



# **Individualized Skills and Socialization Frequently Asked Questions**

In 2014, the Centers for Medicare & Medicaid Services (CMS) issued regulations governing the settings in which Medicaid home and community-based services (HCBS) are provided. To comply with the regulations, HHSC will replace existing day habilitation services in the Deaf Blind with Multiple Disabilities (DBMD), Home and Community-based Services (HCS), and Texas Home Living (TxHmL) waiver programs with a new service for individuals with intellectual and developmental disabilities. This new, more integrated service is called Individualized Skills and Socialization.

The Texas Health and Human Services Commission (HHSC) is committed to sharing pertinent information about the Individualized Skills and Socialization services program with service providers via this regularly updated Frequently Asked Questions (FAQs) document.

**This FAQ document was revised on 7/25/2023.**

With each update, new questions will be identified with the date that they were added. If guidance changes, it will be identified in red font as added or deleted text. Questions regarding these FAQs can be directed to Long-term Care Regulatory Policy and Rules at 512-438-3161 or [LTCRPolicy@hhs.Texas.gov](mailto:LTCRPolicy@hhs.Texas.gov).

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# Table of Changes

Date	Change	Comments
1/10/2023	Added questions and answers from the LTCR Nov. 30 <sup>th</sup> webinar	Revisions to licensing, training, and abuse, neglect, and exploitation sections of FAQ.
2/1/2023	Added questions and answers from the Electronic Visit Verification and Medicaid Long-term Services and Support teams.	New Q&A beginning on page 34 about EVV and Medicaid program requirements.
3/9/2023	Added questions and answers from the LTCR Jan. 26 <sup>th</sup> webinar	Revisions made to LTCR Licensing, Abuse, Neglect, and Exploitation, LTCR Program Requirements, Medicaid program requirements, and EVV sections of FAQ.
7/25/2023	Added questions and answers related to end of COVID-19 PHE, and topics discussed during ongoing Individualized Skills and Socialization Basic Program Overview Webinars.	Revisions made to LTCR Licensing and Program Requirements, LTCR Rules on Reporting to HHSC, EVV, and Medicaid Program Rules and requirements sections of FAQ. Added additional sections, including Training and Webinars, Enforcement, and HHSC LTCR Surveys, with Subsections and hyperlinks added throughout document.

# Acronyms

BH- Behavioral Health  
CII - Complaint and Incident Intake  
CIMS - Critical Incident Management System  
DAHS - Day Activity Health Services  
DBMD - Deaf Blind with Multiple Disabilities  
HCS - Home and Community-based Services  
HHCC- Home Health/Companion Care  
HHSC - Health and Human Services Commission  
ICF - Intermediate Care Facility  
IDD - Intellectual and Developmental Disabilities  
IPC - Individual plan of care  
IPP - Individual program plan  
LAR - Legally Authorized Representative  
LIDDA - Local Intellectual and Developmental Disabilities Authorities  
LSC - Life Safety Code  
LTCR - Long-term Care Regulation  
LTSS - Long-term Services and Supports  
MCS - Medicaid and CHIP Services  
PDP - Person-directed plan  
SPT- Service Planning Team  
TAC - Texas Administrative Code  
TMHP – Texas Medicaid Healthcare Partnership  
TULIP - Texas Unified Licensure Information Portal  
TxHmL - Texas Home Living

# LTCR Rules

## **When did the LTCR rules for Individualized Skills and Socialization become effective?**

The LTCR rules became effective January 1, 2023.

## **Where can I find the licensing requirements for Individualized Skills and Socialization in the LCTR rules?**

Individualized Skills and Socialization requirements can be found in [TAC Title 26, Subchapter H, Division 2.](#)

## **Which, if any, DAHS requirements will apply to Individualized Skills and Socialization providers?**

Individualized Skills and Socialization rules can be found under [TAC Title 26, Chapter 559, Subchapter H.](#)

Existing DAHS providers licensed as DAHS with Individualized Skills and Socialization must also meet the applicable [Life Safety Code](#) requirements for a DAHS license along with any local authority requirements.

**This rule number is different than the rules for HCS. Where are they located?**

LTCR rules for Individualized Skills and Socialization are located under [TAC Title 26 Chapter 559, Subchapter H](#).

## Medicaid Program Rules

**Where are the HCS, TxHmL, and DBMD rules for Individualized Skills and Socialization Located in TAC?**

For HCS, TxHmL, and DBMD providers, the program rules for Individualized Skills and Socialization can be found under the following:

- HCS: [TAC Title 26 Chapter 263 Subchapter L](#).
- TxHmL: [TAC Title 26 Chapter 262 Subchapter J](#).
- DBMD: [TAC Title 26 Chapter 260 Subchapter I](#).

*Answers to frequently asked questions specific to the Medicaid program rules for Individualized Skills and Socialization can be found under the [Medicaid Program Rules and Requirements](#) section of this FAQ document.*

# LTCR Licensing and Program Requirements

## General Licensing Questions

**I have been trying to apply for the license for Individualized Skills and Socialization and I am experiencing issues with my application. Who do I contact for help?**

For this situation, please email [LTC\\_NF\\_DAHS\\_Licensing@hhs.texas.gov](mailto:LTC_NF_DAHS_Licensing@hhs.texas.gov) and include Individualized Skills and Socialization in the subject line.

**If clients in a group home go to the park or the library for individualized socialization, do you need a license to provide this? If so, which type of license?**

Anyone who wishes to provide off-site Individualized Skills and Socialization services must apply for and obtain a Day Activity Health Services – Individualized Skills and Socialization license through TULIP. Information about the licensing and regulatory program requirements are located in [TAC Title 26 Chapter 559, Subchapter H](#).

**We are having trouble with adding an application for an additional service location and support staff have stated that they are not able to guide us through that process. Can you help?**

For this situation, please email [LTC\\_NF\\_DAHSLicensing@hhs.texas.gov](mailto:LTC_NF_DAHSLicensing@hhs.texas.gov) and include Individualized Skills and Socialization in the subject line.

**Does the licensed capacity apply to only HCS clients. TxHmL clients, or clients of all funding sources (private pay, etc.)?**

Licensed capacity refers to the maximum number of individuals, regardless of funding sources, who receive services in the facility (on-site) or through off-site services at any one time.

**Are private day habilitation providers required to get license to still get funding?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only.

**Will we be able to provide Individualized Skills and Socialization with a temporary license?**

Yes. A temporary license is a license to operate in the name of the licensed legal entity.

**Is there a time frame for established agencies to complete the application?**

The licensing process is dependent on numerous factors, including the completeness of the submitted application, the number of applications received, and how quickly the applicant responds to deficiencies.

**If we currently have a DAHS license, do we have to apply for the license DAHS with Individualized Skills and Socialization?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only. Individualized Skills and Socialization services cannot be provided under the current DAHS license.

**Will the license be mailed or emailed?**

The license will be emailed.

**When can current day habilitation providers apply for license?**

The license application process is currently available.

**Will day habilitation sites be considered DAHS facilities or independent Individualized Skills and Socialization facilities?**

A provider that obtains the new license will be a provider licensed by HHSC as a DAHS to provide Individualized Skills and Socialization services.

**Can home health service providers deliver Individualized Skills and Socialization services.**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only. This is regardless of what other licenses the provider has.

**What is the difference between a DAHS "with" Individualized Skills and Socialization and DAHS - Individualized Skills and Socialization "only?"**

DAHS with Individualized Skills and Socialization is a license for providers who are going to be providing traditional DAHS services along with Individualized Skills and Socialization services. DAHS-Individualized Skills and Socialization Only is a license for providers who are only going to be providing Individualized Skills and Socialization services.

**Some providers state that HCS providers will be grandfathered into the Individualized Skills and Socialization program, does this mean that HCS provider actually do not have to apply for a DAHS- Individualized Skills and Socialization license?**

No, any HCS, TxHmL, or DBMD provider who want to deliver Individualized Skills and Socialization directly to individuals will be required to obtain a license.

**Do all HCS providers need to obtain a license if they are not anticipating on providing these services and are sending their clients to a licensed provider?**

Only HCS providers who are interested in providing Individualized Skills and Socialization services are required to obtain a DAHS Individualized Skills and Socialization license.

**Do we need to get an NPI number?**

An NPI number is not required for a DAHS license.

**Do I need to change my business to an LLC?**

No, in the application, when the business entity is entered, there is a drop-down for type of entity and gives multiple options related to the type of business that it already is.

**If we currently offer day habilitation services through our HCS program, will we be required to obtain the Individualized Skills and Socialization services license?**

Yes, providers will need to have a DAHS license to provide Individualized Skills and Socialization services. This service replaces day habilitation for the HCS, TxHmL, and DBMD programs.

**Do host home providers conducting day habilitation without walls need to have an Individualized Skills and Socialization license?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only. There is an option to be an offsite only provider.

**Would current DAHS providers provide these new services and carry multiple licenses?**

A current DAHS provider may choose to obtain this new license, but the licenses and services have separate requirements.

**If I have a day habilitation group that is primarily off-site only, how often do the individuals need to come on-site to be included in that sites contract and not have 2 separate Individualized Skills and Socialization contracts?**

Individualized Skills and Socialization services should be provided based on the individual's plan. If this question is about licensure and how many licenses are needed, each onsite location must have a separate license. Each licensee that offers on-site services must also offer off-site services.

**If you will be providing Individualized Skills and Socialization services to HCS and DBMD, do you need to apply for two separate licenses?**

The provider type field is included to capture what type of provider the applicant is. If the provider is a DBMD provider, choose that one. If the provider plans to subcontract with a DBMD provider, select that option.

**Must each "DAHS - Individualized Skills and Socialization only" list each HCS provider agency's component and vendor/contract number they will subcontract with on Item 11 of the application?**

Yes.

**If we are currently pending licensing, can we just add this additional license?**

If the provider has submitted an application for a DAHS license, then they will need to submit an application for a DAHS license with the appropriate category.

**If we are providing off-site and on-site only for record keeping site, are we allowed to provide day activities on-site?**

If the applicant is providing on-site activities, then they should select 'Onsite and Offsite' on provision of services.

**If we have always only been DAHS and never a DBMD, HCS, or TxHmL program, which licensure option do we choose?**

If the provider is providing Individualized Skills and Socialization services to HCS, TxHmL, or DBMD individuals by contracting with the comprehensive provider, choose the subcontracts with HCS, TxHmL, or DBMD provider option.

**If we are a current DAHS and always have been, do we need to transfer to one of these two new options?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS - Individualized

Skills and Socialization Only. If the provider is currently a licensed DAHS and will be providing Individualized Skills and Socialization services, the provider will need to submit an initial application to add the new category.

**How are these two new options different from the current DAHS program that we have always known?**

The DAHS with Individualized Skills and Socialization license is the same as the traditional DAHS license with the addition of the Individualized Skills and Socialization requirements as defined in [26 TAC 559, subchapter H](#). The DAHS - Individualized Skills and Socialization license only is required to adhere to [26 TAC 559, subchapter H](#).

**If we are a current DAHS facility, can we choose to just stay DAHS? Which option would we choose?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS - Individualized Skills and Socialization Only. If the provider is currently a licensed DAHS and will be providing Individualized Skills and Socialization services, the provider will need to submit an initial application to add the new category.

**When would you need both licenses rather than an Individualized Skills and Socialization only license?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS - Individualized Skills and Socialization Only. If the provider is currently a licensed DAHS and will be providing Individualized Skills and Socialization services, the provider will need to submit an initial application to add the new category.

**If an existing HCS provider plans to operate DAHS - Individualized Skills and Socialization in multiple locations, will a separate license be required for each location?**

Yes. Each license will have an address on the license.

**Must all DAHS programs be licensed to provide skills and socialization if they are already providing services to our clients?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only.

**Is this new license only for DBMD?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only.

**I just passed my DAHS life safety code visit. Do I go back and resubmit an additional**

**application?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only. If the provider will provide traditional DAHS services as well as Individualized Skills and Socialization services, the provider needs to submit a DAHS with Individualized Skills and Socialization application. If the provider will only provide Individualized Skills and Socialization services, the provider needs to submit an application for DAHS- Individualized Skills and Socialization Only.

**If we have a day habilitation site and Individualized Skills and Socialization is replacing dayhab services, the dayhab site is what must be licensed right, not an office associated with the dayhab?**

A license is needed for the location of where the onsite services are being delivered.

**Can you use your HCS company name for the Individualized Skills and Socialization license?**

The license will be issued to the legal entity entered into ownership section of the application. This name may be the name of the HCS legal entity.

**What do we select if we are a non-profit organization with a board of directors?**

When the entity to be licensed is entered into TULIP, the business entity type of non-profit can be chosen. Other individuals that need to be entered can be entered as owners with zero percent ownership interest.

**If we have any activities in our leased facility does that make us DAHS with Individualized Skills and Socialization provider?**

DAHS with Individualized Skills and Socialization is a license for providers who are going to be providing traditional DAHS services along with Individualized Skills and Socialization services. DAHS-Individualized Skills and Socialization Only is a license for providers who are only going to be providing Individualized Skills and Socialization services.

**Since "dayhab" will no longer be what it is called, will the name of my business have to be changed if my facility has the wording "Day Hab" in it?**

The name of the business/facility is a business decision and would not need to change in order to become licensed.

**Can you have more than one security authority?**

Yes.

**We are a very small non-profit Day Hab center offering services Monday - Friday. 60% of our clients are TxHmL, HCS, DBMD where providers pay us directly. Do we still need to apply for a license, and will it be DAHS - Individualized Skills and Socialization only or are we considered a Contractor/Subcontractor?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only. If the provider will not be providing traditional DAHS service and only Individualized Skills and Socialization services, the provider would need to apply for a DAHS-Individualized Skills and Socialization Only license.

**We are an HCS provider and we do not operate a Day Hab- other than support those day habs we contract with. Do we need to obtain a license?**

No. Only the providers who are directly providing Individualized Skills and Socialization services will need to be licensed.

**Will this be the same as having an adult day care?**

Providers providing 'adult day care' services are now licensed under a traditional DAHS license. For providers providing Individualized Skills and Socialization services only, the DAHS-Individualized Skills and Socialization Services Only license has very different requirements than the traditional DAHS license.

**Can we have a DAHS license and a separate DAHS - Individualized Skills and Socialization license?**

If the licenses are in the same building, it is a business decision on whether each location has a separate license or whether one license (DAHS with Individualized Skills and Socialization) is obtained. However, if two licenses are obtained, it must meet the DAHS Life Safety Code requirements and have separation between the two licensed locations.

