also one year experience with the target group, or through a course of study leading to a BA/BS degree in a health or human services related field and one year of experience working with persons of the specific target group for which they are employed, or through a minimum of four years’ experience as a long-term support SSC, or through an equivalent combination of training and experience that equals four years of long-term support practice in long-term support case management practice, or the completion of a course of study leading to a human services degree and one

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			<p>waiver service category.</p> <ul style="list-style-type: none"> Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. <p>Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	<p>year of employment working with persons of the specific target group for which they are employed.</p>
22	<p>Supported Employment - Individual</p> <p>SPC: 615.00</p> <p>ongoing, coaching, work-related services</p> <p>HIPAA: H2025 HIPAA: H2026 HIPAA: T2018 HIPAA: T2019</p>	<p>Category 1: 03 supported employment</p> <p>Sub-Category 1: 03021 ongoing supported employment, individual</p> <p>Category 2: 03 supported Employment</p> <p>Sub-Category 2: 03010 job development</p>	<p>Supported Employment–Individual are the ongoing supports provided to a participant, who, because of their disabilities, need intensive ongoing support to obtain and maintain an individual job in competitive, customized or self-employment in an integrated work setting in the general workforce. A participant receiving this service shall be compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. The outcome of this service is sustained paid employment at or above minimum wage in an integrated setting in the general workforce, in a job that meets personal and career goals. Individual employment support services are individualized and may include any combination of the following activities: vocational/job-related discovery or assessment, person-centered employment planning, job placement, job development, meeting with prospective employers, job analysis, training and systematic instruction, job coaching, job supports, work incentive benefits analysis and counseling, training and work planning, transportation and career advancement services. Also included are other workplace support services not specifically related to job skill training that enable the youth to be successful in integrating into the job setting.</p> <p>Individual employment supports may include support to maintain self-employment, including home-based self-employment. Individual employment supports may also include services and supports that assist the participant in achieving self-employment; however, Assistance for self-employment may include:</p> <ul style="list-style-type: none"> aid to the participant in identifying potential business opportunities; 	<p>Individual – On the job support person</p> <ul style="list-style-type: none"> The provider must have the ability and qualifications to provide this service, demonstrated in at least one of the following ways: <ul style="list-style-type: none"> Holding the Certified Employment Support Professional accreditation. Meeting the ASPE Quality Indicators for Supported Employment Personnel. Comparable experience for a qualified individual, including a minimum of two years of experience working with the target population providing supported employment. However, a member self-directing this service may employ qualified persons with less experience. In that event, the PHIP and member shall ensure that the individual provider has the member –specific competencies to effectively provide the service. All providers of transportation shall ensure that the provider qualifications for specialized (community) transportation are met. In addition, the individual provider must comply with all applicable occupational health and safety standards of the federal Occupational

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			<ul style="list-style-type: none"> • assistance in the development of a business plan, including identifying potential sources of business financing and other assistance in developing and launching a business; • identification of the supports that are necessary in order for the participant to operate the business; and • ongoing assistance, counseling and guidance once the business has been launched. <p>Payment for individual employment support services may be based on different methods including, but not limited to, co-worker support models, payments for work milestones, such as length of time on the job, or number of hours the member works.</p> <p>The cost of transportation for a participant to get to and from a supported employment site may be included in the reimbursement paid to the supported employment provider, or may reimbursed under specialized (community) transportation, but not both.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<p>Safety and Health Administration (OSHA).</p> <p>Agency – Supported Employment Agency</p> <ul style="list-style-type: none"> • The provider must have the ability and qualifications to provide this service, demonstrated in at least one of the following ways: <ul style="list-style-type: none"> – Accreditation by a nationally recognized accreditation agency. – Existence of a current contract with the Division of Vocational Rehabilitation (DVR) for provision of supported employment services. – Submission of written documentation that evidences that the agency meets all DVR Technical Specifications related to supported employment. – Comparable experience for a qualified entity, including a minimum two years of experience working with the target population providing integrated employment services in the community. • In addition, the provider must comply with all applicable occupational health and safety standards of the federal Occupational Safety and Health Administration (OSHA).
23	<p>Supported Employment – Small Group</p> <p>SPC: 615.20 HIPAA:</p>	<p>Category 1: 03 supported employment</p> <p>Sub-Category 1: 03022 ongoing</p>	<p>Supported Employment - Small Group services are services and training activities provided in a regular business, industry or community setting for groups of two (2) to eight (8) workers with disabilities. Examples include mobile crews and other business-based workgroups employing small groups of workers with disabilities in employment in the community. Small group employment support must be provided in a manner that promotes integration</p>	<p>Individual – On the Job support Person</p> <ul style="list-style-type: none"> • The provider must have the ability and qualifications to provide this service, demonstrated in at least one of the following ways: <ul style="list-style-type: none"> – Holding the Certified Employment Support

