



# DEVELOPMENTAL PROGRAMS BULLETIN

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF PUBLIC WELFARE

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SUBJECT:

**Individual Support Plans (ISPs)**

BY:

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### SCOPE:

Administrative Entity (AE) Administrators and Directors for Medicaid Waiver Participants  
County Mental Health/Mental Retardation (MH/MR) Programs  
Non-State Intermediate Care Facilities for Persons with Mental Retardation (ICFs/MR)  
Directors  
State Center Directors  
State Mental Health Facilities  
Supports Coordination Organizations (SCO)  
Providers of Mental Retardation Services  
Individuals and Families, Relatives, or Surrogates<sup>1</sup>

### PURPOSE:

The purpose of this bulletin is to establish the Office of Developmental Programs' (ODP) requirements for Individual Support Plans (ISPs) which are outlined in the attached manual. The manual identifies the standardized processes for preparing, completing, documenting, implementing, and monitoring ISPs to ensure they are:

- Meaningful to an individual's life.
- Developed and implemented using the core values of *Everyday Lives*, Positive Approaches and Practices and Self Determination to result in an enhanced quality of

<sup>1</sup> Not everyone can make legally binding decisions for themselves. This would include minor children and some adults who have substantial mental impairment. In these instances, a substitute decision-maker may be identified under State law. Substitute decision-makers have various legal titles, but for the purposes of this bulletin, they will be referred to as "surrogates." "Surrogates" include the following:

- Parents of children under 18 years of age under the common law and 35 P.S. § 10101.
- Legal custodian of a minor as provided in 42 Pa.C.S. § 6357.
- Health care agents and representatives for adults as provided in 20 Pa.C.S. Ch. 54.
- Guardians of various kinds as provided in 20 Pa.C.S. Ch. 55 (as limited by 20 Pa.C.S. § 5521(f)).
- Holders of powers of attorney of various kinds as provided in 20 Pa.C.S. Ch. 56.
- Guardians of persons by operation of law in 50 P.S. §4417(c).

Any of these would be considered "legal representatives" as the Centers for Medicare and Medicaid Services uses that phrase. Please see *Application for a §1915(c) Home and Community-Based Waiver [Version 3.5]: Instructions, Technical Guide and Review Criteria*.

**The Appropriate Developmental Programs Regional Office**

life for every individual who receives mental retardation services and supports in Pennsylvania.

- Compliant with Centers for Medicare & Medicaid Services (CMS) plan assurances and requirements in the approved Consolidated and Person/Family Directed Support (P/FDS) Waivers.

## **BACKGROUND:**

The Mental Health and Mental Retardation Act of 1966 (MH/MR Act) provides the statutory basis for the development of community-based services for individuals with mental retardation. Section 301(d) of the MH/MR Act (50 P. S. § 4301(d)) requires County MH/MR Programs to provide access to base-funded services (up to the availability of State allocated funding). The County Mental Retardation Services regulations, 55 Pa.Code Chapter 6201, were issued under Section 201(2) of the MH/MR Act. The 6201 regulations require the assessment of individual and family needs, and the development of a life management plan for individuals and their families. Furthermore, federal regulations for Medicaid services, the “Administrative Entity Operating Agreement” for the Consolidated and P/FDS Waivers, and the *Office Of Developmental Programs (ODP) Provider Agreement for Participation in Pennsylvania’s Consolidated and P/FDS Waivers* also outline requirements for the development and implementation of an ISP.

In 1991, ODP, formerly known as the Office of Mental Retardation, convened a planning retreat with members of its Planning Advisory Committee (PAC) for the purpose of developing an overall vision for Pennsylvania’s mental retardation service system. The PAC, which was the first advisory body to ODP to include individuals with disabilities and families as full participating members, focused its work on what individuals with disabilities and families said was important to them and what kind of supports they needed. The result of the PAC’s efforts was *Everyday Lives*, published by the Department of Public Welfare in 1991.

*Everyday Lives* was updated in 2002 as *Everyday Lives: Making It Happen* and includes the core values of Choice, Control, Quality, Community Inclusion, Stability, Accountability, Safety, Individuality, Relationships, Freedom, Success, Contributing to the Community, Collaboration, and Mentoring. These values exemplify the attributes that every individual with or without disabilities should have in their lives.