**If a center licenses as a DAHS provider and the center serves ICF individuals- are the ICF clients subject to the DAHS rule requirements?**

All individuals served at the onsite location under the DAHS license is subject to the requirements of the applicable rule.

**We have a family member who provides Host Home/Companion Care provider in the HCS Waiver program, who also currently provides her own day habilitation services to her son and daughter. Will that person be required to get a DAHS- Individualized Skills and Socialization license?**

Anyone who wants to deliver these services must apply for and obtain an Individualized Skills and Socialization license.

**For providers who do not have a facility day program, what are we required to do, license wise?**

Anyone who wishes to provide Individualized Skills and Socialization services must apply for and obtain a Day Activity Health Services – Individualized Skills and Socialization license. Information about the licensing and regulatory program requirements are located in [TAC Title 26 Chapter 559, Subchapter H.](#)

**Do HCS providers who do not have a facility providing DH now, have to be licenses?**

Anyone who wishes to provide Individualized Skills and Socialization services must apply for and obtain a Day Activity Health Services – Individualized Skills and Socialization license. Information about the licensing and regulatory program requirements are located in [TAC Title 26 Chapter 559, Subchapter H.](#)

**Can we take the clients out to eat in the on-site portion of Individualized Skills and Socialization?**

Services provided outside of the on-site location would be considered off-Site Individualized Skills and Socialization.

**Can we deliver just on-site Individualized Skills and Socialization with DAHS?**

An Individualized Skills and Socialization provider must make both on-site and off-site Individualized Skills and Socialization available to an individual, unless the Individualized Skills and Socialization provider provides off-site Individualized Skills and Socialization only.

**If clients in a group home go to the park or the library for individualized socialization, do you need a license to provide this and if so which type of license?**

Anyone who wishes to provide Individualized Skills and Socialization services must apply for and obtain a Day Activity Health Services – Individualized Skills and Socialization license through TULIP. Information about the licensing and regulatory program requirements are located in [TAC Title 26 Chapter 559, Subchapter H.](#)

**Will a license be required per agency (component code) or per location of the site where services will be provided? For example: If I have 3 day habilitation sites, will I need 3 licenses?**

Each physical location will require its own license and application process.

**If you act as a DBA which name should be provided on the license?**

The DBA should be disclosed in the application.

**If we have a day habilitation that contracts with providers, do we need to apply for license?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only.

## **Licensing Application**

**Is it possible to have the template for the license application sent to us so we can ensure we have all the information needed when completing the application?**

The licensure application only exists in TULIP. The screenshots provided in the presentation were taken directly from TULIP.

**Can you request a license more than the number of years you got on the application number?**

A provider cannot request a longer term for the license. The staggering is automatically completed by TULIP.

**If the HCS provider does not own the day habilitation site, are they required to submit an application and get approved going forward?**

Only providers who will provide Individualized Skills and Socialization services are required to have a DAHS license.

**As a company we have multiple locations that require separate licenses. Are we providing the Facility Name, Mailing and physical address of the facility or the company information?**

Yes. This information will be included in the initial licensure application.

**What is a facility email address - do you mean the administrator's email address?**

The facility email address is the main email address for the facility. It could be the administrator's email address. However, note that if the administrator leaves and the email address is specific to them, this could cause delays in receiving emails until it can be corrected.

**We were told we need to complete a DAHS only application. Out of the 3 options given: Traditional DAHS, DAHS with Individualized Skills and Socialization only, and DAHS with Individualized Skills and Socialization, which of these is the DAHS only application for which we should apply?**

If you are providing traditional DAHS services only, and not providing Individualized Skills and Socialization, you will complete a traditional DAHS application. If you wish to provide DAHS with Individualized Skills and Socialization, you will complete that application. If you wish to provide only Individualized Skills and Socialization, you will select the DAHS-Individualized Skills and Socialization only application.

**If you have a DAHS license, do you need to apply for Individualized Skills and Socialization licensing?**

To provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only. Individualized Skills and Socialization services cannot be provided under the current DAHS license.

**Can I be a corporation and apply as owner on application?**

Yes.

**How do we know if we are to fill out the DAHS, DAHS w/ Individualized Skills and Socialization or DAHS an Individualized Skills and Socialization ONLY application?**

The type of application will depend on the type of services that will be provided.

- Traditional DAHS services only: DAHS license
- Traditional DAHS services and Individualized Skills and Socialization services: DAHS with Individualized Skills and Socialization license
- Individualized Skills and Socialization services only: DAHS-Individualized Skills and Socialization Only license

**Does the number you will serve under your license include a total of both onsite and offsite clients?**

Yes.

**For step 4 on the application, what do you check if you serve both HCS/TxHmL and DBMD services?**

If the provider subcontracts with both HCS/TxHmL and DBMD to provide Individualized Skills and Socialization, select the option that relates to subcontracting.

**If you are current HCS provider with a dayhab with an existing EIN number, do you still need to submit forms 3720?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only.

**If we decide to close up shop and discontinue our HCS program due to the staffing requirements prior to the implementation of 3/1/23, will our \$75 per site license fee be reimbursed?**

Licensure fees are non-refundable.

**The licensing fees are due yearly or every three years?**

Depending on the license received based on the staggering logic, a renewal application for the license may be due in one, two, or three years. Every subsequent renewal application for the license will be due in three years.

**Do we have to complete two applications if you want to provide on-site and off-site services?**

No. If the provider is providing both onsite and offsite services, there is a selection in Item 11 of the application to indicate that.

**How long will it take to complete and be approved for the licensure through TULIP when it becomes available?**

The amount of time for the licensure process is dependent on multiple variables, including the completeness of the application, the responsiveness of the applicant related to

deficiencies, and the time related to having a successful survey. HHSC is dedicated to allocating resources to the initial licensure process to mitigate these variables.

**If we have a day habilitation site and Individualized Skills and Socialization is replacing dayhab services, the dayhab site is what must be licensed right, not an office associated with the dayhab?**

A license is needed for the location of where the onsite services are being delivered.

**Can you still apply for the license if you do not yet have a facility?**

In order to apply for a DAHS - Individualized Skills and Socialization license where the provider will be providing onsite and offsite Individualized Skills and Socialization services, the applicant would need the location of the where the onsite services will be provided in order to submit the application.

**Is having a facility a requirement for new providers that are applying for licensure?**

In order to apply for a DAHS license where the provider will be providing onsite and offsite Individualized Skills and Socialization services, the applicant would need the location of the where the onsite services will be provided in order to submit the application.

**Can a provider receive a license without having a facility?**

In order to apply for a DAHS license where the provider will be providing onsite and offsite Individualized Skills and Socialization services, the applicant would need the location of the where the onsite services will be provided in order to submit the application. If the provider is providing offsite services *only*, the applicant would need a business location where the records are being kept in order to submit the application.

**When is the application due?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS-Individualized Skills and Socialization Only.

**If you are two separate entities, however located in the same building but in different suite numbers/floors can one entity apply for on-site and one for off-site? Is that acceptable?**

For each provider that is providing onsite services, they must also provide offsite services. There is an allowance for a provider to only provide offsite services.

**We are an agency that has 7 different sites that provide DH services. 5 of those are located in our rural areas. The facilities are not owned by the agency but by an Advisory Board. Who is the owner? Who do we put on the application? Our CEO or the Advisory Board president?**

The legal entity that is entered first into the application will be the legal entity that will be licensed. It is a business decision on who will be the 'owner' of the DAHS license.

However, all owners with 5% or more cumulative ownership in the licensed legal entity must be disclosed. As to disclosing the controlling parties, it is only required to report the CEO.

**Is it necessary to include board member with 0% under ownership tab?**

The only controlling party that is required to be disclosed, that could potentially have zero percent interest is the CEO.

**If temporary licenses are only issues for DAHS - Individualized Skills and Socialization only, then how will DAHS and Individualized Skills and Socialization providers be able to operate if they will not receive a license?**

A temporary license is a license to operate in the name of the licensed legal entity and has the same standing as a full license.

**Where can we get a copy of our license?**

To obtain a copy of a license for a currently licensed DAHS, email LTC\_NF\_DAHS\_Licensing@hhs.texas.gov. Please include your license number and/or your facility ID.

**If I have a day habilitation group that is primarily off-site only, how often do the individuals need to come on-site to be included in that sites contract and not have 2 separate Individualized Skills and Socialization contracts?**

Individualized Skills and Socialization services should be provided based on the individual's plan. If this question is about licensure and how many licenses are needed, each onsite location must have a separate license. Each licensee that offers onsite services must also offer offsite services.

**If we have an ICF & HCS group home program, do we do DAHS - Individualized Skills and Socialization application?**

In order to provide Individualized Skills and Socialization services, the provider must be licensed as a DAHS with Individualized Skills and Socialization or a DAHS - Individualized Skills and Socialization Only.

**On the application, what do we choose for the facility size?**

Once a DAHS application (any of them) is selected, the facility size field will no longer be available.

**On the application do we add a facility ID?**

Once a license is issued, the facility ID will be created for that license/location.

**If they are in separate buildings at the same address, can you have a DAHS license and a separate DAHS - Individualized Skills and Socialization only with two different administrators?**

Yes.

**Will capacity take level of need into consideration or is just a general total number?**

Licensed capacity is based on the maximum number of individuals that the provider can serve. This number is determined by the provider and may be informed by building occupancy requirements, staff availability, and Medicaid program requirements for service delivery. Existing DAHS licensees who wish to add the DAHS-Individualized Skills and Socialization Services license must also comply with their current DAHS licensure requirements, including life safety code.

**Why would you need to subcontract? Could they not have a different HCS/Individualized Skills and Socialization provider?**

For comprehensive providers who do not provide Individualized Skills and Socialization services themselves and subcontract with a licensed entity to obtain these services, the licensed entity will list the contracts in the license application.

**How do we find out if a previous administrator had an account in the center's name?**

For questions related to registration, contact TULIP Support. Include Individualized Skills and Socialization in the subject line.

**On the application for item 11 - Provider Type: how do you answer if you are providing Individualized Skills and Socialization services to DBMD and HCS?**

The provider type field is included to capture what type of provider the applicant is. If the provider is a DBMD provider, choose that one. If the provider plans to subcontract with a DBMD provider, select that option.

**Do applicants need to add each HCS provider name, component code and contract numbers in section 11 of the application?**

If the licensed DAHS provider will be providing Individualized Skills and Socialization services on behalf of a comprehensive provider through a subcontract arrangement, these need to be entered into the application.

**In step 4 section 11 of the application, are the applicants required to list each HCS provider they contract with in that step or only if they are going to subcontract the Individualized Skills and Socialization services with another licensed DAHS provider?**

If the licensed DAHS provider will be providing Individualized Skills and Socialization services on behalf of a comprehensive provider through a subcontract arrangement, these need to be entered into the application.

**If you have a main office and the on-site services will be at another location, is there anywhere on the application to put the DAHS address as well?**

The license will be issued for the location of the DAHS, which will be listed as the physical address. If the main office is the mailing address, it could be entered there.

**Does this license apply for HCS waiver programs? We are not an ICF facility.**

In order to provide Individualized Skills and Socialization services, the provider must be licensed.

**On item 11-what if we are both an HCS provider but we also allow providers to contract with us for services?**

In this situation, choose the option for being an HCS provider.

**What is the 3720 Letter to the local health authority? What needs to be included in this letter and where can we find a template?**

The letter to the local health authority is only required for a DAHS or DAHS *with* Individualized Skills and Socialization application. There is not a template for the letter. The letter is to let the local health authority know that an application for a DAHS or DAHS *with* Individualized Skills and Socialization license has been submitted for that address.

**If our entity is a non-profit, how do we answer any ownership questions?**

When the entity to be licensed is entered into TULIP, the business entity type of non-profit can be chosen. Other individuals that need to be entered can be entered as owners with zero percent ownership interest.

**In the application, what exact training evidence is needed to be submitted?**

A copy of the certificate received at the end of the training can be uploaded into the documents tab of the application.

**If the DAHS - Individualized Skills and Socialization only provider is a current HCS provider and will subcontract with other providers for Individualized Skills and Socialization services how is that noted on the licensure application?**

In this situation, choose the option for being an HCS provider.

**If we have a current open DAHS application, can we swap or transfer it to the new Individualized Skills and Socialization license?**

Licensure applications in TULIP are independent of each other and cannot be transitioned between types.

**Is there an area on the application to add more than 1 subcontractor? Can providers also have a license and also subcontract with others?**

Yes, the application will allow you to add more than one entity that you subcontract with. The license is only required if you are directly providing Individualized Skills and Socialization services.

**My application only allows me the option to select initial application?**

Yes, the initial application is the correct selection.

**Are DBMD agency providers required to apply for the license. Or can the day habilitation site they are currently contracted with can apply for that license?**

The provider actually providing Individualized Skills and Socialization services would apply for the license.

**I have agencies that I currently contract with to provide day hab services for clients. I need them to provide their 'component number' and contract number to me and they will not. I need this information for the application. What do I do?**

For this situation, please email [LTC\\_NF\\_DAHSLicensing@hhs.texas.gov](mailto:LTC_NF_DAHSLicensing@hhs.texas.gov) and include Individualized Skills and Socialization in the subject line.

**I have been trying to apply for the license for Individualized Skills and Socialization and I am experiencing issues with my application. I have been emailing and my response is always the same.**

For this situation, please email [LTC\\_NF\\_DAHSLicensing@hhs.texas.gov](mailto:LTC_NF_DAHSLicensing@hhs.texas.gov) and include Individualized Skills and Socialization in the subject line.

**We were told we need to complete a DAHS only application. Out of the 3 options given: Traditional DAHS, DAHS with Individualized Skills and Socialization only, and DAHS with Individualized Skills and Socialization, which of these is the DAHS only application for which we should apply?**

If you are providing traditional DAHS services only, and not providing Individualized Skills and Socialization, you will complete a traditional DAHS application. If you wish to provide DAHS with Individualized Skills and Socialization, you will complete that application. If you wish to provide only Individualized Skills and Socialization, you will select the DAHS-Individualized Skills and Socialization only application.

## **Submitting Updates and Changes to HHSC**

**Can DAHS - Individualized Skills and Socialization initial capacity be adjusted after initial licensure?**

Yes. LTCR is working on an application process to update information related to the license.