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		<p>supported employment, group</p> <p>Category 2: 03 supported employment</p> <p>Sub-Category 2: 03010 job development</p>	<p>into the workplace and integration between members and people without disabilities in those workplaces. The outcome of this service is sustained paid employment and work experiences leading to further career development and individual integrated community-based employment for which a member is compensated at or above the minimum wage, but not less than the customary wage level of benefits paid by the employer for the same or similar work performed by individuals without disabilities. Small group employment support services may include any combination of the following activities: vocational/job-related discovery or assessment, person-centered employment planning, job placement, job development, meeting with prospective employers, job analysis, training and systematic instruction, job coaching, work incentive benefits analysis and counseling, training and work planning, transportation and career advancement services. Also included are other workplace support services not specifically related to job skill training that enable the member to be successful in integrating into the job setting.</p> <p>Small group employment support services may be provided by a co-worker or other job site personnel provided that the services that are furnished are not part of the normal duties of the co-worker or other personnel and these individuals meet the qualifications established below for individual providers of service. Employers may be reimbursed for supported employment services provided by co-workers. Participants receiving small group employment support may also receive educational, pre-vocational, and/or day services and career planning services. However, different types of non-residential services may not be billed for the same period of time.</p> <p>The cost of transportation for a participant to get to and from a supported employment site may be included in the reimbursement paid to the supported employment provider, or may be covered and reimbursed under specialized (community) transportation, but not both.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • Supported employment services may not include personal care assistance or transportation assistance as components of this service for the same period of time. • Small group employment support does not include payment for supervision, training, support and adaptations typically available to other non-disabled workers filling similar positions in the business. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 	<p>Professional accreditation.</p> <ul style="list-style-type: none"> – Meeting the ASPE Quality Indicators for Supported Employment Personnel. – Comparable experience for a qualified individual, including a minimum of two years of experience working with the target population providing supported employment. However, a member self-directing this service may employ qualified persons with less experience. In that event, the PHIP and member shall ensure that the individual provider has the member –specific competencies to effectively provide the service. <ul style="list-style-type: none"> • In addition, the individual provider must comply with all applicable occupational health and safety standards of the federal Occupational Safety and Health Administration (OSHA). <p>Agency – Supported Employment Agency</p> <ul style="list-style-type: none"> • The provider must have the ability and qualifications to provide this service, demonstrated in at least one of the following ways: <ul style="list-style-type: none"> – Accreditation by a nationally recognized accreditation agency. – Existence of a current contract with the Division of Vocational Rehabilitation (DVR) for provision of supported employment services. – Submission of written documentation that evidences that the agency meets all DVR Technical Specifications related to supported employment. – Comparable experience for a qualified entity, including a minimum two years of experience working with the target population providing integrated employment services in the community. • In addition, the provider must comply with all applicable occupational health and safety standards of the federal Occupational Safety and Health Administration (OSHA).

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			<p>21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	
24	<p>Supportive Home Care</p> <p>SPC: 104.10</p> <p>attendant, per diem SPC 104.12 HIPAA: S5126</p> <p>supervision services SPC: 104.20 HIPAA: S5111</p> <p>general flat fee – hourly SPC: 104.20 HIPAA: 99600</p> <p>attendant care – blended rate SPC: 104.21 HIPAA: S5125</p> <p>personal care SPC: 104.22 HIPAA: T1019</p> <p>supervision services HIPAA: S5110</p>	<p>Category 1: 08 home-based services</p> <p>Sub-category 1: 08040 companion</p> <p>Category 2: 08 home-based services</p> <p>Sub-Category 2: 08050 homemaker</p> <p>Category 3: 08 home-based services</p> <p>Sub-Category 2: 08060 chore</p>	<p>Supportive home care (SHC) is the provision of services to directly assist people with daily living activities and personal needs and to assure adequate functioning and safety in their home and community.</p> <ul style="list-style-type: none"> • Direct assistance with instrumental activities of daily living, as well as observation or cueing of the member to safely and appropriately complete activities of daily living and instrumental activities of daily living. • Providing supervision necessary for safety at home and in the community. This may include observation to assure appropriate self-administration of medications, assistance with bill paying and other aspects of money management, assistance with communication, arranging and using transportation, checking out library books, ordering food from a menu, and paying for tickets to events. • Intermittent major household tasks that must be performed seasonally or in response to some natural or other periodic event for reasons of health and safety or the need to assure the youth’s continued community living. <p>Limitations, Exclusions, and Frequency</p> <ul style="list-style-type: none"> • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. In addition, the CLTS Waiver Program is the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, 	<p>Individual – Personal Care Worker</p> <ul style="list-style-type: none"> • DHS 105.17(3)(a) Wis. Admin Code <p>Individual – Nurse Aide</p> <ul style="list-style-type: none"> • Chapter 50, Wis. Stats; Admin Code 129 <p>Individual – Registered Nurse</p> <ul style="list-style-type: none"> • Chapter 441.06 Wis. Stats. <p>Agency – Home Health Agency</p> <ul style="list-style-type: none"> • Chapter 50.49 Wis. Stats; 42 CFR 484; Admin Code DHS 131. <p>Individual - Other Person appropriately qualified as approved by the State and as related to the unique service being provided to the child</p> <ul style="list-style-type: none"> • Training begins prior to and during the first six months of employment. Training on critical procedures related to the participant’s health and safety must be completed prior to the delivery of any services. Families also provide oversight and are responsible for monitoring the quality of care for their child The county waiver agency shall ensure that persons providing Supportive Home Care services receive training on at least the following subjects pertaining to the person(s) served: <ul style="list-style-type: none"> – Policies, procedures, and expectations of the county waiver agency and/or contract agency including training on person and

