

NOTICE OF INTENT

**Department of Health
Bureau of Health Services Financing
and
Office of Aging and Adult Services**

**Home and Community-Based Services Waivers
Support Coordination Standards for Participation
(LAC 50:XXI.Chapter 5)**

The Department of Health, Bureau of Health Services Financing and Office of Aging and Adult Services propose to amend LAC 50:XXI.Chapter 5 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XIX of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services propose to amend the provisions governing Support Coordination Standards for Participation to align the administrative Rule with current policy and procedures under the Home and Community-Based Services (HCBS) Waivers relative to general provisions, administration and organization, provider responsibilities, and to establish cost reporting requirements for support coordination agencies providing waiver services.

**Title 50
PUBLIC HEALTH—MEDICAL ASSISTANCE
Part XXI. Home and Community-Based Services Waivers
Subpart 1. General Provisions**

**Chapter 5. Support Coordination Standards for Participation
for Office of Aging and Adult Services Waiver Programs**

Subchapter A. General Provisions

§501. Introduction

A. The Louisiana Department of Health (LDH) establishes these minimum standards for participation which provides the core requirements for support coordination services provided under home and community-based services waiver programs administered by the Office of Aging and Adult Services (OAAS). OAAS must determine the adequacy of quality and protection of waiver participants in accordance with the provisions of these standards.

B. - D.1. ...

E. If a support coordination agency fails to comply and /or is unable to comply with their requirements as a certified support coordination agency, OAAS may temporarily perform the mandatory duties of the support coordination agency to ensure the continuity of the participants' services and the participants' health and welfare. The support coordination agency shall not be reimbursed for support coordination duties performed by OAAS.

AUTHORITY NOTE: Promulgated in accordance with R.S.
36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3086 (November 2013), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 47:886 (July 2021), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§503. Certification Requirements

A. All agencies that provide support coordination to OAAS administered home and community-based services (HCBS) waivers must be certified by LDH. It shall be unlawful to operate as a support coordination agency for OAAS administered HCBS waiver programs without being certified by the department.

B. In order to provide support coordination services for OAAS administered HCBS waiver programs, the agency must:

1. - 3. ...

4. enroll as a Medicaid support coordination agency in all regions in which it intends to provide services for OAAS administered HCBS waiver programs; and

5. comply with all LDH and OAAS policies and procedures.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3087 (November 2013), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§505. Certification Issuance

A. A certification shall:

1. - 2. ...

3. enable the support coordination agency to provide support coordination for OAAS administered HCBS waivers within the specified LDH region; and

4. ...

B. Provisional certification may be granted when the agency has deficiencies which are not a danger to the health and welfare of participants. Provisional certification shall be issued for a period not to exceed 90 calendar days.

C. Initial certification shall be issued by OAAS based on the survey report of LDH, or its designee.

D. Unless granted a waiver by OAAS, a support coordination agency shall provide such services only to waiver participants residing in the agency's designated LDH region(s).

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3087 (November 2013), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

Subchapter B. Administration and Organization

§515. Business Location and Operations

A. Each support coordination agency shall have a business location which shall not be in an occupied personal residence. The business location shall be in the LDH region for which the certification is issued and shall be where the agency:

A.1. - B.6. ...

C. Records and other confidential information shall be secure and protected from unauthorized access.

D. Each support coordination agency must utilize business issued email accounts that are private, secure, and HIPAA compliant, and must not use publicly available email addresses.

E. All email that involves PHI must be sent utilizing a secure email process.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3088 (November 2013),

amended LR 40:1936 (October 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§519. Policy and Procedures

A. The support coordination agency shall have written policies and procedures approved by the owner or governing body which must be implemented and followed that address at a minimum the following:

1. - 4. ...
5. statewide criminal history background checks;
6. database checks upon hire and monthly thereafter;
7. participant rights;
8. grievance procedures;
9. emergency preparedness;
10. abuse and neglect reporting;
11. critical incident reporting;
12. worker safety;
13. documentation; and
14. admission and discharge procedures.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3088 (November 2013),

amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§521. Organizational Communication

A. - C. ...

D. The support coordination agency shall be responsible for:

1. obtaining written approval of the brochure from OAAS prior to distributing to applicants/participants of OAAS-administered HCBS waiver programs;

2. - 3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3089 (November 2013), amended LR 40:1936 (October 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

Subchapter C. Provider Responsibilities

§525. General Provisions

A. Any entity wishing to provide support coordination services for any OAAS administered HCBS waiver program shall meet all of the standards for participation contained in this

Rule, unless otherwise specifically noted within these provisions.