**Our lease ends in February and we will probably be moving. However, the application will be submitted within 30 days. How do we update the address once we move?**

An update/change application will need to be submitted. However, the update/change application function in TULIP is currently being updated. If this type of change is needed at this time, please reach out to the Licensing specialist that issued your temporary license. If you are unable to locate that information, please contact [LTC\\_NF\\_DAHSLicensing@hhs.texas.gov](mailto:LTC_NF_DAHSLicensing@hhs.texas.gov).

**Does a licensed DAHS - Individualized Skills and Socialization only provider that plans to subcontract with other providers need to update/amend their license if additional subcontractors are added after the initial license?**

As information provided during the initial application process changes, an update/change application will need to be submitted to change the information. However, the update/change application function in TULIP is currently being updated. If this type of change is needed at this time, please reach out to the Licensing specialist that issued your temporary license. If you are unable to locate that information, please contact [LTC\\_NF\\_DAHS\\_Licensing@hhs.texas.gov](mailto:LTC_NF_DAHS_Licensing@hhs.texas.gov).

**What is the process to change the security authorizer for an entity if that person leaves the agency?**

If the only security authority leaves the organization, email TULIP Support to request a change of security authority.

**In regard to the Administrator, can 2 be assigned per site and are they both required to be degreed?**

One individual must be designated and fulfill all of the responsibilities in rule. This person is designated in the initial application. If this person changes, an update/change application must be submitted in TULIP to make the change. Delegation of responsibilities is allowed under rule, but the administrator is responsible.

**Do we have to report changes in administrators in TULIP?**

Yes. LTCR is working on an application process to update information related to the license.

**What if we want to change the name or Doing Business As (DBA) information for the DAHS Individualized Skills and Socialization facility? Does it have any effect on the license? Do I need to apply for a new license if I change the name?**

If the name (legal entity name or DBA) changes, a provider must submit an update/change application in TULIP to make the change on the license. The provider would not receive a new license, just an updated one.

## **Texas Unified Licensure Portal (TULIP)**

**If we have a TULIP account already, how do I add a new member?**

If the applicant already has a TULIP account, the provider applications are available. It is not necessary to click the 'Add New Member' option.

**What if you have TULIP account with another type of agency?**

Only one TULIP account is needed. The provider can simply log into TULIP and see the provider applications.

**The application will not allow me to put a number other than "zero" for**

**capacity. How can I correct that?**

For this issue, please email TULIP Support at [TULIP\\_Support@hhsc.state.tx.us](mailto:TULIP_Support@hhsc.state.tx.us) and include the LTCR Director of Licensing and Credentialing on the email. Include Individualized Skills and Socialization in the subject line.

**I have a registration problem in TULIP.**

For registration problems, contact TULIP Support ([TULIP\\_Support@hhsc.state.tx.us](mailto:TULIP_Support@hhsc.state.tx.us)).

**What should applicants put in the subject line to TULIP Support?**

For emails sent to TULIP Support, it is suggested that the subject line contain "Individualized Skills and Socialization."

**Our current login information for TULIP does not work. We have contacted TULIP support to help reset it, but they were not able to reset and escalated to Salesforce 3 weeks ago. Is there someone else we should ask for help?**

For this situation, contact TULIP Support again and include the Director of Licensing and Credentialing on the email. Include "Individualized Skills and Socialization" in the subject line.

**TULIP is not allowing access if you already have an email address tied to another WSC account with HHSC. This was addressed by IT with HHSC but no resolution. We cannot access TULIP at this time. When is the fix expected?**

For this situation, contact TULIP Support again and include the Director of Licensing and Credentialing on the email. Include "Individualized Skills and Socialization" in the subject line.

**I am having issues with registering in TULIP. I get an error message that states that my business has been found but is unregistered and that I must register the business using the registration code sent by HHSC. I do not have a registration code so how do i get registered for TULIP?**

For this situation, contact TULIP Support again and include the Director of Licensing and Credentialing on the email. Include Individualized Skills and Socialization in the subject line.

**How much is the TULIP application fee?**

The license fee will depend on whether the applicant will receive a one, two, or three-year license. The fees are respectively, \$25, \$50, and \$75.

**While applying for the license we were told the agency had previously started an application. We tried to change our password and were not allowed. We emailed for assistance and have not received a reply?**

LTCR Policy and Rules is unable to troubleshoot TULIP issues. For more information on

TULIP, you may visit HHSC's TULIP Online Licensure Application System website for trainings, guides, and answers to frequently asked questions. The training guide on this website can help you register for access. For TULIP questions and support, you may contact TULIP Support at [TULIP\\_Support@hhsc.state.tx.us](mailto:TULIP_Support@hhsc.state.tx.us).

**Since Individualized Skills and Socialization was announced, I have tried to get access to TULIP. First, it was my password and now it is that while I am registered in TULIP, it is not linked somehow. How do you all expect us to go live in March when these problems are prevalent?**

LTCR Policy and Rules is unable to troubleshoot TULIP issues. For more information on TULIP, you may visit HHSC's TULIP Online Licensure Application System website for trainings, guides, and answers to frequently asked questions. The training guide on this website can help you register for access. For TULIP questions and support, you may contact TULIP Support at [TULIP\\_Support@hhsc.state.tx.us](mailto:TULIP_Support@hhsc.state.tx.us).  
We are having problems with setting up multiple licenses in TULIP. What do we do?

LTCR Policy and Rules is unable to troubleshoot TULIP or application issues. For more information on TULIP, you may visit HHSC's TULIP Online Licensure Application System website for trainings, guides, and answers to frequently asked questions. The training guide on this website can help you register for access. For TULIP questions and support, you may contact TULIP Support at [TULIP\\_Support@hhsc.state.tx.us](mailto:TULIP_Support@hhsc.state.tx.us). For questions regarding a licensing application, you may contact Provider Licensing at [LTC\\_NF\\_DAHS\\_Licensing@hhs.texas.gov](mailto:LTC_NF_DAHS_Licensing@hhs.texas.gov), or you may call the Provider Licensure and Certification Call Center at (512) 438-2630.

## **Provider Directory**

**Will the directory specify if a provider is Individualized Skills and Socialization only and not traditional DAHS?**

Yes.

**My current day habilitation provider is not listed on the DAHS licensed directory. Will they have to be licensed to continue contracting to provide services?**

The DAHS directory will only contain those providers who have been issued a DAHS, DAHS *with* Individualized Skills and Socialization services, or DAHS - Individualized Skills and Socialization Services Only license. The directory can be found here:  
<https://www.hhs.texas.gov/providers/long-term-care-providers/day-activity-health-services-dahs>

**How does HHSC want Individualized Skills and Socialization providers to register - DAHS only or DAHS with Individualized Skills and Socialization?**

The licensure process is the 'registering' process. The 'registry' will be the DAHS Directory on the HHSC Website. The provider should apply for the type of license applicable to the type of services they will provide.

The directory can be found here: <https://www.hhs.texas.gov/providers/long-term-care-providers/day-activity-health-services-dahs>

**Will there be a list of all Individualized Skills and Socialization providers licensed throughout the state?**

The DAHS directory will contain DAHS, DAHS with Individualized Skills and Socialization Services, and DAHS - Individualized Skills and Socialization Services Only license. The directory can be found here: <https://www.hhs.texas.gov/providers/long-term-care-providers/day-activity-health-services-dahs>

**On <https://service.govdelivery.com/accounts/TXHHSC/subscriber/topics> what subscription topic should we subscribe to, to get updates about updates regarding Individualized Skills and Socialization and DAHS?**

You can subscribe to Individualized Skills and Socialization GovDelivery updates at the following link:

[https://public.govdelivery.com/accounts/TXHHSC/subscriber/new?topic\\_id=TXHHSC\\_867](https://public.govdelivery.com/accounts/TXHHSC/subscriber/new?topic_id=TXHHSC_867)

**Will Individualized Skills and Socialization providers be added to the LTC Search page?**

A directory of providers who have been issued a DAHS, DAHS with Individualized Skills and Socialization services, or DAHS - Individualized Skills and Socialization Services Only license is accessible through the [HHSC Long-Term Care Provider website for Day Activity Health Services \(DAHS\)](#). HHSC is working on updating the LTC Search Page to incorporate providers in this program. Those with existing DAHS licenses/DAHS with Individualized Skills and Socialization, may be found under Day Activity Health Services (DAHS) on the LTC Search page.

**If HCS and TxHmL providers contract with other day habilitation sites right now, do we need to make sure they are DAHS providers and if so, how?**

Providers who subcontract with Individualized Skills and Socialization providers will need to check the DAHS Directory on the HHSC Website to ensure that the provider is licensed.

The directory can be found here: <https://www.hhs.texas.gov/providers/long-term-care-providers/day-activity-health-services-dahs>

**Does the list of providers differentiate who are the Individualized Skills and Socialization providers?**

A directory of providers who have been issued a DAHS, DAHS with Individualized Skills and Socialization services, or DAHS - Individualized Skills and Socialization Services Only license should be accessible through the [HHSC Long-Term Care Provider website for Day Activity Health Services \(DAHS\)](#).

**As a LIDDA, how will we be able to identify/confirm if a provider has obtained their Individualized Skills and Socialization license?**

A directory of providers who have been issued a DAHS, DAHS with Individualized Skills and Socialization services, or DAHS - Individualized Skills and Socialization Services Only license is accessible through the [HHSC Long-Term Care Provider website for Day Activity Health Services \(DAHS\)](#).

**Can you provide list of Individualized Skills and Socialization providers for zip code 78738?**

A directory of providers who have been issued a DAHS, DAHS with Individualized Skills and Socialization services, or DAHS - Individualized Skills and Socialization Services Only license is accessible through the [HHSC Long-Term Care Provider website for Day Activity Health Services \(DAHS\)](#).

## **Pre-Licensure Training**

**Is the initial application training required to all staff?**

The pre-licensure training is required for the administrator, but not limited to them. Other staff may take the training as well.

**I completed the pre- licensure computer-based training. I completed the application for the TULIP. When I submitted, it states I need a code to register. How can I get the code?**

LTCR Policy and Rules is unable to troubleshoot TULIP or application issues. For more information on TULIP, you may visit HHSC’s TULIP Online Licensure Application System website for trainings, guides, and answers to frequently asked questions. The training guide on this website can help you register for access. For TULIP questions and support, you may contact TULIP Support at TULIP\_Support@hhsc.state.tx.us. For questions regarding a licensing application, you may contact Provider Licensing at LTC\_NF\_DAHS\_Licensing@hhs.texas.gov or you may call the Provider Licensure and Certification Call Center at (512) 438-2630..

# **LTCR Provider Requirements**

## **Criminal History and Registry Checks**

**What are the pre- and post-employment requirements for criminal history and registry checks?**

In addition to complying with the Texas Health and Safety Code regarding initial criminal history checks prior to offering employment to any person, including potential subcontractors and volunteers, an Individualized Skills and Socialization provider must search the:

- [Employee misconduct registry \(EMR\)](#);
- [Nurse aide registry \(NAR\)](#);
- [Medication aide registry \(MAR\)](#)- (this is the same link as NAR, but you will select Texas Medication Aide under certification program);

- [List of Excluded Individuals and Entities \(USLEIE\)](#) maintained by the United States Department of Health and Human Services Office of the Inspector General (OIG); and
- [List of Excluded Individuals and Entities \(LEIE\)](#) maintained by The State of Texas HHSC OIG.

For NAR, MAR, and EMR, these searches must be conducted every 12 months to verify continued employment eligibility. These online searches are free of charge to the provider (See TAC Title 26 [§559.225](#)).

**What is the difference between the USLEIE and LEIE, as referenced in the LTCR rules for Individualized Skills and Socialization (TAC Title 26 §559.225(a)(2)(C)(D))?**

[USLEIE](#) is maintained by the United States Department of Health and Human Services (HHS) Office of the Inspector General (OIG), which is a cabinet-level executive branch department of the U.S. government created to protect the health of the U.S. people and provide essential human services.

[LEIE](#) is maintained by Texas HHSC OIG. In 2003, the 78th Texas Legislature created the Office of Inspector General (OIG) to strengthen HHSC’s capacity to combat fraud, waste, and abuse in publicly funded state-run Health and Human Services programs.

**Is there a log available for the Criminal History Check?**

[PL 2019-01 \(PDF\)](#) describes acceptable documentation that a provider may use to demonstrate that the provider has conducted a criminal history check of an employment applicant or an employee and, after reviewing the results, has determined that there is no bar or contraindication to employment for the applicant or employee. This PL also includes an example “Verification of Criminal History Checks” log (See Attachment 1- Page 4). The provider must also not keep the original record of a criminal history check of an employment applicant or employee.

**Administrators**

**What are requirements for administrator?**

The Individualized Skills and Socialization provider must employ an administrator who is responsible for the oversight of Individualized Skills and Socialization services, staff training, staff supervision, and record maintenance. The administrator may oversee multiple Individualized Skills and Socialization locations. The specific job title of this employee does not have to be “administrator;” however, the provider must employ someone who serves this function and have a policy regarding the delegation of responsibility in the administrator's absence.

**Can a HCS Provider be the Administrator for this?**

The individual who is the administrator must meet the requirements to be the Individualized Skills and Socialization administrator.

**What are the requirements to be the head of Individualized Skills and Socialization?**

The Individualized Skills and Socialization provider must employ an administrator who is responsible for the oversight of Individualized Skills and Socialization services, staff training, staff supervision, and record maintenance. The administrator may oversee multiple Individualized Skills and Socialization locations. The specific job title of this employee does not have to be "administrator;" however, the provider must employ someone who serves this function and have a policy regarding the delegation of responsibility in the administrator's absence.

## **Emergency Response Plans and Fire Drills**

**For the Fire Drill do we have to use the HHSC forms? We use an EMR that has a fire drill built in that currently meets the ICF and HCS fire drill requirements.**

The Individualized Skills and Socialization provider performs a fire drill at least once every 90 days. The provider completes HHSC Fire Drill Report form ([4719](#)) for each fire drill and maintains the document. The provider must maintain the record and provide it to HHSC surveyors upon request.

**Are providers required to submit the Form 3707 for fires, or just report the incident to CII?**

In accordance with the LTCR rules for Individualized Skills and Socialization, providers must report incidents to CII. Providers must complete [form 4719](#) related to fire drills. Providers licensed as DAHS with Individualized Skills and Socialization are also subject to DAHS and LSC requirements, and must submit to HHSC within 15 days after a fire, [form 3707](#) entitled "Fire Report for Long Term Care Facilities" (see DAHS rules under [TAC 26 §559.64](#) regarding Emergency Preparedness and Response, and [TAC 26 §559.64 \(f\)](#) regarding Fire Safety Plan).

