

## **HCBS Supported Community Living (SCL) delivered through the Remote Support Modality**

Remote Support is the provision of Supported Community Living by a trained remote support professional who is in a remote location and is engaged with a person through enabling technology that utilizes live two-way communication in addition to or in place of on-site staffing. Remote support is not a service. It is an available delivery option of the Supported Community Living service to meet an individual's health, safety and other support needs as needed when it:

- Is chosen and preferred as a service delivery method by the person or their guardian (if applicable)
- Appropriately meets the individual's assessed needs.
- Is provided within the scope of the service being delivered.
- Is provided as specified in the individual's support plan.

SCL delivered remotely assists individuals to avoid institutional placement or placement in a more restrictive living environment by fostering independence and security by combining technology and service to allow for direct contact with trained staff when the individual needs that contact.

Delivery of SCL services remotely assists individuals to enhance and increase their independence by providing a realistic, noninvasive way for individuals to build life skills and familiarity in their level of independence with a sense of security.

Delivery of SCL services remotely can assist individuals to live more independently or support a safe transition to independent living while enhancing their self-advocacy skills and increase opportunities for participating in the community.

SCL is delivered remotely by awake; alert remote SCL support professionals whose primary duties are to provide remote supports from the SCL provider's secure remote location. To ensure safety and Health Insurance Portability and Accountability Act (HIPAA) compliance, this location should have appropriate, stable, and redundant connections. This should include, but is not limited to, backup generators or back battery, multiple internet service connections.

Paid or unpaid backup support may be provided as specified in the individual's service plan. Paid backup support is provided on a paid basis by a provider of Supported Community Living that is both the primary point of contact for the remote supports vendor and the entity to send paid staff person(s) on-site when needed. Unpaid backup support may be provided by a family member, friend, or other person who the individual chooses. The person-centered service plan (PCSP) will reflect how the SCL delivered remotely is being used to meet the goals for independent living and assessed needs, including health, safety, and welfare needs.

The PCSP may contain multiple habilitative services, however services may not occur simultaneously or on the same date of service at the same time. The case manager, community-based case manager, or care coordinator is responsible to ensure that there is no overlap or duplication of services authorized in the PCSP.

## **SCL Remote Support System Design**

The following are requirements of a remote supports system design when utilized to replace in-person direct support service delivery:

- The provider must have safeguards and/or backup system such as battery or generator for the electronic devices in place at the location of the SCL remote delivery support staff and the individual's home in the event of electrical outages.
- The provider must have written policy and procedures approved by the Iowa Medicaid Quality Improvement Organization (QIO) HCBS unit that defines emergency situations and details.
- How remote and backup staff will respond to each. Examples include:
  - Fire, medical crises, stranger in the home, violence between individuals and any other situation that appears to threaten the health or welfare of the individual.
  - Emergency response drills must be carried out once per quarter per shift in each home.
  - Documentation of the drills must be available for review upon request.
- When used to replace in-person direct support service delivery, the remote monitoring staff shall generate service documentation on each individual for the period when remote supports are provided.
- The provider must have backup procedures for system failure (for example, prolonged power outage), fire or weather emergency, individual medical issue or personal emergency in place and detailed in writing for each site utilizing the system as well as in each individual's PCSP. This plan should specify the staff person or persons to be contacted by remote support monitoring staff who will be responsible for responding to these situations and traveling to the individual's home, including any previously identified paid or unpaid backup support responder.
- The remote supports system may receive notification of smoke/heat alarm activation. Recognizing remote supports will vary based on individual needs assessments, notifications are not intended to replace fire/smoke/heat detection systems nor drills as required.

The remote support system must have in place regular routine of testing that ensures the system and devices are working properly.

The remote supports system must have two-way (at minimum, full duplex) audio communication capabilities to allow monitoring staff to effectively interact with and address the needs of individuals in each living site, including emergency situations when the individual may not be able to use the telephone.

- SCL remote support delivery staff will have access to visual (video) oversight of areas in individual's residential living sites as deemed necessary by the IDT to meet the individual's needs based on informed consent of the member and/ or their legal representative.