Since its publication, the values and vision expressed in *Everyday Lives* have provided the framework for planning, policy development, service design, and all related activities in the mental retardation service system. As the mental retardation system evolved with the *Everyday Lives* philosophy, concepts such as:

- Person-Centered Planning, which focuses on the individual’s strengths, choices, and preferences.
- Positive Approaches, which defines the context in which we provide needed clinical and behavioral interventions to teach individuals the skills they need to, make safe and appropriate choices.
- Self Determination, which gives individuals who receive, services more control and responsibility in choosing how to live their lives.

Individual Support Planning is based on those very same concepts and captures the true meaning of working together to create a shared commitment for his or her future.

## **DISCUSSION:**

The Office of Developmental Programs has two approved Medicaid Waivers: the Consolidated Waiver and the Person/Family Directed Support (P/FDS) Waiver. The following are ODP requirements related to ISPs based on the approved waivers:

- ISPs must be based on assessed needs.
- ISPs must be developed using a person-centered planning process to capture information including health and welfare information and the individual's preferences and desires, all of which leads to ensure that appropriate services and supports are identified and implemented.
- ISPs must list all unpaid natural supports and funded supports to meet assessed needs. The ISP shall include documentation of services provided through other agencies (for example, Office of Vocational Rehabilitation, Aging, Drug and Alcohol, School).
- ISPs must be completed using the standardized format and entered into the Home and Community Service Information System (HCSIS) for any individual who has been found eligible for Mental Retardation services and is receiving at least one funded service, including Supports Coordination, with the exception of individuals residing in an Intermediate Care Facility for Persons with Mental Retardation (ICF/MR).
  - For individuals residing in ICFs/MR, the ICF/MR is responsible for developing the Individual Plan (outside of HCSIS) in accordance with ICF/MR regulations. Although Supports Coordinators (SC) need not develop an ISP for individuals residing in State Centers and NonState ICFs/MR, they are responsible for maintaining regular contact with the ICF/MR facility, for evaluating the individual, and for participating in plan development as required in the County Mental Retardation Service Regulations, 55 Pa. Code 6201.14, Aftercare Services.
- An abbreviated ISP should be completed for any individual receiving under \$2,000 in non-waiver services. AEs or SCOs still have the option of doing a more detailed ISP. [Note that Targeted Service Management (TSM) and Base-funded Case Management services are not required to be documented on ISPs and therefore the cost of these services will not be included in the \$2,000 limit listed in the previous sentence.]
- The standardized *ISP Planning Process Participants' Signature Page* will be utilized to validate team member participation and the development of the ISP. It also validates that critical information was reviewed and discussed at the ISP

meeting. This document must be maintained in the individual's file at the SCO for 4 calendar years after the case is closed.

- ISPs are updated, approved, and services authorized at least annually (every 365 calendar days) and when warranted by changes in the individual's needs.
- SCOs must ensure that ISPs are thoroughly reviewed to assure services accurately reflect an individual's needs prior to submission to the AE for approval and authorization.
- Prior to the delivery of mental retardation services to the individual, the ISP must be developed to include frequency, amount, type and duration of each service and the AE/County Program must approve and authorize services.
- Once the ISP is approved and authorized, the SC will ensure that a completed copy of the signature page will be provided to all team members.
- The SC will ensure that all approved and authorized ISPs will be distributed to all appropriate team members unless otherwise requested.
- Providers having access to the approved and/or authorized ISP in HCSIS will be responsible for distribution to all appropriate staff within their agency.
- The AE and County Program is responsible for:
  - Ensuring that ISPs are appropriate to meet the individual's needs
  - Ensuring approval and authorization of the ISP in HCSIS.
  - Ensuring that all needed services, both paid for by ODP and not paid for by ODP, are included on the ISP prior to approving.
  - Authorizing the ODP paid supports in HCSIS, with the exception of TSM and Base-funded Case Management.
  - For individuals residing in State Centers and NonState ICFs/MR, the County Program is not responsible to authorize the plan. The plan is completed by the ICF/MR provider.
  - For individuals residing in State Centers and NonState ICFs/MR, the ICF/MR is responsible to ensure that the services included in the plan meet the individual's needs.

The attached ISP Manual, Timeline, ISP Signature page, Annotated ISP and Waiver Service Request Form and any Department approved revisions outline the process for development of ISPs for individuals receiving mental retardation services.

**Attachments:**

- Attachment 1: ISP Manual
- Attachment 2: ISP Timeline
- Attachment 3: ISP Signature Page, DP 1032
- Attachment 4: Annotated ISP
- Attachment 5: Waiver Service Request Form