**If an Individualized Skills and Socialization provider is going to be off-site only, how will emergency response plans/fire drills be handled?**

An Individualized Skills and Socialization provider delivering on-site services must conduct a fire drill in accordance with LTCR regulations. Off-site providers must create and implement policies and procedures for emergencies in accordance with LTCR regulations.

**Do small facilities need to use form 4719 for fire drills? This form seems more appropriate for residential environments.**

[HHSC Form 4719](#) is a standard form used for the purpose of documenting fire drills and used by providers of various types. Providers may use the "Other" option for applicable selection on this form and specify as indicated. The Individualized Skills and Socialization provider performs a fire drill at least once every 90 days. The provider completes HHSC Fire Drill Report form ([4719](#)) for each fire drill and maintains the document. The provider must maintain the record and provide it to HHSC surveyors upon request.

**The emergency plan must include the Individualized Skills and Socialization provider prescribing to an emergency alert system prescribed by HHS but there is**

**no other information what that system is. Can you clarify?**

The rules require providers to assign a designee to enroll in and respond to requests through the alert system. The designee should be someone who is associated with the licensed building or someone who is responsible for communicating emergency communications. [Provider letter 2022-32 describes the HHSC emergency communication system.](#)

A provider's emergency response plan must contain a section for warnings, emergency alerts, or notifications that designates by name or title the emergency preparedness coordinator (EPC) who is the staff person with the authority to manage the Individualized Skills and Socialization provider's response to an emergency situation in accordance with the plan, identifies how the EPC will receive notification of relevant local news and weather reports; and ensures monitoring of local news and weather reports.

## **Nursing Services**

**For Individualized Skills and Socialization licensing, will a nurse have to be on-site for a particular number of hours?**

LTCR Individualized Skills and Socialization rules do not require an on-site nurse.

**Will Individualized Skills and Socialization services require a nurse on-site?**

LTCR rules do not require an on-site nurse for Individualized Skills and Socialization.

**There are no RN services that can be billed through DAHS - Individualized Skills and Socialization. Who would delegate Medication Administration to Program Staff? Can a different Program Provider's RN delegate to our staff? Can you clarify?**

LTCR rules do not require an on-site nurse. If an individual attending Individualized Skills and Socialization requires medication and an individual cannot or chooses not to self-administer his or her medications, an Individualized Skills and Socialization provider must provide assistance with such medications and the performance of related tasks if:

- a registered nurse has assessed the assistance, related tasks, and delegated such to the Individualized Skills and Socialization provider in accordance with state law and rules; or
- a physician has delegated the assistance and related tasks as a medical act to the Individualized Skills and Socialization provider under Texas Occupations Code Chapter 157, as documented by the physician.

## **Medication Administration**

**Are providers going to be required to dispense and administer meds or can they**

**choose not to offer that?**

The provider may have Individualized Skills and Socialization services staff delegated to provide medication. If an individual cannot or chooses not to self-administer his or her medications, the provider must provide assistance with medications and the performance of related tasks.

**If an individual chooses to administer their own medication, does it still have to be in a locked cabinet? Do we have to monitor and document the administration?**

In accordance with [§559.227 \(l\)](#), an Individualized Skills and Socialization provider must provide a locked area for all medications. Additionally, if an individual cannot or chooses not to self-administer his or her medications, an Individualized Skills and Socialization provider must provide assistance with such medications and the performance of related tasks.

**Will the rules be updated to reflect the allowance of delegation to unlicensed staff? Currently the rule states it must be a licensed staff.**

Rules that will be effective January 1, 2023, allow for the delegation of medication administration.

**For the Schedule II medications, can they be in the medication cart, but in a separate locked box that only the RN has access to?**

In accordance with the LTCR rules for Individualized Skills and Socialization ([§559.227\(l\)\(1\)\(3\)](#)):

- An individualized skills and socialization provider must provide a locked area for all medications, which may include a central storage area or medication cart.
- An individualized skills and socialization provider must store an individual's medication separately from other individuals' medications within the storage area.
- Medication requiring refrigeration must be stored in a locked refrigerator that is used only for medication storage or in a separate, permanently attached, locked medication storage box in a refrigerator.
- An individualized skills and socialization provider must ensure poisonous substances and medications labeled for "external use only" are stored separately within the locked area.
- Drugs covered by Schedule II of the Controlled Substances Act of 1970 must be stored in a locked, permanently attached cabinet, box, or drawer that is separate from the locked storage area for other medications.

The scenario provided in this question would be acceptable as long as these requirements are met, including the requirement that the separate locked box is permanently attached to the medication cart.

**Will individuals still report to our day hab for medications?**

If an individual cannot or chooses not to self-administer his or her medications, the provider must provide assistance with medications and the performance of related tasks.

## Meals

### **Will individuals still report to our day hab for lunch?**

LTCR rules require that the Individualized Skills and Socialization provider must create policies and procedures that protect and promote the rights of the individual, including the individual's right to access his or her food at any time.

### **Do we have to provide meals and snack, or will the clients continue to be responsible for their own meals?**

LTCR requires that the Individualized Skills and Socialization provider create policies that allow the individual access to his or her food at all times.

## Building/Architectural Requirements

### **Where are the requirements for any building specifications for on-site Individualized Skills and Socialization location?**

All requirements are listed in the [26 TAC 559, subchapter H](#) for Individualized Skills and Socialization.

### **Please confirm if the DAHS with Individualized Skills and Socialization must meet life safety codes?**

For a DAHS *with* Individualized Skills and Socialization, the provider must meet all of the traditional DAHS requirements, including [Life Safety Code requirements](#).

### **What are the requirements for the facilities? Are there specific requirements for the building itself?**

For a provider who has a DAHS with Individualized Skills and Socialization license, the provider must meet all of the traditional DAHS requirements, including [Life Safety Code requirements](#). For a provider who has a DAHS-Individualized Skills and Socialization Only license, the provider must only meet those requirements included in 26 TAC 559, subchapter H.

### **What Chapter of the Life/ Safety Code applies to DAHS programs? Will there be Life/ Safety Surveys as wells as program surveys?**

For a DAHS with Individualized Skills and Socialization license, the applicable [LSC process and requirements](#) would be the same as for a traditional DAHS license. For a DAHS-Individualized Skills and Socialization Only license, there is no LSC requirement.

### **Are Individualized Skills and Socialization providers required to have a fire panel?**

The LTCR rules for Individualized Skills and Socialization ([TAC 26 Subchapter H](#)) do not require that a fire panel or sprinkler system be installed. In accordance with [26 TAC §559.229](#), Individualized Skills and Socialization providers must ensure that each facility has:

- (1) exterior doors that are unobstructed and accessible to all individuals;

- (2) two means of escape from the facility;
- (3) fire extinguishers that are:
  - (A) accessible and unobstructed to the service provider;
  - (B) on each level of the facility;
  - (C) serviced or replaced after each use; and
  - (D) if unused, serviced according to the manufacturer's instructions, or as required by the state or local fire marshal.

Providers that have other licenses or certifications for additional lines of business must follow those rules also. For example: all licensed DAHS with Individualized Skills and Socialization providers are required to also follow DAHS (TAC Title 26 Chapter 559) and [LSC requirements](#) applicable to DAHS licensing, in addition to the Long-term Care Regulation (LTCR) Individualized Skills and Socialization provider requirements found under [TAC Title 26, Chapter 559, Subchapter H](#) and any local authority requirements.

### **Does DAHS licensing require fire sprinkler and fire alarm systems?**

For a provider who has a DAHS with Individualized Skills and Socialization license, the provider must meet all of the traditional DAHS requirements, including [Life Safety Code requirements](#). For a provider who has a DAHS-Individualized Skills and Socialization Only license, this is not a requirement.

### **Are all DAHS- Individualized Skills and Socialization providers required to have a Fire Marshal inspection?**

All providers licensed as a DAHS *with* Individualized Skills and Socialization are required to meet the requirements of being a DAHS (TAC Title 26 Chapter 559), including [LSC requirements](#) in addition to the LTCR Individualized Skills and Socialization provider requirements found under TAC Title 26, Chapter 559, Subchapter H and any local authority requirements.

Those providers licensed as DAHS-Individualized Skills and Socialization *only* must meet the LTCR Individualized Skills and Socialization provider requirements found under TAC Title 26, Chapter 559, Subchapter H and local requirements.

### **Is a fire marshal license required regardless of the size of the space?**

For DAHS with Individualized Skills and Socialization, the provider must meet the applicable [Life Safety Code requirements](#) for a DAHS license along with any local authority requirements. For DAHS-Individualized Skills and Socialization Only, the provider must meet the local requirements.

### **How do you determine the licensed capacity? Will it be based on square footage?**

This number is determined by the provider and may be informed by building occupancy requirements, staff availability, and Medicaid program requirements for service delivery. Existing DAHS licensees who wish to add the DAHS-Individualized Skills and Socialization Services license must also comply with their current DAHS licensure requirements, including life safety code.

**Where can we find the rules related to fire protection specifications, number of restrooms, needed and other requirements that pertain to what is necessary to provide on-site Individualized Skills and Socialization at our current DH location?**

In addition to the Individualized Skills and Socialization rules found under TAC Title 26, Chapter 559, Subchapter H (see [Rule §559.229](#) regarding Provider Requirements) existing DAHS providers licensed as DAHS with Individualized Skills and Socialization must meet the applicable [Life Safety Code requirements](#) for a DAHS license along with any local authority requirements.

## **Staff Training, Policies and Records**

**In reference to the records to be kept on-site, our records are kept via electronic system would we need to have physical copies of the records?**

Records may be maintained electronically if the electronic records meet the same requirements as those for the paper record, and the Individualized Skills and Socialization provider must provide all its books, records, and other documents maintained by or on behalf of an Individualized Skills and Socialization provider to HHSC upon request.

**If the HCS provider is also the Individualized Skills and Socialization provider does the provider need to keep separate records for each of these programs?**

Yes, the Individualized Skills and Socialization provider's administrator is required to maintain all records for this program.

**Do we need to have policy and procedures? How can we go about developing them if so?**

All requirements are listed in the [TAC Title 26, Chapter 559, Subchapter H](#) for Individualized Skills and Socialization. Providers may use these rules to inform policy and procedures.

**What is the requirement for Individualized Skills and Socialization staff regarding taking a Cardiopulmonary Resuscitation (CPR) course or certification?**

Initial training requirements indicate that an Individualized Skills and Socialization provider must ensure service providers (as defined under [§559.203\(20\)](#)) receive a minimum of eight hours of training during the first three months after the start of employment, and the Individualized Skills and Socialization provider must document this training in the provider's records. As outlined under this rule, training includes any nationally or locally recognized adult CPR course or certification. For ongoing training, an Individualized Skills and Socialization provider must ensure that service providers maintain current certification in CPR. For additional information regarding initial and ongoing training requirements under the LTCR rules for Individualized Skills and Socialization, providers are encouraged to review [§559.227\(k\)\(1\) and \(2\)](#).

**Individualized Skills and Socialization rules state that the Employee Misconduct Registry and Nurse Aide Registry must be checked every 12 months, but there is no**

**such note for criminal background checks through the DPS. Is 2-3 years between DPS background checks permissible or do Individualized Skills and Socialization providers need to run their criminal background checks every 12 months as well?**

In accordance with [§559.225 \(a\)\(1\)](#), an Individualized Skills and Socialization provider must comply with the provisions of the [Texas Health and Safety Code \(HSC\), Chapter 250](#). At a minimum, the provider must conduct a criminal history check for certain applicants for employment and to determine if the applicant has been convicted of an offense that bars the person from employment or that is a contraindication to employment with the provider.

**Are Individualized Skills and Socialization providers required to have any type of insurance policies? If so, where can this information be found?**

LTCR rules do not require any insurance policies for Individualized Skills and Socialization.

**What is required in the Community Engagement Plan? Is there a template?**

There is not a template for the Community Engagement Plan; however, the LTCR rules provide an outline of what is required in the written plan. [TAC 26 Subchapter H, §559.205](#) (Criteria for Licensing) indicates that as part of the application process, an applicant for licensure must attest that it has created and implemented a community engagement plan (refer to [TAC 26 Subchapter H, Rule §559.205\(e\)\(9\)](#) for more information).

**Since the COVID-19 Public Health Emergency (PHE) ended on May 11th, 2023, what infection control measures would an Individualized Skills and Socialization provider be required to follow?**

While the LTCR rules for Individualized Skills and Socialization don't specifically mention COVID-19, the LTCR Rules for the Day Activity Health Services (DAHS) Individualized Skills and Socialization program require that the provider create and enforce written policies and procedures for infection control, including spread of disease to ensure staff compliance with state law, the Occupational Safety and Health Administration, and the Centers for Disease Control and Prevention (refer to TAC Title 26, §559.227 (n)). If a provider holds additional licensing or certification, the provider must follow those rules also. Providers may use resources such as the CDC or the Department of State Health Services to inform their infection control policy.

**Are providers required to have all employees screened for TB within 2 weeks of employment and annually or is this just for DAHS facilities only not Individualized Skills and Socialization facilities?**

The Individualized Skills and Socialization rules do not require employees to be screened for TB within 2 weeks of employment or annually. However, the provider must create and implement policies and procedures for infection control, including spread of disease.

Existing DAHS licensees who wish to add the DAHS-Individualized Skills and Socialization Services license must also comply with their current DAHS licensure requirements.

**Can I provide off-site services in a building that is on the same campus as my on-site building?**

The LTCR rules for Individualized Skills and Socialization specify that off-site must be provided in a community setting that is a setting accessible to the general public within an individual's community.

Off-site Services:

- Must be provided in a community setting of the individual's choosing.
- Must include transportation.
- Must not be conducted at an on-site location or prohibited setting for an individual as set forth in the rules governing the HCS Program, residence of an individual or another person unless provided in an event open to the public, or unless the activity is a volunteer activity performed by an individual in the residence.

**Regarding temporary closures, would an off-site only Individualized Skills and Socialization provider need a LSC survey before resuming services?**

For some facilities (NF, DAHS, ALF, ICF/IID, PPECC), a temporary closure is defined as a cessation of operations for longer than 30 days with plans to resume operations. To request a temporary closure, the provider submits its request to LTCR Licensing and Credentialing and the appropriate regional contact. A request to reopen must be submitted to LTCR Licensing and Credentialing within 90 days of the temporary closure start date. Since DAHS-Individualized Skills and Socialization Only providers do not have a LSC survey at all, then they would not need the LSC survey to resume service delivery.