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			<p>Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources.</p>	<p>provider rights and responsibilities; record keeping and reporting; and other information deemed necessary and appropriate.</p> <ul style="list-style-type: none"> – Information about the person(s) to be served, including information specific to disabilities, abilities, needs, functional deficits, and strengths of the person. This training should be person-specific for the people to be served. – Information about recognizing and appropriately responding to all conditions that might adversely affect the person’s health and safety, including how to respond to emergencies and Critical Incidents as defined in CLTS Waiver Program Manual. – Developing needed interpersonal and communications skills and appropriate attitudes for working effectively within the population to be served. These skills include: understanding the principles of family-centered services; participant rights; respect for age; cultural, linguistic and ethnic differences; active listening, responding with emotional support and empathy; ethics in dealings with people, including: family and other providers; conflict resolution skills; ability to deal with death and dying; and other topics relevant to the specific population to be served. – Information regarding confidentiality and privacy laws and rules. – Information related to procedures for handling complaints. – Information specifically regarding the person who needs support, including personal hygiene needs, preferences, and techniques for assisting with activities of daily living including, where relevant, bathing, grooming, skin care, transfer, ambulation, exercise, feeding, dressing, and use of adaptive aids and equipment. – Information related to homemaking and

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				<p>household services, meal planning and preparation, shopping, housekeeping techniques and proper maintenance of a clean, safe and healthy living environment.</p> <ul style="list-style-type: none"> Information on the personal health and wellness-related needs of the person needing supports, including nutrition, dietary needs, exercise needs, and weight monitoring and control. <ul style="list-style-type: none"> In addition to the other listed qualifications and training, the provider must meet qualifications and training as described in the CLTS Waiver Program Manual. <p>Individual – Licensed Practical Nurse</p> <ul style="list-style-type: none"> Chapter 441.10 Wisconsin Statutes
25	<p>Training for Parents/Guardians & Families of Children with Disabilities (Training for Unpaid Caregivers)</p> <p>SPC: 113.2 HIPAA:</p>	<p>Category 1: 09 caregiver support</p> <p>Sub-Category 1: 09020 caregiver counseling and/or training</p>	<p>The Training for Parents/Guardians and Families of Children with Disabilities sessions provides support and training strategies to help reduce the stress, demands and challenges to successfully raise children with disabilities. The training sessions include a focus on techniques for supporting children with and without disabilities, keeping family balance and harmony in the home, and effective communication. Parents/guardians, siblings and other family members are taught how stress affects individual family members and the family unit, and are provided techniques that can be used to work through difficult and stressful times.</p> <p>Research indicates that children with disabilities may be at higher risk for abuse or neglect than children without disabilities. There are steps that parents/guardians and other family members can take to protect children with disabilities from abuse or neglect. Parents/guardians and family members of children and youth with emotional, behavioral, and mental health challenges obtain training on needed supports and services so that children grow up healthy and able to maximize their potential. These children are continually at risk of disciplinary actions at school, exclusion from family and community life, bullying, and the long-term effects of multiple negative experiences. The training sessions offer a practical curriculum that teaches core strategies for engaging the child and explains how and why the strategies impact the child’s development. These training sessions may also include parent support or mentoring groups. Caregivers who have similar information needs and educational issues can support each other while they learn about research-based best practices specific to their children’s disability. Ongoing instruction and support for parents and family members who are implementing support interventions in their homes. The sessions are held in a location where parents/guardians, siblings, grandparents, and other family</p>	<p>Agency – Training/Service Agency</p> <ul style="list-style-type: none"> Licensed accredited professionals who maintain current credentials in their field of practice. For example, the training, peer-support sessions could be provided by licensed family professionals. Certified or accredited professionals who maintain current credentials in their field of practice. For example, training or peer support sessions could be provided by certified family professionals. Training or experience in working with children with disabilities. <p>Individual – Professional Services</p> <ul style="list-style-type: none"> Licensed accredited professionals who maintain current credentials in their field of practice. For example, the training, peer-support sessions could be provided by licensed family professionals. Certified or accredited professionals who maintain current credentials in their field of practice. For example, training or peer support sessions could be provided by certified family professionals. Training or experience in working with children with disabilities.