B. The support coordination agency shall also abide by and adhere to any federal, state law, Rule, policy, procedure, performance agreement, manual or memorandum pertaining to the provision of support coordination services for OAAS administered HCBS waiver programs.

C. Failure to comply with the requirements of these standards for participation may result in sanctions including, but not limited to:

1. monetary sanctions;
2. suspension of payments;
3. recoupments;
4. cessation of linkages
5. citation of deficient practice and plan of correction submission;
6. removal from the freedom of choice list;
7. decertification as a support coordination agency for OAAS administered HCBS waiver services; and/or
8. termination of support coordination performance agreement.

D. ...

E. Designated representatives of the department, in the performance of their mandated duties, shall be allowed by a support coordination agency to:

1. inspect all aspects of a support coordination agency's operations which directly or indirectly impact participants; and

E.2. - G. ...

H. Support coordination agencies shall, at a minimum:

1. maintain and/or have access to a comprehensive resource directory containing all of the current inventory of existing formal and informal resources that identifies services within the geographic area which shall address the unique needs of participants of OAAS administered HCBS waiver programs;

2. ...

3. demonstrate knowledge of the eligibility requirements and application procedures for federal, state and local government assistance programs, which are applicable to participants of OAAS administered HCBS waiver programs;

4. - 5. ...

6. ensure that all agency staff are employed in accordance with Internal Revenue Service (IRS) and Department of Labor regulations (subcontracting of individual support coordinators and/or supervisors is prohibited);

7. have appropriate agency staff attend trainings, as mandated by LDH and OAAS;

8. - 9. ...

10. ensure each participant has freedom of choice in the selection of available qualified providers and the right to change providers in accordance with program guidelines; and

11. ensure that the agency and support coordinators will not provide both support coordination and Medicaid-reimbursed direct services to the same participant(s).

I. Abuse and Neglect. Support coordination agencies shall establish policies and procedures relative to the reporting of abuse and neglect of participants, pursuant to the provisions of R.S. 15:1504-1505, R.S. 40:2009.20 and any subsequently enacted laws. Providers shall ensure that staff complies with these regulations.

J. Ensure that statewide criminal history background checks are performed on all unlicensed persons working for the support coordination agency (SCA) in accordance with R.S. 40:1203.1 et seq. and/or other applicable state law upon hire;

1. ensure that the SCA does not hire unlicensed persons who have a conviction that bars employment in accordance with R.S. 40:1203.3 or other applicable state law;

a. the SCA shall maintain documentation on the final disposition of all charges that bars employment pursuant to applicable state law.

K. Ensure that all employees, including contractors, are not excluded from participation in the Medicaid programs by checking the databases upon hire and then monthly thereafter.

1. the SCA shall maintain documentation of the results of these database checks.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3089 (November 2013), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§527. Support Coordination Services

A. Support coordination is a mandatory service in the OAAS waiver programs that assists participants in gaining access to needed waiver and other state plan services, as well as needed medical, social, educational, housing and other services, regardless of the funding source for these services. Support coordination agencies shall be required to perform the following core elements of support coordination services:

1. intake;

2. assessment and re-assessment;
3. plan of care development and revision;
4. follow-up/monitoring;
5. critical incident management; and
6. transition discharge and closure.
7. - 9. Repealed

B. The support coordination agency shall also be responsible for completing the following functions:

1. linkage to direct services and other resources;
2. assessing, addressing and documenting delivery of services, including remediation of difficulties encountered by participants in receiving direct services;
3. coordination of multiple services among multiple providers;
4. ongoing assessment and mitigation of health, behavioral and personal safety risk; and
5. responding to participant crisis.

C. A support coordination agency shall not refuse to serve, or refuse to continue to serve, any individual who chooses/has chosen its agency unless there is documentation to support an inability to meet the individual's health and welfare needs, or all previous efforts to provide services and supports have failed and there is no option but to refuse services.