## LTCR Rules on Reporting to HHSC

### Reporting ANE to CII

**In regard to abuse, neglect, and exploitation (ANE) referenced under the LTCR rules for Individualized Skills and Socialization, how are each of these defined?**

[TAC Title 26 §559.239](#) of the LTCR rules for Individualized Skills and Socialization (regarding Definitions of Abuse, Neglect, and Exploitation) references TAC Title 26 Chapter 559, Subchapter A, Rule §559.2 (regarding Definitions). As referenced in the Individualized Skills and Socialization program rules, definitions of ANE include:

- Abuse (§559.2(1)); The negligent or willful infliction of injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical or emotional harm or pain to an elderly or disabled person by the person's caretaker, family member, or other individual who has an ongoing relationship with the person, or sexual abuse of an elderly or disabled person, including any involuntary or nonconsensual sexual conduct that would constitute an offense under Texas Penal Code, §21.08, (indecent exposure) or Texas Penal Code, Chapter 22, (assaultive offenses) committed by the person's caretaker, family member, or other individual who has an

ongoing relationship with the person.

- Exploitation (§559.2(30)); An illegal or improper act or process of a caretaker, family member, or other individual, who has an ongoing relationship with the elderly person or person with a disability, using the resources of an elderly person or person with a disability for monetary or personal benefit, profit, or gain without the informed consent of the elderly person or person with a disability.
- Neglect (§559.2(53)); The failure to provide for oneself the goods or services, including medical services, that are necessary to avoid physical harm, mental anguish, or mental illness; or the failure of a caregiver to provide these goods or services.

### **Would the ANE allegation fall under the Individualized Skills and Socialization provider or the program providers responsibility?**

If the ANE involves the Individualized Skills and Socialization provider, then the ANE allegation would be reported to HHSC Complaint and Incident Intake (CII). The ANE investigation will be conducted by the Individualized Skills and Socialization survey team. Anyone who suspects alleged ANE by an Individualized Skills and Socialization provider should report ANE to HHSC CII. If the allegation of ANE involves the HCS waiver program provider employee, then the HCS provider follows their program's regulations and reports ANE to DFPS.

### **Does ANE have to be reported in two systems - CIMS and TULIP?**

LTCR rules only require that the Individualized Skills and Socialization provider report any ANE to CII. If the provider holds other licenses or certifications for other lines of business, the provider must follow those rules.

### **How do I report ANE or incidents to HHSC?**

Individualized Skills and Socialization provider report ANE and incidents to Texas Health and Human Services Commission (HHSC) CII by either:

- calling 1-800-458-9858, or
- using the submission portal in TULIP within one hour after suspecting or learning of the alleged abuse, neglect, or exploitation.

Using TULIP is the preferred way for providers to report incidents.

[Provider Letter 2023-01](#) has additional guidance on reporting ANE and incidents for Individualized Skills and Socialization providers.

### **What type of incidents get reported into TULIP?**

Examples of reportable incidents include, but are not limited to:

- the death of an individual, if the death occurs while the individual is receiving

services from an Individualized Skills and Socialization provider;

- misappropriation of property;
- injuries of unknown origin;
- fires; and
- situations that pose a threat to individuals receiving Individualized Skills and Socialization services, staff, or the public, which involve the need for calling the police or the local fire authority to maintain safety.

**If we have an allegation of ANE of an HCS client who also attends an Individualized Skills and Socialization service, would the HCS provider (who is also the Individualized Skills and Socialization provider) report to both agencies?**

HHSC's LTCR rules for Individualized Skills and Socialization require that the provider report any ANE to CII. **As of 6/21/23, an HCS program provider must also report alleged ANE by an Individualized Skills and Socialization provider to HHSC CII.** If the provider holds other licenses or certifications for other lines of business, the provider must follow those rules.

If the alleged perpetrator is an employee of the HCS waiver program provider and NOT the Individualized Skills and Socialization provider, the HCS reports the alleged ANE to DFPS SWI.

**When reporting an incident how can I determine if it is reportable to DFPS or HHSC?**

In accordance with HHSC's LTCR rules for Individualized Skills and Socialization (see [§559.241](#)) an Individualized Skills and Socialization provider must report abuse, neglect, and exploitation alleged to have been committed by the Individualized Skills and Socialization employee, to HHSC CII within one hour of learning or suspecting the abuse, neglect, exploitation.

**As of 6/21/23, an HCS program provider must report abuse, neglect, and exploitation alleged to have been committed by the Individualized Skills and Socialization employee, to HHSC CII within one hour of learning or suspecting the abuse, neglect, exploitation.**

If the alleged perpetrator is an employee of the HCS waiver program provider and NOT the Individualized Skills and Socialization provider, the HCS reports to DFPS SWI.

**For CII, is that for the providers as in the private provider? Or is this just for Individualized Skills and Socialization?**

In accordance with [§559.241](#), an Individualized Skills and Socialization provider must report abuse, neglect, and exploitation, and the death of an individual, if the death occurred while the individual is receiving services from an Individualized Skills and Socialization provider, to CII within one hour of learning or suspecting the information.

## Other Reporting Requirements

### **Can you please clarify if medication errors must be reported in Individualized Skills and Socialization and ICF?**

The provider must document medication administration including medication errors in accordance with [26 TAC §559.227\(l\)\(2\)](#). An Individualized Skills and Socialization provider must immediately report to an individual's program provider any unusual reactions to a medication or treatment. When an Individualized Skills and Socialization provider supervises or administers medications, the Individualized Skills and Socialization provider must document in writing if an individual does not receive or take the medication and treatment as prescribed. The documentation must include the date and time the dose should have been taken, and the name and strength of medication missed.

### **Does the Individualized Skills and Socialization provider also have to document the medication error in CIMS?**

LTCR rules do not include reporting to CIMS. However, if the provider holds other licenses or certifications for other lines of business, the provider must follow those rules.

### **How is CII different from CIMS?**

CII is the single point of entry for LTCR to receive and route reports of ANE or complaints. CIMS is the critical incident management reporting system for HCS and TxHmL providers.

### **What is CII? Why don't providers use the Critical Incident Management System to report the incident? That system is already required to be used for HCS and TxHmL funded clients.**

Complaint and Incident Intake (CII) is the single point of entry for LTCR to receive and route reports of ANE or complaints. LTCR requires providers to report ANE to CII for investigation purposes.

### **Are we no longer using the Critical Incident Management System? During the webinar you repeatedly mentioned CII? What is the difference?**

HHSC's LTCR rules for Individualized Skills and Socialization require that the provider report any Abuse, Neglect, or Exploitation (ANE) to CII. If the provider holds other licenses or certifications for other lines of business, the provider must follow those rules.

### **Do we call HHSC anytime law enforcement is called for a behavior episode?**

HHSC's LTCR rules for Individualized Skills and Socialization require that the provider report any Abuse, Neglect, or Exploitation (ANE) to CII. Reportable incidents include but are not limited to those resulting in serious injury or the death of an individual while the individual is receiving services from an Individualized Skills and Socialization provider, or any situation that poses a threat to individuals receiving Individualized Skills and

Socialization services, staff, or the public which involve the need for calling the police or the local fire authority to maintain safety.

**Abuse investigation conflicts with the Waiver Services rules regarding process for reporting abuse. HCS and TxHmL program providers are forbidden to conduct their own investigation. Please explain.**

A DAHS Individualized Skills and Socialization provider is a licensed provider and subject to rules in [Title 26 Chapter 559, Subchapter H](#). They are a distinct provider and not subject to HCS or TxHmL certification principles. As a licensed provider, HHSC Provider Investigations does not have authority to investigate ANE. As such, all ANE investigations will be received and investigated by HHSC survey staff. The [3613-A](#) form notifies HHSC what actions the provider took because of the alleged ANE and the outcome. Individualized Skills and Socialization providers must immediately and promptly investigate and address issues to protect the health and safety of individuals. If the provider holds other licenses or certifications for other lines of business, the provider must follow those rules.

If the alleged perpetrator is an employee of the HCS waiver program provider and NOT the Individualized Skills and Socialization provider, the HCS reports the alleged ANE to DFPS SWI.

## HHSC LTCR Surveys

### Survey Frequency

**How long after completion of the application will the survey be conducted?**

An unannounced, on-site LTCR survey will be conducted by HHSC LTCR survey staff to determine if the DAHS Individualized Skills and Socialization provider meets all requirements for a license. Once a provider submits an application or HHSC issues a license of any kind, a survey may happen at any time, and the provider must allow HHSC surveyors access to the premises at reasonable times in order to perform a survey necessary to issue a license or renew a license. HHSC surveyors will perform surveys, follow-up visits, complaint investigations, investigations of abuse or neglect, and other contact visits as required for carrying out the responsibilities of licensing. An unannounced survey provides an opportunity to assess how the provider or supplier typically operates.

See [TAC Title 26 §559.231](#).

**Will the DAHS - Individualized Skills and Socialization provider be notified of the initial and/or routine surveys? If so, how much advanced notice will the provider be given of the survey date?**

All surveys are unannounced.

**Will the license process require a survey before the license is issued?**

HHSC will issue a temporary license and then an initial inspection is required prior to HHSC issuance of the standard license.

**If you have submitted your application, how will you know when you will be notified of your survey?**

An unannounced, on-site LTCR survey will be conducted by HHSC LTCR survey staff to determine if the DAHS Individualized Skills and Socialization provider meets all requirements for a license. Once a provider submits an application or HHSC issues a license of any kind, a survey may happen at any time, and the provider must allow HHSC surveyors access to the premises at reasonable times in order to perform a survey necessary to issue a license or renew a license. HHSC surveyors will perform surveys, follow-up visits, complaint investigations, investigations of abuse or neglect, and other contact visits as required for carrying out the responsibilities of licensing. An unannounced survey provides an opportunity to assess how the provider or supplier typically operates.

**If I run a public day habilitation program with multiple different providers attending, I have HHSC HCS surveyors at my location multiple times per year. Does this mean I also now have a DAHS survey?**

HHSC inspects a facility at least once every two years after the initial inspection and HHSC will continue to conduct survey functions for the waiver programs.

**Will audits be done for each day habilitation location in the contract at once or will they be separate audits?**

HHSC inspects a DAHS facility at least once every two years after the initial inspection. HHSC will continue to conduct survey functions for the waiver programs. A provider that holds more than one license or certification will be surveyed according to the requirements for each.

## **Survey Requirements and Process**

**How will DAHS Individualized Skills and Socialization providers be able to operate if they are waiting on the initial survey from LTCR?**

For DAHS Individualized Skills and Socialization providers, a temporary license may be issued by HHSC through August 31, 2023. This is a license to operate in the name of the licensed legal entity and has the same standing as a full license. After August 31<sup>st</sup>, 2023, providers who have applied for an Individualized Skills and Socialization license will be surveyed by LTCR *prior to* the license being issued by HHSC.

**What is a health survey?**

LTCR recommends taking the [Preparing for Survey Training](#) on the Individualized Skills and Socialization provider page. This training was designed to assist Individualized Skills and Socialization Providers prepare for a survey. In this course you will review the survey process and identify the licensure rules.

**Will the documents provided to surveyors need to be electronic or physical copies?**

LTCR surveyors will request physical copies of documents, but surveyors may also request electronic copies of documents.

**If the facility provides traditional DAHS and elects to provide Individualized Skills and Socialization will there be a survey for each or will the survey cover both the DAHS licensure and the Individualized Skills and Socialization component?**

If the provider has a DAHS with Individualized Skills and Socialization license, the survey will include all requirements.

**Entrance conference: What if the personnel records are maintained at the "home facility" or office that is not within the Individualized Skills and Socialization facility. Will we have time to gather those things and transport to the facility?**

The requirement is that all books, records, and other documents maintained by or on behalf of the provider are available to HHSC surveyors upon request, at the location where service delivery occurs. For off-site only providers, survey occurs at the business office location, where all records are kept.

See [TAC Title 26 §559.231](#).

**Will the survey process for DAHS change anything in the HCS and TxHmL survey process? For example: would the onsite inspection for the licensure for DAHS replace onsite inspection of the facilities that occurs during the HCS or TxHmL survey process?**

Each survey process will survey for different requirements based on the program. HHSC will continue to evaluate practices with the goals of efficiency and limiting the burden to providers.

**Will the HCS contract survey also be looking at Individualized Skills and Socialization services, such as staff credentials, training records, MARs, etc.?**

LTCR surveyors will request documents to ensure that the individual is receiving services in accordance with his or her plan, including Individualized Skills and Socialization.

**Will the Individualized Skills and Socialization provider be surveyed for compliance as part of the HCS (Home and Community based Waiver Services) provider or will the Individualized Skills and Socialization provider have their own scheduled survey?**

HHSC inspects a DAHS facility at least once every two years after the initial inspection. HHSC will continue to conduct survey functions for the waiver programs. A provider that holds more than one license or certification will be surveyed according to the requirements for each.

**If violations are cited following a survey, and the Individualized Skills and Socialization provider submits a Plan of Correction (PoC), will the provider receive a letter indicating whether the submitted PoC was accepted?**

Yes, once the providers HHSC LTCR Program Manager or Designee completes their review of the submitted PoC, the provider is sent a notification letter to let them know whether their PoC was/was not accepted. If the submitted PoC was not accepted, information regarding necessary revisions will be included on this letter. Once revisions have been made, the provider resubmits their PoC again for review.

## Enforcement

### **Will deficiencies found during a survey of the Individualized Skills and Socialization provider be applied to the HCS (Home and Community based Waiver Services) provider or will the Individualized Skills and Socialization provider be responsible for its results?**

LTCR will survey for compliance with the HCS and TxHmL Certification Standards for HCS and TxHmL waiver program providers. While HCS and TxHmL waiver providers continue to be responsible for oversight of contracted service providers, LTCR will survey for compliance with [26 TAC 559 Subchapter H](#) for Individualized Skills and Socialization providers.

### **Will IDD providers have at least 6 months to prepare for the transition from day habilitation to Individualized Skills and Socialization?**

On January 1, 2023, HHSC implemented the DAHS-Individualized Skills and Socialization program and offered a hold harmless period from January 1, 2023, through June 30, 2023. During this period, HHSC evaluated compliance and issued citations, but did not take any enforcement actions related to those citations. The current hold harmless period ended on June 30, 2023.

HHSC agreed to extend part of the hold harmless period related to the provision of off-site services. HHSC will survey for compliance with **off-site service delivery** but will not move forward with enforcement actions. This new hold harmless period related to the provision of **off-site** Individualized Skills and Socialization services begins July 1, 2023, and ends March 17, 2024.

