GUIDELINES FOR ENVIRONMENTAL ACCESSIBILITY ADAPTATIONS FOR ADULTS WITH DEVELOPMENTAL DISABILITIES

PLAN DEVELOPERS AND DEPARTMENT STAFF

- Environmental accessibility adaptations which are those interior or exterior physical adaptations to the home, required by the waiver participant’s plan of service, which are necessary to ensure health, welfare, safety of the individual or enable the individual to function with greater independence in the community and without which, the waiver participant would require institutionalization.

- Unless otherwise authorized by the Department, permanent adaptations are limited to a home owned either by the participant or the participant’s non-paid family when the home is the participant’s principal residence.

- To approve a permanent adaptation to a rental home, the following must be in place:
  - A letter from the landlord agreeing with the adaptation.
  - The lease must include either the participant or the participant’s guardian.

- Portable or non-stationary adaptations may be made to rental units when such adaptations can follow the participant to the next place of residency or be returned to the Department.

- Requests for environmental adaptations will be submitted to the Care Manager in each region.
  - Such adaptations may include:
    - Installation of ramps and lifts
    - Widening of doorways
    - Adaptation of bathroom and kitchen facilities
    - Installation of electric and plumbing systems which are necessary to accommodate the medical equipment and supplies necessary for the welfare of the participant
    - Carpet replacement is only allowed from the area it was removed for adaptation purposes.

EXCLUSIONS

- Adaptations or improvements to the home which are not of direct medical or remedial benefit to the participant, such as:
Carpeting for full rooms or hallways for aesthetic purposes
- Repairs (roof, plumbing, electrical, etc)
- Air conditioning

**GUIDELINES**

- The participant’s Person Centered Planning (PCP) team and Plan Developer should identify the need for the adaptation and document attempts to find other funding or natural supports.
  - Documentation should be specific enough to validate that the environmental adaptation seems reasonable to increase the participant’s independence in accessing their living area.
  - Documentation should also validate the decrease on paid and non-paid supports.

- An occupational therapist (OT) or other qualified professionals must assist in assessment and final environmental accessibility adaptations.
  - If Department funds are used for this purpose, it will not go against the cost effectiveness cap for individual plans.

- The Plan Developer should locate a Medicaid provider and obtain a quote. The quote must include:
  - The description of work to be done
  - The total cost which includes itemized labor costs by expected hours
  - Supply costs shall be itemized with small items less than $50 grouped together and items over $50 also grouped together.
  - The following are additional criteria to assist when reviewing bids:
    - In the bid, identify some quality standard for supplies, e.g., supplies are new and meet mid-level or higher quality standard
    - The provider has:
      - A satisfactory record of integrity and business ethics
      - The necessary equipment and facilities to complete the work
      - A satisfactory performance record
The amount of time required to complete the job and their rates are considered

Knowledge of ADA standards to meet the needs of the participant, when applicable

- For adaptations under $500, Plan Developers/participants should make a good faith effort to obtain a quote from three (3) available vendors to assure they are receiving the most cost-effective price.
- For adaptations over $500, obtain three written bids.
- All adaptations must be made in accordance with applicable state and local building codes.
- It is the contractor's responsibility to provide regions with a copy of building permits and will require completed inspection reports.
- Usual and customary fees for construction are paid up to Medicaid allowances.
- The Care Manager may prior authorize a portion of the payment up front when there is documentation or receipts that validate the services have actually been provided (this could include supplies or building permits).
- The remaining balance is authorized upon completion of the job including all required inspections.
- The Care Manager must assure there is no other equipment or process that would be less expensive.
- The Care Manager must assure the service is cost-effective to meet the needs of the participant before prior authorization.