- SCL remote support delivery staff may not be located in the home of the individual receiving remote supports.
- A secure (compliant with the HIPAA) network system requiring authentication, authorization and encryption of data must be in place to ensure access to computer vision, audio, sensor, or written information is limited to authorized individuals identified in the member's service plan, and state entities as necessary for the oversight of service delivery.
- The members must be made aware of the operating hours of the equipment.
- For situations involving remote supports of individuals needing 24-hour support, if an individual indicates that they no longer want to receive their service through the remote supports system the following protocol will be implemented:
  - o The remote support professional or other person who becomes aware of the member's desire to change to all in person supports will notify the provider to request an IDT meeting to discuss the request and identify appropriate alternative.

### **Remote Support Service Requirements**

The SCL provider must have written policy and procedures approved by the Iowa Medicaid Quality Improvement Organization (QIO) HCBS unit that defines emergency situations and details. How remote and backup staff will respond to each. Examples include:

- Fire, medical crises, stranger in the home, violence between individuals and any other situation that appears to threaten the health or welfare of the individual.
- Emergency response drills must be carried out once per quarter per shift in each home equipped with and capable of utilizing remote supports.
  - o Documentation of the drills must be available for review upon request.
- When used to replace in-person direct support service delivery, the remote monitoring staff shall generate service documentation on each individual for the period when remote supports are provided.

### **SCL Remote Support Delivery Staff (Remote Support Professionals)**

The following are requirements for SCL remote support professionals when remote supports are used in place of in-person direct support service delivery:

- At the time of monitoring, the remote supports professionals must be awake and may not have duties other than the oversight and support of individuals receiving remote support.
- The remote supports professionals will assess any urgent situation at an individual's home and call 911 emergency personnel first, if it is deemed necessary, and then call the backup

staff person. The remote supports professionals will stay engaged with the individuals at the home during an urgent situation until the backup staff or emergency personnel arrive.

- If computer vision or video is used, oversight of an individual's home must be done in real time by an awake remote supports professional located outside of the individual's home using telecommunications/broadband, the equivalent or better, connection.
- SCL Remote Support Delivery Staff shall maintain a file on each individual in each home monitored that includes a current photograph of each individual, which must be updated if significant physical changes occur, and at least annually. The file shall also include pertinent information on each individual, noting facts that would aid in ensuring the individuals' safety.
- The remote supports professionals must have detailed and current written protocols for responding to the needs of each individual, including contact information for staff to supply on-site support at the individual's residential living site, when necessary.
- The delivery of in person SCL by a direct support professional and the delivery of remote SCL by a remote support professional may not occur at the same time.

### **Backup On-Site SCL**

The following are requirements for stand-by /backup on-site SCL staff.

- The backup on-site SCL staff shall respond and arrive at the individual's residential living site within the timeframe identified in the individuals PCSP, from the time the incident is identified by the SCL remote support professionals, and the on-site backup SCL staff acknowledges receipt of the notification by the SCL remote monitoring staff.
- Backup on-site SCL staff will assist the individual in the home as needed when the remote delivery of SCL does not meet the needs of the individual.

### **Service Plan**

When a person chooses to receive Supported Community Living services (SCL) remotely, the individual's person-centered service plan must reflect the remotes supports plan and document all the following:

- The individual's and/or guardians informed consent.
- The individual's assessed needs and identified goals for SCL that can be met using remote support.
- How the SCL delivered remotely will support the person to live and work in the most integrated community settings.
- The individual's needs that must be met with in-person SCL services, and those that will be met with remote SCL services.

- The hours per day the member will receive in-person SCL and the hours per day that the member will receive SCL remotely.
- The names, relationships and contact information for unpaid back-up support that will be available to the member.
- The plan for providing habilitation services in-person or remotely based on the individual's needs to ensure their health and safety.
- The training provided to the individual on the use of the technology and equipment.
- The individual's control and use of the equipment
- Whether the person or their guardian (if applicable) agrees to the use of video monitoring or cameras for service delivery and has provided informed consent for the use of video monitoring or cameras.
- The amount, frequency, and duration that SCL can be delivered remotely.
- How visitors are informed of the use of cameras and video monitors in the setting if video monitoring or cameras are being utilized under this service. Use of the system may be restricted to certain hours through the PCSPs of the individuals involved.