For all other regulatory requirements, beginning July 1, 2023, HHSC will survey for compliance and move forward with applicable enforcement actions as outlined in [Title 26 Chapter 559, Subchapter H, Division 4](#).

### **How will deficiencies determined via survey or investigations be handled? Will this include plans of correction? Will the program provider be notified of investigations and/or survey deficiencies that occur at the DAHS – Individualized Skills and Socialization facility?**

Once HHSC finishes a survey, HHSC gives the provider a Statement of Licensing Violations (HHSC Form 3724), which describes any area of identified non-compliance, as appropriate. HHSC Form 3724 is sent to the provider within 10 business days following the date of the initial exit conference. If non-compliance is identified, the facility will also receive instruction

on completing a plan of correction (PoC) and submitting it to HHSC. A PoC must be submitted to HHSC for each licensure violation by the 10TH calendar day from receipt of this letter in accordance with TAC Title 26, [Rule §559.233](#).

## Training and Webinars

### **How will HHCS provide information to providers about the transition of day habilitation services to Individualized Skills and Socialization?**

HHSC plans to continue providing information to providers via webinars and other formats. HHSC will work to ensure these conversations include staff from multiple HHSC departments. HHSC developed the [Individualized Skills and Socialization provider page](#), an online source of information for providers of Individualized Skills and Socialization.

### **How will providers receive training for Individualized Skills and Socialization?**

LTCR Curriculum and Training has developed training related to applying for the DAHS Individualized Skills and Socialization license and the regulatory standards providers are expected to comply with. This training can be found on the [Individualized Skills and Socialization provider page](#). Training is Computer-Based, and once completed the provider will upload documentation of the completed training in their application. Optional training is available on how to use the TULIP system.

### **How do I get the certificate for the training?**

The certificate for both the [Pre-Licensure CBT](#) and the [Preparing for a Survey CBT](#) can be downloaded at the end of each training. There is a section on the last page of each where you can enter your name to populate the certificate. If you are unable to download the certificate, please ensure that you are using Microsoft Edge or Google Chrome to take the training. In addition, please make sure that you have your pop-up blocker turned off. The certificate will pop-up after you complete the training and enter your name.

### **Is there a webinar that explains the staffing ratio other than the TAC?**

The [July 2022 Webinar](#) on HHSC's [Individualized Skills and Socialization provider page](#) covers the service description, ratio requirements, and licensing information for Individualized Skills and Socialization. HHSC plans to continue providing information to providers via webinars and other formats. HHSC will work to ensure these conversations include staff from multiple HHSC departments.

### **Is there a webinar that covers the survey process?**

The [November 2022 Webinar](#) on HHSC's [Individualized Skills and Socialization provider page](#) covers provider responsibilities, the survey process, and TULIP application for Individualized Skills and Socialization providers. HHSC plans to continue providing information to providers via webinars and other formats. HHSC will work to ensure these conversations include staff from multiple HHSC departments.

# Electronic Visit Verification (EVV)

## **What is EVV?**

EVV is a computer-based system that electronically documents and verifies service delivery information for certain Medicaid service visits. EVV helps prevent fraud, waste and abuse, while making sure Medicaid recipients receive care that is authorized for them.

Reference the [EVV brochure \(PDF\)](#) for more information about EVV.

## **Which programs require EVV for Individualized Skills and Socialization services in the Consumer Directed Services (CDS) option?**

Texas Home Living (TxHmL) is the only program which requires EVV for Individualized Skills and Socialization services.

## **Who do I contact if I have questions about EVV?**

Email the EVV Operations inbox at [EVV@hhs.texas.gov](mailto:EVV@hhs.texas.gov) for questions about EVV or reference an EVV contact information guide:

[EVV Contact Information Guide for Program Providers and FMSAs \(PDF\)](#)

[EVV Contact Information Guide for CDS Employers \(PDF\)](#)

## **How can I receive updates about EVV?**

[Sign up for EVV GovDelivery](#) to receive updates by email. People who are required to use EVV must be signed up for GovDelivery.

Visit the [EVV web page](#) for more information about EVV, including the News section for published notices.

## **Which Individualized Skills and Socialization services require EVV?**

EVV is required when delivering in-home Individualized Skills and Socialization in an own home/family home setting. Refer to the EVV Personal Care Services Bill Codes Table in Excel or PDF formats for details. The table is located on the HHSC EVV web page. For dates of services on and after May 1, 2023, HHSC will deny or recoup a claim for in-home Individualized Skills and Socialization in the own home/family home setting without a matching EVV visit record. Refer to the document, HCS and TxHmL Best Practices to Avoid EVV Claim Mismatches (PDF), to help avoid EVV claim mismatches.

## **Do staff that will be onsite need to clock in/out through EVV?**

EVV claims matching is required for the provision of in-home Individualized Skills and Socialization provided in an own home or family home setting. EVV claims matching is not required for the provision of in-home Individualized Skills and Socialization provided

in a 3- or 4-person residence or in a host home/companion care residence.

# Medicaid Program Rules and Requirements

## Service Provision

### **How will the individuals for this program be obtained? Is the provider still going to get them or are you allocating them?**

HHSC will not allocate individuals to an Individualized Skills and Socialization service provider. An individual must be given a choice of Individualized Skills and Socialization service providers who are in their geographical area and can meet their needs.

### **Will the DAHS Individualized Skills and Socialization replace traditional Day Hab service providers?**

Individualized Skills and Socialization will replace day habilitation in the HCS, TxHmL, and DBMD waiver programs. Day habilitation will no longer be an allowable service in these Medicaid waiver programs effective 03/01/2023.

### **Can we be given more time to start this process? We are still learning the TMHP system, CARE transition to Palo Alto VPN, CIMS, upcoming Cost Report and taxes next year, not including holidays. This is beginning to be overwhelming with learning and doing so much in limited time.**

The implementation of Individualized Skills and Socialization is necessary to comply with federal requirements. The Centers for Medicare and Medicaid Services (CMS) requires states be in compliance with these federal regulations by March 17, 2023.

### **We have adult day cares that are currently only contracted with MCOs. Can we still contract with DAHS for this program?**

Individualized Skills and Socialization only applies to the HCS, TxHmL, and DBMD Programs currently.

### **Do you know if the Individualized Skills and Socialization program is being rolled out to individuals in ICF-IID group homes or will this be just for waiver services?**

Individualized Skills and Socialization only applies to the HCS, TxHmL, and DBMD Programs currently.

### **What about those individuals who receive Day Hab through PASRR. Will that change to Individualized Skills and Socialization, or will they still receive Day Hab services?**

Individualized Skills and Socialization only applies to the HCS, TxHmL, and DBMD Programs currently.

**Could a provider with a DAHS Individualized Skills and Socialization license serve their own consumers and consumers from another provider?**

A licensed Individualized Skills and Socialization provider will be able to provide services to individuals in the HCS, TxHmL, and DBMD Programs who choose them as a service provider. If the Individualized Skills and Socialization provider is also a comprehensive provider in either the HCS, TxHmL, or DBMD Program they will be able to provide Individualized Skills and Socialization to individuals they serve as the comprehensive provider and may also contract with other program providers to provide the Individualized Skills and Socialization service to other individuals.

**Some individuals that receive CFC services also have a community day hab with a one on one staff, how will this affect them?**

Individualized Skills and Socialization replaces day habilitation in the HCS, TxHmL, and DBMD waiver programs. The implementation of Individualized Skills and Socialization does not impact the provision of CFC in these programs.

**Can current Day Hab providers continue providing traditional day hab services to IDD General Revenue clients?**

Individualized Skills and Socialization will replace day habilitation in the HCS, TxHmL, and DBMD waiver programs. Day habilitation will no longer be an allowable service in these Medicaid waiver programs effective 03/01/2023

**In terms of CLASS/DBMD, how is DAHS different in terms of activities provided?**

Individualized Skills and Socialization is not a waiver service in the CLASS Program. The DBMD Program rules provide the requirements for the provision of Individualized Skills and Socialization in the DBMD Program.

**How successful has Individualized Skills and Socialization been in places that have implemented it?**

Individualized Skills and Socialization is a new service and data related to its implementation has not been gathered by HHSC to date.

**If you are already providing services, can you continue?**

Individualized Skills and Socialization will replace day habilitation in the HCS, TxHmL, and DBMD waiver programs. Day habilitation will no longer be an allowable service in these Medicaid waiver programs effective 03/01/2023. Providers are not required to become a licensed Individualized Skills and Socialization provider to serve individuals outside of the HCS, TxHmL, and DBMD waiver programs.

**Do we need to get licensed if we only have self-pay clients?**

Individualized Skills and Socialization will replace day habilitation in the HCS, TxHmL, and DBMD waiver programs. Day habilitation will no longer be an allowable service in these Medicaid waiver programs effective 03/01/2023. Providers may choose to continue

providing day habilitation services through other funding sources, including private pay, and are not required to become a licensed Individualized Skills and Socialization provider to serve individuals outside of the HCS, TxHmL, and DBMD Medicaid waiver programs.

**What will happen with the program provider for HCS and TxHmL that does not want to have a facility for Individualized Skills and Socialization? Are they able to just offer the services for in-home Individualized Skills and Socialization like in-home Day Hab or attend a day hab out of the home that is not the provider for HCS and TxHmL?**

A program provider must make on-site and off-site Individualized Skills and Socialization available to individuals. The program provider may choose to subcontract with another Individualized Skills and Socialization provider if they choose not to become a licensed provider themselves.

**As an HCS provider, in addition to Chapter 559, Subchapter H, do we need to follow Chapter 263, Subchapter L (HCS>Individualized Skills and Socialization)?**

Yes.

**Can a parent of a minor complete the CFC/PasHab services? If yes, is there a date in where they can no longer provide the services for the client?**

A parent of an individual under the age of 18 is prohibited from being a service provider of CFC PAS/HAB.

**What is the service limit for Individualized Skills and Socialization?**

According to 26 TAC [§263.2015](#):

The service limit for the combined total of on-site, off-site, and in-home individualized skills and socialization is:

- (1) 1560 hours during an IPC year;
- (2) six hours per calendar day; and
- (3) five days per calendar week.

## **Billing and Payments**

**New HCS billing guidelines have Individualized Skills and Socialization services, so will billing still be done by the HCS provider? Will Individualized Skills and Socialization Entity complete any billing in TMHP?**

The HCS, TxHmL, or DBMD program provider is responsible for submitting billing claims for Individualized Skills and Socialization in compliance with waiver program rules and applicable billing guidelines. Currently program providers must submit claims through TMHP. [IL 23-01](#) provides more specifics related to rates and billing for Individualized Skills and Socialization.

**How does the provider get paid? Who pays for the services?**

The HCS, TxHmL, or DBMD program provider will be responsible for submitting billing claims for Individualized Skills and Socialization in compliance with waiver program

rules and applicable billing guidelines. Payment to the Individualized Skills and Socialization service provider is the responsibility of the program provider.

**Will people that qualify for In-Home Individualized Skills and Socialization be billed through the Individualized Skills and Socialization provider or the HCS provider?**

The HCS, TxHmL, or DBMD program provider will be responsible for submitting billing claims for Individualized Skills and Socialization in compliance with waiver program rules and applicable billing guidelines.

**I currently own a Day Hab and I contract with several providers. With this new program, will I no longer submit invoices and notes to the provider but directly to the state and will payments come directly from the state?**

The HCS, TxHmL, or DBMD program provider will be responsible for submitting billing claims for Individualized Skills and Socialization in compliance with waiver program rules and applicable billing guidelines. Payment to the Individualized Skills and Socialization service provider is the responsibility of the program provider.

**Will the billing process remain through TMHP?**

The HCS, TxHmL, or DBMD program provider will be responsible for submitting billing claims for Individualized Skills and Socialization in compliance with waiver program rules and applicable billing guidelines. Currently program providers must submit claims through TMHP.

**Will the HCS (Home and Community Based Waiver Services - IDD) be responsible to collect SDL (service Delivery Logs) and pay the Individualized Skills and Socialization provider or will they bill HHS on their own?**

The HCS, TxHmL, or DBMD program provider will be responsible for submitting billing claims for Individualized Skills and Socialization in compliance with waiver program rules and applicable billing guidelines. Payment to the Individualized Skills and Socialization service provider is the responsibility of the program provider. The program provider will continue to collect documentation, including service delivery logs, to justify billing claims in compliance with program requirements.

**Will Individualized Skills and Socialization services be paid by Medicaid or HCS/TxHmL funds? If HCS/TxHmL is paying, will there be a new IPC form available?**

Individualized Skills and Socialization will be a service funded through the HCS, TxHmL, or DBMD Program. HHSC will be updating forms, including the IPC form, to add this new service.

**Will all billing be done through the TMHP program? Currently an HCS client can access title XIX funds for DAHS, an ICF client does not have title XIX funding available to them. Currently we must bill the provider company for the ICF clients. Will we be able to bill for the ICF via TMHP?**

Individualized Skills and Socialization will replace day habilitation in the HCS, TxHmL, and DBMD waiver programs and does not impact individuals receiving services through an ICF/IID.

**Can we start billing Individualized Skills and Socialization before 3/1 if we have our license already?**

Yes.

**Will the billing documentation requirements be the same as current day hab billing?**

The HCS Billing Requirements were updated on January 1, 2023 to include Individualized Skills and Socialization.

**How do we bill units in TMHP? Right now, Day Habilitation is billed as 1 unit for a full day.**

Individualized Skills and Socialization is billed as an hourly rate but may be billed in quarterly increments.

**Will the TxHmL service cost cap be increased since the cost of Individualized Skills and Socialization is higher than the cost of DH and may throw people over the cost cap?**

The cost cap for TxHmL has not been increased at this time due to the implementation of Individualized Skills and Socialization.

**How will billing be done for on-site vs off-site?**

The long-term care bill codes are available at <https://www.hhs.texas.gov/providers/long-term-care-providers/long-term-care-provider-resources/long-term-care-bill-code-crosswalks>.

The rates for on-site and off-site Individualized Skills and Socialization are available at <https://pfd.hhs.texas.gov/sites/rad/files/documents/long-term-svcs/2023/2023-01-hcs-rates.pdf>.

**How long can Day Habilitation be billed under day habilitation?**

Day habilitation is no longer a Medicaid-billable service effective March 1, 2023.

**When will you provide the documentation that will be required for billing on-site and off-site services?**

Service delivery logs are available on the HHSC website to document the provision of on-site, off-site, and in-home Individualized Skills and Socialization. HHSC released an [alert on March 14th](#) available on the HCS Provider Portal to provide clarification on the service delivery logs for Individualized Skills and Socialization.