C.1. - D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3090 (November 2013), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§529. Transfers and Discharges

A. All participants of OAAS administered waiver programs must receive support coordination services. However, a participant has the right to choose a support coordination agency. This right includes the right to be discharged from his/her current support coordination agency and/or be transferred to another support coordination agency.

B. ...

C. The support coordination agency shall also have the responsibility of planning for a participant's transfer when the support coordination agency ceases to operate or when the participant moves from the geographical region serviced by the support coordination agency.

1. If a support coordination agency ceases to operate, the agency must give OAAS at least 60 calendar days written notice of its intent to close. Where transfer of participants is necessary due to the support coordination agency

closing, the written discharge summary for all participants served by the agency shall be completed within 10 working days of the notice to OAAS of the agency's intent to close.

D. - D.3 ...

E. The written discharge summary, along with the current plan of care, shall be completed and provided to the receiving support coordination (if applicable) agency and OAAS regional office, within five working days of any of the following:

1. - 2. ...

3. notice by the participant or authorized representative that the participant will be transferring to a LDH geographic region not serviced by his/her current support coordination agency; or

E.4. - F. ...

G. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3090 (November 2013), amended LR 40:1936 (October 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§531. Staffing Requirements

A. Agencies must maintain sufficient staff to comply with OAAS staffing, timelines, workload, and performance requirements. This includes, but is not limited to, including sufficient support coordinators and support coordination supervisors that have passed all of the OAAS training and certification requirements. At all times, an agency must have at least one certified support coordination supervisor and at least one certified support coordinator, both employed full time. Agencies may employ staff who are not certified to perform services or requirements other than assessment and care planning.

B. - B.2. ...

C. Agencies shall employ or contract a licensed registered nurse to serve as a consultant. The nurse consultant shall work a minimum of 16 hours per month.

D. ...

E. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3091 (November 2013), amended LR 40:1937 (October 2014), amended by the Department of

Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§533. Personnel Standards

A. Support coordinators must meet one of the following requirements:

1. a bachelor's or master's degree in social work from a program accredited by the Council on Social Work Education; or

2. a diploma, associate's, bachelor's or master's degree in nursing (RN) currently licensed in Louisiana; or

3. a bachelor's or master's degree in a human service related field which includes:

a. - i. ...

j. substance abuse;

k. gerontology; or

l. vocational rehabilitation; or

4. a bachelor's degree in liberal arts or general studies with a concentration of at least 16 hours in one of the fields in §533.A.3.a-1 of this Section; or

5. a bachelor's or master's degree in a field other than those listed in §533.A.1.- 4, if approved by OAAS.

B. Support coordination supervisors must meet the following requirements:

1. a bachelor's or master's degree in social work from a program accredited by the Council on Social Work Education; or

2. a bachelor's or master's degree in nursing (RN), currently licensed in Louisiana; or

3. a bachelor's or master's degree in a human service related field which includes: psychology, education, counseling, social services, sociology, philosophy, family and participant sciences, criminal justice, rehabilitation services, child development, substance abuse, gerontology, and vocational rehabilitation; or

4. a bachelor's degree in liberal arts or general studies with a concentration of at least 16 hours in one of the following fields: psychology, education, counseling, social services, sociology, philosophy, family and participant sciences, criminal justice, rehab services, child development, substance abuse, gerontology, or vocational rehabilitation; or

5. a bachelor's or master's degree in a field other than those listed in §533.B.1.- 4, if approved by OAAS; and

6. have two years of paid post degree experience in providing support coordination services.

C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3091 (November 2013), amended LR 40:1937 (October 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§537. Orientation and Training

A. - B. ...

C. Orientation and training of at least 32 hours shall be provided by the agency to all newly hired support coordinators and support coordination supervisors within five working days of employment. The topics shall be agency/OAAS specific and shall include, at a minimum:

1. - 16. ...

D. Upon completion of the agency-provided training requirements set forth above, newly hired support coordinators and support coordination supervisors must successfully complete all OAAS assessment and care planning training (if applicable).

E. ...

F. All support coordinators and support coordination supervisors must complete a minimum of 16 hours of training per year. The 32 hours of orientation and initial training for support coordinators and support coordination supervisors required in the first 90 calendar days of employment may be

counted toward the 16 hour minimum annual training requirement.
Routine supervision shall not be considered training.