### **Assessment**

Through an assessment by the SCL remote support provider with input from the individual and their Interdisciplinary Team (IDT) the member's ability to be supported safely through remote support is identified.

Through an assessment by the remote support provider with input from the individual and their IDT, the location of the devices or monitors will be determined to best meet the individual's needs.

### **Informed Consent**

Informed consent by the individual using the service, their guardian and other individuals and their guardians residing in the home must be obtained and clearly state the parameters for delivery of the SCL service remotely.

Each individual, guardian and IDT must be made aware of both the benefits and risks of the operating parameters and limitations.

Informed consent documents must be acknowledged in writing, signed, and dated by the individual, guardian, case manager and provider agency representative, as appropriate prior to the delivery of SCL through remote support. A copy of the consent shall be maintained by the case manager, the guardian (if applicable) and in the agency provider's member service record.

If the individual desires to withdraw consent, they would notify the case manager. As informed consent is a prerequisite for utilization of remote support services, a meeting of the IDT would be needed to discuss available options for any necessary alternate supports. All residing adult and youth individuals,

their guardians and their support teams impacted by the decision to withdraw consent must be immediately informed of the decision and use of remote supports in the setting must be discontinued.

Informed consent for remote supports must be reviewed annually as part of the person-centered planning process.

## **Privacy**

Remote Support Professionals must:

- Respect and always maintain the individual's privacy, including when the person is in settings typically used by the public.
- Respect and always maintain the individual's privacy, including when scheduled or intermittent/as-needed support includes responding to an individual's health, safety, and other support needs for personal cares.
- Only use cameras in bedrooms or bathrooms when the IDT has identified a specific support need directly related to the member's health or safety risk in the person-centered service plan and the member, and their legal representative has given informed consent for the use of cameras in the member's bedroom or bathroom to specifically mitigate the risk when in-person supports are not present.
- For members who share a bathroom, each member must have an identified health or safety risk justifying the use of the camera and each must provide informed consent for the use of the camera. For members for whom there is not an identified health or safety need for cameras in the bathroom and for whom there is no informed consent for the use of a camera in the bathroom, the camera must have the functionality that allows it to be shut off by the member or the Remote Support Professional while that member is using the bathroom.
- For members sharing a bedroom, each member must consent to the placement of a camera in the bedroom. If both members do not consent, then the camera may not be placed in the bedroom.

The member's case manager, care coordinator or community-based case manager is responsible for ensuring that the SCL provider agency has provided the appropriate training on the use of the technology and equipment within the home including the how to disable or shut off the technology and equipment including cameras and monitors as needed prior to initiation of SCL remote service delivery. The record of the training that occurs with the member on the use of the technology and equipment will be documented in the member's service record and reviewed regularly by the case manager, care coordinator or community-based case manager.

The individual's case manager, care coordinator or community-based case manager is responsible for monitoring the services in the person-centered service plan which includes at a minimum monthly contact with the individual or their representative and visiting individuals in their place of residence on a quarterly basis. As part of the monitoring activities the case manager, care coordinator or community-

based case manager will review the receipt of SCL with the member and ensure that the delivery of SCL through remote support continues to meet the individual's service needs. This regular review will include a review of the member's use of the equipment, informed consent for the mode of service delivery and the overall satisfaction with the delivery of SCL remotely. The HCBS QIO and the MCOs also provide oversight of service delivery through the quality monitoring and oversight of the SCL providers.

The agency service provider responsible for responding to an individual's health, safety, and other support needs through remote support must:

1. Ensure the use of enabling technology complies with relevant requirements under the Health Insurance Portability and Accountability Act (HIPAA)
2. Comply with the data privacy laws, restrictions and guidelines.
3. Ensure that service documentation occurs during remote support delivery in accordance with the 441-79.3

The in-person delivery of SCL by a direct support professional and the delivery of SCL through telehealth or remote support professional may not occur at the same time.