**Will hourly payment rates for both on-site and off-site services be broken down, perhaps into 15-minute increments?**

Individualized Skills and Socialization is billed at an hourly rate and can be broken down into quarterly increments.

**What if our license is not effective March 1. Would we stop providing the service until license is in effect since we will not be able to bill?**

Day habilitation is no longer a Medicaid-billable service effective March 1, 2023, and a provider cannot bill for on-site or off-site Individualized Skills and Socialization without obtaining a license.

**Is transportation a billable service on this new contract/license?**

The provision of on-site Individualized Skills and Socialization includes transportation of an individuals from one on-site location to another on-site location. The provision of off-site Individualized Skills and Socialization includes transportation from an on-site location to an off-site location and between off-site locations.

**We are unable to do revisions in TMHP. What do we do?**

HHSC provided guidance on service plan updates in [Information Letter 2023-03](#) and [Information Letter 2023-07](#).

## Rates

**Do we have a right to demand 100% of the rate, where the HCS Provider must pay the rate based on the client's choice of the Individualized Skills and Socialization facility?**

According to 40 TAC [§9.177\(b\)](#):

(b) The program provider must employ or contract with a person or entity of the individual's or LAR's choice in accordance with this subsection.

(1) Except as provided by paragraph (2) of this subsection, the program provider must employ or contract with a person or entity of the individual's or LAR's choice to provide an HCS Program service or CFC service to the individual if that person or entity:

(A) is qualified to provide the service;

(B) unless the program provider agrees to pay a higher amount, provides the service at or below:

(i) for any service except CFC ERS, the direct services portion of the applicable HCS Program rate; and

(ii) for CFC ERS, the reimbursement rate; and

(C) is willing to contract with or be employed by the program provider to provide the service in accordance with this subchapter.

As part of agreeing to provide the HCS Program service at the direct services portion of the applicable HCS Program rate, the Individualized Skills and Socialization provider would not be allowed to charge an individual or family additional charges outside what is reimbursed through the HCS Program.

**May an Individualized Skills and Socialization Provider charge families for after hour care? Many times, families cannot get off work at the time the program closes/services stop. Some providers will keep their doors open until 5 or 6 (with staff present of course), until families get off work. In these cases, may the provider charge families for that service?**

If the Individualized Skills and Socialization provider is also the program provider, the program provider would not be allowed to charge additional fees outside of the established HCS Waiver Program Payment rates, [located here](#). According to 40 TAC §9.178(o):

(o) The program provider must not assess charges against the individual's personal funds for costs for items or services reimbursed through the HCS Program or through CFC.

**Is an HCS Provider able to decline a contract with an Individualized Skills and Socialization provider that the individual or LAR has chosen, when the Individualized Skills and Socialization provider is charging 100% of the Individualized Skills and Socialization rate to the HCS Provider?**

If the Individualized Skills and Socialization provider is a contractor of the program provider, the provider's costs must be considered reasonable and necessary in regard to the Medicaid cost/accountability reports. Unless the program provider agrees to pay a higher amount, the Individualized Skills and Socialization provider must provide the service at or below the direct services portion of the applicable HCS Program rate.

HHSC does not limit how much of the rate is used to support attendant or direct service providers, neither how a provider proceeds with reimbursing their subcontractors; however, the rate components reflect modeled rate assumptions associated with cost areas as defined in HHSC's rate methodology, limited to available legislative appropriations.

Program provider contracting to a service provider is regulated by [40 TAC §49.308](#).

## Staffing and Ratios

**What is the ratio for staff to consumers?**

The staffing ratios for off-site Individualized Skills and Socialization are outlined in the following rules. For HCS, 26 TAC [§263.2017](#). For TxHmL, 26 TAC [§262.917](#). For DBMD, 26 TAC [§260.507](#). If the ratio of staff to individuals includes individuals with different LONs or other persons receiving off-site Individualized Skills and Socialization or a similar service, the ratio must be the lowest staffing ratio as required by the individuals with the highest level of need or the lowest staffing ratio of the individual in another program.

**Can you please expand on what the level enhanced staffing is in Individualized Skills and Socialization?**

The enhanced staffing rate is available if the individual requires more support from a service provider than the individual would receive with the individual's assigned level of need (LON) during the provision of off-site Individualized Skills and Socialization. The requirement for additional support may be because of the individual's mobility, medical, or behavioral needs.

HHSC released [information Letter 2023-08](#) to provide guidance to providers on the enhanced staffing rate.

**If a group home has all clients with physicians' order for In-home day habilitation, do we need to meet the staffing ratio and do we need a license and which type?**

A provider of in-home Individualized Skills and Socialization is not required to obtain a license. The staffing ratios requirements in HCS and TxHmL are for the provision of off-site Individualized Skills and Socialization only. Individuals receiving Individualized Skills and Socialization in the DBMD Program are required to follow staffing ratios for both on-site and off-site Individualized Skills and Socialization.

**Is it correct that there are not set on-site ratios?**

The HCS and TxHmL Programs rules have requirements for off-site ratios only. The DBMD Program requires staffing ratios for on-site and off-site and are available under 26 TAC [§260.507](#).

## **In-Home Individualized Skills and Socialization Services**

**If someone is providing Individualized Skills and Socialization in the home and is contracted to provide the services, would they be considered a contracted provider and need to be added to the application?**

In-home Individualized Skills and Socialization service provision is not subject to license requirements.

**How do we handle this service for individuals who have doctor ordered in-home day habilitation?**

The HCS Program rules do allow for an in-home Individualized Skills and Socialization provision if the individual meets the criteria for the service. In-home Individualized Skills and Socialization service providers are not subject to licensure requirements.

**In HCS/TxHmL DayHab requirements there was an exception to provide in-home dayhab services with a physician order for those medically fragile or behaviorally unable to participate in traditional programming?**

The HCS Program rules do allow for an in-home Individualized Skills and Socialization provision if the individual meets the criteria for the service. An individual may receive in-home Individualized Skills and Socialization only if they meet one of the following criteria:

- A physician has documented that the individual's medical condition justifies the provision of in-home Individualized Skills and Socialization; or
- A licensed professional or behavioral supports service provider has documented that the individual's behavioral issues justify the provision of in-home

Individualized Skills and Socialization; or

- The individual is 55 years of age or older and requests to receive in-home Individualized Skills and Socialization.

**I was told by the Training team in in San Marcos that HCS In-Home Day Hab would not need a License. Is that correct?**

In-home Individualized Skills and Socialization service providers are not subject to license requirements.

**Can Individualized Skills and Socialization be provided in the client's residence if justified?**

The HCS Program rules do allow for an in-home Individualized Skills and Socialization provision if the individual meets the criteria for the service.

An individual may receive in-home Individualized Skills and Socialization only if they meet one of the following criteria:

- A physician has documented that the individual's medical condition justifies the provision of in-home Individualized Skills and Socialization; or
- A licensed professional or behavioral supports service provider has documented that the individual's behavioral issues justify the provision of in-home Individualized Skills and Socialization; or
- The individual is 55 years of age or older and requests to receive in-home Individualized Skills and Socialization.

**Who can provide in-home Individualized Skills and Socialization in a Host Home or group home?**

A qualified service provider must meet the requirements in the HCS Billing Requirements, Section 43102.8. The service provider cannot be the individual's host home/companion care provider.

**What are examples of activities for in-home Individualized Skills and Socialization? Do they continue to be the skills they are working on noted on the PDP?**

The activities conducted during in-home Individualized Skills and Socialization should be based on the individual's goals identified through the person-directed planning process.

**May someone who resides with the individual receiving in-home Individualized Skills and Socialization and is not the host home provider be the in-home Individualized Skills and Socialization provider?**

If the person meets all qualified service provider requirements in the HCS Billing

Requirements, Section 43102.8, and is not the individual's host home/companion care provider, then they can be the service provider of in-home Individualized Skills and Socialization.

**Why would in-home Individualized Skills and Socialization not allow a person to leave the home for a walk outside? So the provider would have to obtain a DAHS Individualized Skills and Socialization license to take an individual to a nearby park?**

Program rules require that in-home Individualized Skills and Socialization be provided only in the individual's residence. If an individual leaves their home during the delivery of in-home Individualized Skills and Socialization, the service is no longer considered in-home Individualized Skills and Socialization. If the individual is still receiving services that meet the definition of Individualized Skills and Socialization, the service becomes off-site Individualized Skills and Socialization (or on-site Individualized Skills and Socialization if provided at an on-site location) and must be provided by a licensed Individualized Skills and Socialization provider. The provider would be responsible for either obtaining an Individualized Skills and Socialization license or being employed by a licensed provider.

**If an In-Home Individualized Skills and Socialization provider wants to go into the community with the individual, would they need to use the individual's home as the location of the DAHS Individualized Skills and Socialization service location?**

If an individual leaves their home during the delivery of in-home Individualized Skills and Socialization, the service is no longer considered in-home Individualized Skills and Socialization. If the individual is still receiving services that meet the definition of Individualized Skills and Socialization, the service becomes off-site Individualized Skills and Socialization (or on-site Individualized Skills and Socialization if provided at an on-site location) and must be provided by a licensed Individualized Skills and Socialization provider. The provider would be responsible for either obtaining an Individualized Skills and Socialization license or being employed by a licensed provider.

**Will a medical justification be required for individuals that will continue to receive in-home Individualized Skills and Socialization services?**

Before providing in-home Individualized Skills and Socialization to an individual, a program provider must obtain documentation:

- from a physician that the individual's medical condition justifies the provision of in-home Individualized Skills and Socialization;
- from a licensed professional or behavioral supports service provider that the individual's behavioral issues justify the provision of in-home Individualized Skills and Socialization; or
- that the individual is 55 years of age or older and requests to receive in-home Individualized Skills and Socialization.

**If the HCS provider has required documentation for in-home day habilitation, they do not have to be Individualized Skills and Socialization licensed? Are they**

### **able to bill for in-home day habilitation?**

The provision of in-home Individualized Skills and Socialization does not require a DAHS license. A program provider may bill for in-home Individualized Skills and Socialization without obtaining a license.

### **According to the rules, a person may receive in-home Individualized Skills and Socialization assuming certain criteria are met/justifications secured. Provision of the service does not require a license. If the person wants to also engage in off-site activities, such must be provided by a licensed Individualized Skills and Socialization. In these cases, can (as an example) the HH provider obtain a license for off-site only and provide the service as long as the HH provider was not the person delivering the service?**

In accordance with the HCS Billing Requirements, [Section 43102.7](#), a host home/companion care provider is prohibited from being the service provider of in-home Individualized Skills and Socialization. There is no prohibition on the host home/companion care provider being a service provider of on-site or off-site Individualized Skills and Socialization, but those services cannot be provided in the individual's residence. The host home/companion care provider would need to either be employed by an Individualized Skills and Socialization provider or obtain an Individualized Skills and Socialization license.

### **Can the individual (again one who has a justification for in-home Individualized Skills and Socialization) attend an Individualized Skills and Socialization just to participate in off-site Individualized Skills and Socialization only, or must that service be provided in an off-site only licensed Individualized Skills and Socialization?**

Yes, an individual who has a justification to receive in-home Individualized Skills and Socialization may choose to also receive off-site Individualized Skills and Socialization at a facility that provides both on-site and off-site Individualized Skills and Socialization. It is not required that they receive off-site through an off-site only licensed individualized skills and socialization facility.

### **What is the cut-off date for family provided services for in-home day habilitation and community first choice?**

In-home day habilitation will no longer be available effective March 1, 2023. HHSC extended the temporary allowances to in-home Individualized Skills and Socialization, but those allowances were discontinued at the end of the public health emergency (PHE) effective May 11, 2023.

### **Where does this leave the in-home dayhab?**

The HCS Program rules ([26 TAC §263.2007](#)) do allow for in-home Individualized Skills and Socialization if the individual meets the criteria for the service. The criteria to receive in-home Individualized Skills and Socialization include either documentation of a medical condition or behavioral issue that justifies the provision of in-home Individualized Skills and Socialization, or an individual who is 55 years of age or older.

## Off-Site Services

### **Can you explain what is meant by off-site provision?**

Off-site Individualized Skills and Socialization provides activities that integrate an individual into the community to promote the individual's development of skills and behavior that support independence and personal choice and is provided in a community setting chosen by the individual from among available community setting options. Examples of community settings include public libraries, stores, community fairs, or public parks.

### **Does off-site mean in-home?**

Off-site Individualized Skills and Socialization is provided in a community setting chosen by the individual from among available community setting options. This includes transportation from an on-site location to an off-site location and between off-site locations. It cannot be provided in a building where on-site Individualized Skills and Socialization is provided.

In-home Individualized Skills and Socialization is provided in the residence of the individual receiving the service and is not required to be provided by a licensed service provider. As soon as an individual is no longer receiving in-home Individualized Skills and Socialization provided at the location of the individual's residence, the service would no longer be considered in-home Individualized Skills and Socialization. The service would become off-site Individualized Skills and Socialization (or on-site Individualized Skills and Socialization if provided at an on-site location) and must be provided by a licensed Individualized Skills and Socialization provider.

### **What are the requirements of doing our off-site events?**

Off-site Individualized Skills and Socialization is provided in a community setting chosen by the individual from among available community setting options. This includes transportation from an on-site location to an off-site location and between off-site locations. It cannot be provided in a building where on-site Individualized Skills and Socialization is provided. Some examples of off-site activities would be attending free community events, learning to purchase items while shopping in the community, or going to the local library.

### **At what point does off-site time begin? If they arrive at the facility at 8:30am and board to go off-site at 9am, does off-site start the minute they board the van or when they arrive where they are going?**

The provision of off-site Individualized Skills and Socialization includes transportation of an individual from an on-site location to an off-site location and between off-site locations. Therefore, transportation time should be billed as off-site Individualized Skills and Socialization.

### **Are there requirements for the amount of time spent off-site for individuals wanting both on-site and off-site?**

The amount of on-site and off-site will vary by person, based on the goals developed by the individual's service planning team (SPT). The Individualized Skills and Socialization provider will be responsible for developing activities to support the individual's goals.

**When a PDP is developed that includes the new Individualized Skills and Socialization where does the list of community activities the consumer can choose from regarding those community activities come from?**

The Individualized Skills and Socialization provider is responsible to develop off-site activities to support the goals identified on the person-directed plan.