G. - H. ...

AUTHORITY NOTE: Promulgated in accordance with R.S.
36:254.

HISTORICAL NOTE: Promulgated by the Department of Health
and Hospitals, Bureau of Health Services Financing and the
Office of Aging and Adult Services, LR 39:3092 (November 2013),
amended LR 40:1937 (October 2014), amended by the Department of
Health, Bureau of Health Services Financing and the Office of
Aging and Adult Services, LR 50:

§543. Critical Incident Reporting

A. Support coordination agencies shall report critical
incidents according to established OAAS policy including timely
entries into the designated LDH critical incident database.

AUTHORITY NOTE: Promulgated in accordance with
R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of
Health and Hospitals, Bureau of Health Services Financing and
the Office of Aging and Adult Services, LR 39:3093 (November
2013), amended LR 40:1938 (October 2014), amended by the
Department of Health, Bureau of Health Services Financing and
the Office of Aging and Adult Services, LR 50:

§545. Participant Records

A. Participant records shall be maintained in the support coordinator's office. The support coordinator shall have a current record for each participant.

B. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3093 (November 2013), amended LR 40:1938 (October 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§547. Emergency Preparedness

A. Support coordination agencies shall ensure that each participant has an individual plan for dealing with emergencies and disasters and shall assist participants in identifying the specific resources available through family, friends, the neighborhood, and the community. The support coordination agency shall assess monthly whether the emergency plan information is current and effective and shall make changes accordingly.

B. - C. ...

D. The support coordination agency shall cooperate with the department and with the local or parish Office of Homeland

Security and Emergency Preparedness in the event of an emergency or disaster and shall provide information as requested.

E. The support coordination agency shall monitor weather warnings and watches as well as evacuation orders from local and state emergency preparedness officials.

F. - G. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3094 (November 2013), amended LR 40:1938 (October 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§551. Support Coordination Agency Monitoring

A. Support coordination agencies shall be monitored as outlined in the OAAS policies and procedures and the support coordination performance agreement.

B. - B.3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 39:3095 (November 2013),

amended LR 40:1939 (October 2014), amended by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 50:

§553. Workforce Retention Bonus Payments

A. - A.2. ...

B. Audit Procedures for Support Coordination Workforce Bonus Payments

B.1. - 5.b. ...

C. Sanctions for Support Coordination Workforce Bonus Payments

C.1.d. ...

§555. Cost Reporting Requirements

A. Support coordination agencies (SCAs) must submit annual cost reports with a fiscal year from July 1st through June 30th to the department to verify expenditures and to support rate setting for the services rendered to waiver participants.

B. Each SCA must complete the LDH approved cost report and submit the cost report(s) to the department no later than November 30th, which is five months after the state's fiscal year end date (June 30th).

C. When the SCA fails to submit the cost report by November 30th, which is five months after the state's fiscal year end date (June 30th), a penalty of 5 percent of the total

monthly payment for the first month and a progressive penalty of 5 percent of the total monthly payment for each succeeding month may be levied and withheld from the SCA's payment for each month that the cost report is due, not extended and not received. If no claims are submitted for payment during the time of the penalty implementation, the penalty will be imposed when the provider commences submitting claims for payment. The late filing penalty is non-refundable and not subject to an administrative appeal.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XIX of the Social Security Act.

HISTORICAL NOTE: Promulgated by the Department of Health, Bureau of Health Services Financing and the Office of Aging and Adult Services, LR 49:685 (April 2023), amended LR 50:

Implementation of the provisions of this Rule may be contingent upon the approval of the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), if it is determined that submission to CMS for review and approval is required.

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this

proposed Rule will have no impact on family functioning, stability and autonomy as described in R.S. 49:972.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973.

Small Business Analysis

In compliance with the Small Business Protection Act, the economic impact of this proposed Rule on small businesses has been considered. It is anticipated that this proposed Rule will have no impact on small businesses.

Provider Impact Statement

In compliance with House Concurrent Resolution (HCR) 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the staffing level requirements or qualifications required to provide the same level of service, no direct or indirect cost to the provider to provide the same level of service, and will have no impact on the provider's ability to provide the same level of service as described in HCR 170.