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			<p>members can attend together to support their shared challenges and experiences in raising a child/youth with developmental, physical, emotional, behavioral, or mental health issues.</p> <p>This service includes, but is not limited to, in-person training, conferences, resource materials, and on-line training sessions. Training includes the costs of registration and training fees associated with formal instruction in areas relevant to the needs identified in the child’s support plan.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • This service does not cover training to be a paid caregiver. • This service does not cover training focused to the waiver participant’s training needs. • This service excludes payment for lodging and meal expenses incurred while attending a training event or conference. • This service does not cover teaching self-advocacy to waiver participants which is covered under consumer education and training services. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service THAT could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	
26	<p>Transportation</p> <p>SPC: 107 HIPAA: T2003</p> <p>1 way trips SPC: 107.30</p>	<p>Category 1: 15 non-medical transportation</p> <p>Sub-Category 1: 15010 non-medical transportation</p>	<p>Transportation maintains, or improves, the child’s mobility in the community, increases inclusion, independence and community participation, including to authorized waiver services. The term “community” is broadly defined, and is not limited to the boundaries of any particular municipality. The CLTS Waiver Program transportation services funds coverage of non-medical, non-emergency transportation needs.</p> <p>Transportation services may include the pre-purchase or provision of such</p>	<p>Agency – Specialized Transportation Agency</p> <ul style="list-style-type: none"> • Operator’s License from the Department of Transportation • Operator is insured, and vehicle is insured, is in good repair with all operating and safety systems functioning. <p>Individual – Private Drivers</p>

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	HIPAA: T2004 miles SPC: 107.40 HIPAA: S0215 items SPC: 107.50 HIPAA: A0110		<p>items as bus tickets, train passes, taxi vouchers or other fare or may include a direct payment to providers covering the cost of transportation excluding parents.</p> <p>Transportation may also be approved as mileage according to the Federal IRS rules related to mileage reimbursement and DHS established limits. Mileage is calculated based on the starting and ending points and is approved by the number of miles needed.</p> <p><u>Limitations, Exclusions, and Frequency</u></p> <ul style="list-style-type: none"> • Transportation cannot be used to pay for transportation that is the obligation of the school district. • The transportation service does not cover the participant driving himself/herself to a location. • The mileage reimbursement rate may not be supplemented to cover vehicle operating, maintenance or repair costs. • Vehicle adaptations and modifications are excluded (they would be funded as adaptive aids). • Excludes transportation services to and from medical providers. • Costs for the participant or their family to maintain a vehicle are excluded. • This service may not duplicate any service that is provided under another waiver service category. • Federal requirements prohibit the CLTS Waiver Program from funding any service that could be furnished under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid, or the Medicaid State Plan services. The CLTS Waiver Program is also the payer of last resort and coordination of benefits (COB) must occur with private health insurance, special education services funded under the Individuals with Disabilities Education Act (IDEA), or vocational rehabilitation services funded under section 110, as amended in 2014, of the Rehabilitation Act of 1973 (29 U.S.C. 730), and Wisconsin’s income maintenance programs, as appropriate, including Wisconsin Shares Child Care Subsidy Program, Wisconsin Home Energy Assistance Program (WHEAP), and FoodShare Wisconsin. Documentation must be maintained in the file of each CLTS waiver participant demonstrating that the service does not supplant or duplicate supports or services that are otherwise available through one of these other funding sources. 	<ul style="list-style-type: none"> • Operator’s License issued by the Department of Transportation • Driver is insured and vehicle is insured, is in good repair with all operating and safety systems functioning. <p>Agency – Public Carriers (e.g. taxi cabs, mass transit)</p> <ul style="list-style-type: none"> • Operator’s License issued by the Department of Transportation • Operator is insured