**How long do you have to be off-site?**

The amount of on-site and off-site will be individualized based on the goals developed by the individual's service planning team (SPT). The Individualized Skills and Socialization provider will be responsible for developing activities to support the individual's goals.

**Our day hab occupies the bottom floor of one building on a large campus. Are we able to provide off-site services in different areas of the campus we do not currently occupy?**

HCS Policy considers a building on the same property as a licensed on-site Individualized Skills and Socialization facility as part of the on-site Individualized Skills and Socialization, which would mean that this Individualized Skills and Socialization provider would not be allowed to provide off-site Individualized Skills and Socialization there. [26 TAC §263.2005\(h\)\(4\)\(A\)](#) states:

(h) Off-site Individualized Skills and Socialization:

(4) is not provided in:

(A) a building in which on-site Individualized Skills and Socialization is provided;

Off-site Individualized Skills and Socialization cannot be provided at an on-site location, even if it is at a physically separate building on the same property as a licensed on-site Individualized Skills and Socialization facility.

**Has CMS responded with an approving the extension of the off-site date yet?**

HHSC is still awaiting feedback and approval from CMS regarding the Corrective Action Plan (CAP).

**Our day hab occupies the bottom floor of one building on a large campus. Are we able to provide off-site services in different areas of the campus we do not currently occupy?**

Off-site Individualized Skills and Socialization is not provided in:

- a building in which on-site Individualized Skills and Socialization is provided; or

- a setting in which an individual must not reside, as set forth in the rules governing the waiver Program, unless:
  - the off-site Individualized Skills and Socialization activity is a volunteer activity performed by an individual in such a setting; or
  - off-site Individualized Skills and Socialization is provided in an event open to the public; or
  - the residence of an individual or another person, unless the off-site Individualized Skills and Socialization activity is a volunteer activity performed by an individual in the residence.

**Can the program provider for an individual obtain an off-site only Individualized Skills and Socialization license so the individual can participate in off-site Individualized Skills and Socialization activities as long as the service provider of such is not the HH provider? And if so, could the person providing the in-home Individualized Skills and Socialization work for or contract with the provider to provide off-site Individualized Skills and Socialization to the individual?**

Yes, a program provider may become a licensed off-site only Individualized Skills and Socialization provider so that an individual can participate in off-site Individualized Skills and Socialization activities. The service provider providing in-home Individualized Skills and Socialization would be allowed to become an employee or contractor of the program provider owned off-site only Individualized Skills and Socialization provider, as long as it met all other service provider requirements outlined in program rule and in the HCS Program Billing Requirements.

## **On-Site Services**

### **What is on-site service provision?**

On-site Individualized Skills and Socialization is provided in a building or a portion of a building that is owned or leased by the Individualized Skills and Socialization service provider. This includes transportation of an individual from one on-site Individualized Skills and Socialization location to another on-site location.

### **How will on-site and off-site be broken down? Does the individual choose the time they want to be off-site? Or will the provider schedule that time?**

The amount of on-site and off-site will vary by person, based on the goals developed by the individual's service planning team (SPT). The Individualized Skills and Socialization provider will be responsible for developing activities to support the individual's goals.

### **Is there an option to provide on-site only?**

No.

## **Individual Plan of Care (IPC)**

### **Will we be required to do a revision for clients to change Day Habilitation on their IPC or will it stay the same for billing?**

HHSC released [IL 23-03](#) on January 9, 2023, to provide guidance to program providers, LIDDAs, and FMSAs regarding IPC updates to include Individualized Skills and Socialization. HHSC has implemented auto-authorizations to give service coordinators additional time to meet with the individual's service planning team (SPT) to update the person-directed plan (PDP) and for program providers to update the individual's implementation plan (IP).

### **If Individualized Skills and Socialization is now available, why is it not a selection on the IPC forms?**

Form 3608 and Form 8582 were updated to include Individualized Skills and Socialization and are published on the HHSC website.

### **How about IPC Revisions, are we removing Day Habilitation from IPC and is there a new IPC form to include the new service?**

HHSC will provide information to program providers regarding the implementation of Individualized Skills and Socialization and required updates to an individual's service plan to address this new service. HHSC will be updating forms, including the IPC form, to add this new service.

### **If anyone can apply, is the IPC going to get updated with its own vendor number for the DBMD program?**

Individuals in the DBMD program will continue to receive services through their chosen DBMD program provider. Similar to the current provision of day habilitation, an individual may choose a service provider of Individualized Skills and Socialization, which may either be their DBMD program provider or a subcontractor.

### **When will we have paper IPC forms to add Individualized Skills and Socialization?**

Form 3608 and Form 8582 were updated to include Individualized Skills and Socialization and are published on the HHSC website.

Additionally, service delivery logs are available on the HHSC website to document the provision of on-site, off-site, and in-home Individualized Skills and Socialization. HHSC released an [alert on March 14th](#) available on the HCS Provider Portal to provide clarification on the service delivery logs for Individualized Skills and Socialization.

### **Will the IPC delineate on-site and off-site hours? Or is that just specified in the PDP and during billing?**

The IPC does not delineate on-site, off-site, and in-home Individualized Skills and Socialization.

**Will providers or LIDDA have to add hours to IPC?**

HHSC has auto authorized units for Individualized Skills and Socialization for individuals receiving day habilitation in the HCS and TxHmL programs. [Information Letter 2023-03](#) outlines the timeline for service coordinators to update service plans.

**When revising the IPC, do we include the hours a person attends daily?**

The IPC reflects the total units for the IPC year.

**When you enter an IPC In TMHP, it does not distinguish on-site, off-site or in-home Individualized Skills and Socialization. Do we use the Individualized Skills and Socialization drop down box to enter our IPC?**

Yes.

**Can we make changes to the IPC?**

Please refer to [Information Letter 2023-03](#) regarding auto authorizations and service plan updates. Service coordinators were instructed to update the PDP at the next renewal or revision requiring a PDP update.

**Once Individualized Skills and Socialization begins on 3/1/23, will transportation be included, or should we add transportation as an individual service on IPC?**

Transportation is included in the provision of both on-site and off-site Individualized Skills and Socialization. Providers can bill for on-site Individualized Skills and Socialization when they are transporting individuals from one on-site location to another on-site location. Providers can bill for off-site Individualized Skills and Socialization when they are transporting individuals from an on-site location to an off-site location. Providers should not add transportation as a separate service on the IPC.

**When will the Service Coordinators of the LIDDAs (Local Area Authorities) be informed of what their responsibilities are and how to determine what goes into the care plan?**

HHSC will provide information and training to LIDDA's regarding the implementation of Individualized Skills and Socialization and required updates to an individual's service plan to address this new service.

**Public Health Emergency (PHE)**

**Does anyone have any insight regarding the COVID-19 rules and In-Home Day Hab rules? Additionally, will Individualized Skills and Socialization in-home be an option under COVID rules if they extend past February 28th?**

In-home day habilitation was no longer allowed effective March 1, 2023. HHSC extended the temporary allowances to in-home Individualized Skills and Socialization, but those allowances were discontinued at the end of the public health emergency (PHE) effective May 11, 2023.

**Can a Host Home Provider provide Individualized Skills and Socialization? Or in-**

### **home day hab provided by host home falls only under the Covid-19?**

HHSC extended the temporary allowances to in-home Individualized Skills and Socialization but those allowances were discontinued at the end of the public health emergency (PHE) effective May 11, 2023.

After May 11, 2023, the service provider of in-home Individualized Skills and Socialization cannot be the individual's host home/companion care provider.

### **An individual receives In-home Day Habilitation due to the covid-19 exception until the PHE ends. Do we have to revise the IPC effective March 1st and implement In-home Individualized Skills and Socialization until the PHE ends? If yes, do we use the billing codes for onsite Individualized Skills and Socialization/ Individualized Skills and Socialization whichever is appropriate?**

HHSC extended the temporary allowances previously applied to day habilitation to in-home Individualized Skills and Socialization through the end of the public health emergency on May 11, 2023. The program provider would need to bill in-home Individualized Skills and Socialization after March 1, 2023.

### **Is there any circumstance allowing HHCC provider to provide Individualized Skills and Socialization after the PHE expires?**

An HHCC is prohibited from being a service provider of in-home Individualized Skills and Socialization.

A HHCC provider could choose to obtain a license or be employed by a licensed Individualized Skills and Socialization provider to provide on-site or off-site Individualized Skills and Socialization to an individual. To obtain a license for Individualized Skills and Socialization, an applicant is required to provide a physical business address where records are kept. This will be the address on the license. The physical business address can be the address of the HH/CC residence. An LLC is not required to be licensed.

### **If someone just wants to keep their loved one home for Individualized Skills and Socialization and does not have a medical or behavior Individualized Skills and Socialization or they are not 55 or older, will they be outright prohibited from in-home Individualized Skills and Socialization? If so, would they be required to give up and/or lose that service as a result?**

In accordance with [Information Letter 2023-10](#), after the exemption which allows for in-home Individualized Skills and Socialization due to COVID-19 public health emergency ends on May 11, 2023, an individual must meet the criteria outlined in rule for the provision of in-home Individualized Skills and Socialization. The SPT would need to discuss how to meet the individual's needs and comply with program rules.

## **Service Delivery Logs, Notes, and Forms**

### **How do we get the Medicaid Scrutiny letter?**

HHSC released [IL 22-53](#) on October 25, 2022, which outlines the heightened scrutiny

process for locations of on-site Individualized Skills and Socialization. To initiate the heightened scrutiny process, a provider must contact HHSC at [MCS Heightened Scrutiny Review@hhs.texas.gov](mailto:MCS_Heightened_Scrutiny_Review@hhs.texas.gov) and provide information about the setting where on-site Individualized Skills and Socialization will be provided.

**When will the 3616 (SDL) forms be sent out?**

Service delivery logs are available on the HHSC website to document the provision of on-site, off-site, and in-home Individualized Skills and Socialization.

HHSC released an [alert on March 14th](#) available on the HCS Provider Portal, to provide clarification on the service delivery logs for Individualized Skills and Socialization.

**Will goals and objectives be required for monitoring Individualized Skills and Socialization?**

Service plans will need to be updated using the person-directed planning process to develop goals and objectives related to Individualized Skills and Socialization.

**Where can we access Form 8615?**

[Form 8615](#) is published on the HHS website at [Form 8615, On-site and Off-site Individualized Skills and Socialization Service Delivery Log | Texas Health and Human Services](#)

**Concerning Individualized Skills and Socialization notes, it has been reported by some providers that some HHSC or TMHP reviewers have told them that the Individualized Skills and Socialization notes cannot be handwritten but must be electronic. Is that true? And if so, where is that stated?**

There is no requirement that service delivery logs for on-site, off-site, or in-home Individualized Skills and Socialization must be electronic over handwritten. HCS Policy does not specify the modality of service delivery log notes, only that the written documentation must be legible. According to [Section 3810](#) of the HCS Billing Requirements:

3810 General Requirements:

Revision 23-2; Effective April 1, 2023

- (a) Legible A program provider must have written, legible documentation to support a service claim.

## **Reporting Abuse, Neglect, Exploitation, and Incidents**

**If we make a report to CII, do we also have to make a report to CIMS?**

The Complaint & Incident Intake process remains the same. All providers in programs that use CII must continue to follow the CII reporting guidelines. CIMS requires the report of abuse, neglect and/or exploitation incidents by program providers, as well as other critical incident categories. The critical incident must be entered into CIMS no later than 31 calendar days after the last day of each month for the month being reported in accordance with HHSC policies.

**Where does an In-Home Individualized Skills and Socialization provider report ANE to?**

An in-home Individualized Skills and Socialization provider would need to comply with the reporting requirements for abuse, neglect, and exploitation that are required in the HCS or TxHmL Program as applicable. In accordance with 40 TAC §9.175 or §9.585, a program provider must report to DFPS immediately, but not later than one hour after having knowledge or suspicion, that an individual has been or is being abused, neglected, or exploited, by calling the DFPS Abuse Hotline toll-free telephone number, 1-800-647-7418 or using the DFPS Abuse Hotline website. The provider of in-home Individualized Skills and Socialization must also submit to CIMS any report of abuse, neglect and/or exploitation incidents by providers, as well as other critical incidents. CIMS entries must be completed no later than 31 calendar days after the last day of each month for the month being reported in accordance with HHSC policies.

## **Service Areas**

**How will HHSC address regions with limited options for day habilitation already, and day habilitation locations who close to HCS/TxHmL individuals?**

HHSC continues to engage with program providers associations and advocacy associations to address concerns with provider network adequacy.

**What is the choice if there is no Individualized Skills and Socialization in the area to use?**

The program provider should work to identify potential Individualized Skills and Socialization providers in their area. The SPT can also meet to discuss how the individual's needs can be met given the available service providers.

**Does the state have a contingency plan if multiple day programs close and/or do not pursue an Individualized Skills and Socialization license and other programs refuse or cannot take the high LON?**

HHSC continues to engage with program provider and advocacy associations to address concerns with provider network adequacy.

## **Contact Information**

**Will you please share the contact information of the Medicaid partners?**

Questions related to Individualized Skills and Socialization can be sent to the respective program policy boxes - [HCSPolicy@hhs.texas.gov](mailto:HCSPolicy@hhs.texas.gov), [TxHmLPolicy@hhs.texas.gov](mailto:TxHmLPolicy@hhs.texas.gov) or [DBMDPolicy@hhs.texas.gov](mailto:DBMDPolicy@hhs.texas.gov). General questions can be sent to [LTSS\\_Policy@hhs.texas.gov](mailto:LTSS_Policy@hhs.texas.gov).

## **Resources**

[Individualized Skills and Socialization | Texas Health and Human Services Day Activity & Health Services \(DAHS\) | Texas Health and Human Services](#)

[Deaf Blind with Multiple Disabilities \(DBMD\) | Texas Health and Human Services Home & Community-based Services \(HCS\) | Texas Health and Human Services Texas Home Living \(TxHmL\) | Texas Health and Human Services](#)

[Provider Training | Texas Health and Human Services](#)

[Contact Us | Texas Health and Human Services](#)

[CII Provider Self-Reporting Instructions and Information](#)

[Open Records Policy & Procedures | Texas Health and Human Services](#)

[TULIP Online Licensure Application System | Texas Health and Human Services](#)

[Employee misconduct registry \(EMR\)](#)

[Nurse aide registry \(NAR\)](#)

[Medication aide registry \(MAR\)](#)

[Search the Texas HHSC OIG Exclusions Database](#)

[Search the United States Department of Health and Human Services \(HHS\) Office of Inspector General | Exclusions Database](#)