Public Comments

Interested persons may submit written comments to Kimberly Sullivan, JD, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030. Ms. Sullivan is responsible for responding to inquiries regarding this proposed Rule. The deadline for submitting written comments is at 4:30 p.m. on October 30, 2024.

Public Hearing

Interested persons may submit a written request to conduct a public hearing by U.S. mail to the Office of the Secretary ATTN: LDH Rulemaking Coordinator, Post Office Box 629, Baton Rouge, LA 70821-0629; however, such request must be received no later than 4:30 p.m. on October 10, 2024. If the criteria set forth in R.S. 49:961(B)(1) are satisfied, LDH will conduct a public hearing at 9:30 a.m. on October 31, 2024 in Room 118 of the Bienville Building, which is located at 628 North Fourth Street, Baton Rouge, LA. To confirm whether or not a public hearing will be held, interested persons should first call Allen Enger at (225) 342-1342 after October 10, 2024. If a public hearing is to be held, all interested persons are invited to attend and present data, views, comments, or arguments, orally or in writing.

Michael Harrington, MBA, MA

Secretary

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES**

Person Preparing Statement:	Lyrica Johnson	Dept.:	Health
Phone:	342-6375	Office:	Bureau of Health Services Financing
Return Address:	P.O. Box 91030	Rule Title:	Home and Community-Based Services Waiver
	Baton Rouge LA	Date Rule Takes Effect:	Supports Coordination Standards for Participation December 20, 2024

SUMMARY
(Use complete sentences)

In accordance with Section 961 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a fiscal and economic impact statement on the rule proposed for adoption, repeal or amendment. THE FOLLOWING STATEMENTS SUMMARIZE ATTACHED WORKSHEETS, I THROUGH IV AND WILL BE PUBLISHED IN THE LOUISIANA REGISTER WITH THE PROPOSED AGENCY RULE.

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

It is anticipated that implementation of this proposed rule will have no programmatic fiscal impact to the state other than the cost of promulgation for FY 24-25. It is anticipated that \$2,916 (\$1,458 SGF and \$1,458 FED) will be expended in FY 24-25 for the state's administrative expense for promulgation of this proposed rule and the final rule

This proposed rule amends the provisions governing Support Coordination Standards for Participation to align the administrative rule with current policy and procedures under the home and community-based (HBCS) waivers relative to general provisions, administration and organization, provider responsibilities, and to establish cost reporting requirements for support coordination agencies providing waiver services.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

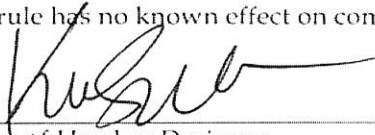
It is anticipated that the implementation of this proposed rule will have no effect on revenue collections other than the federal share of the promulgation costs for FY 24-25. It is anticipated that \$1,458 will be collected in FY 24-25 for the federal share of the expense for promulgation of this proposed rule and the final rule.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NON-GOVERNMENTAL GROUPS (Summary)

This proposed rule amends the provisions governing Support Coordination Standards for Participation to align the administrative rule with current policy and procedures under the Home and Community-Based Services (HCBS) Waivers relative to general provisions, administration and organization, provider responsibilities, and to establish cost reporting requirements for support coordination agencies providing waiver services. Implementation of this proposed rule will not result in costs to providers and small businesses in FY 24-25, FY 25-26, and FY 26-27.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

This rule has no known effect on competition and employment.



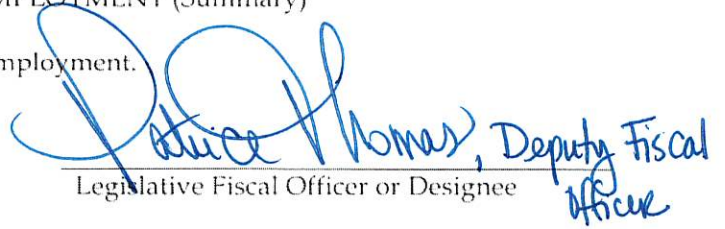
Signature of Head or Designee

Kimberly Sullivan, JD
Medicaid Executive Director

Typed Name & Title of Agency Head or Designee

9.10.24

Date of Signature



Patricia Thomas, Deputy Fiscal Officer

Legislative Fiscal Officer or Designee

9/10/2024

Date of Signature