

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 1 of 74

BudgetCategory

Summary Rationale of Request

Comments

Cleaning Supplies

Region: NR

Request Date: 23-Mar-04

Response Date: 31-Mar-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual has medical, physical, and behavioral challenges that require intensive cleaning and sanitization.

Approved for \$480 a based on previous prior approval for a similar situation. The full amount was approved on appeal.

Region: WR

Request Date: 18-Dec-03

Response Date: 07-Jan-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual is a 15 year old autistic boy residing with his parents in Waterbury, CT. Most recently, the individual has been projectile vomiting which has added to the need extra cleaning. The vomiting has been a very serious concern, medically and behaviorally. Consultation with medical disciplines as well as psychological and behavioral disciplines are in progress yet the behavior continues to present itself. There is an increased need for cleaning supplies because of the constant need to clean. Floors have been ruined, carpets needed to be replaced and furniture has been damaged.

ISA Cost Accounting Standards state that cleaning supplies as a result of the individual's disability are allowable. With prior approval. While we believe these costs are needed, we also feel that these behaviors need to be addressed in JD's plan of care. We recommend approval for these costs. However, we also recommend that these costs be reviewed again before the next renewal period to determine if they are still necessary and if necessary if the amounts can be reduced.

Region: WR

Request Date: 27-Jul-05

Response Date: 03-Aug-05

One Time Amount: \$0

Outcome: Approved

Mary Anne Anderson can be described as very behavioral and challenging woman. Among some of her behaviors are tendencies to spit and throw bodily fluids. For health and safety reasons, this poses a risk to the staff that are working with her and a great deal of the staff's time has been dedicated to keeping the van and Mary Anne's residence clean. The behaviors have been addressed over many, many years and although they have decreased in frequencies, they still occur rather often. At this time, Peg's aunt has requested that the cost of the cleaning products be covered under the current ISA/budget (see attached). Cleaning products would include anti bacterial wipes, spray and cleaners as well as sponges, paper towels, gloves, etc. The current IP is also attached. Please note that the safety screening was done by hand and is not in a format able to be sent by email at this time.

Clothing

Region: NR

Request Date: 23-Mar-04

Response Date: 25-Mar-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual has health and behavior challenges that require ongoing replacement of his clothes. Neither the individual or his family have the resources to keep up with his needs.

The need for clothes is directly related to the individual's disability. Approved for \$1200 a year.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 2 of 74

| BudgetCategory | Summary Rationale of Request | Comments |
|---|---|---|
| Clothing | | |
| Region: NR Request Date: 23-Jan-04 Response Date: One Time Amount: \$0 Outcome: Approved with Qualifications | Budget proposes reimbursing the family up to \$25.00 per month for the purchase of undershirts and underwear. This will allow the family to buy up to two 3-packs of underwear and one 3-pack of undershirts per month. Individual constantly rips the collars of undershirts and the elastic of his underwear. Uses them for self-stimulation; taking and twirling them around his finger and flapping them in the air. This individual is diagnosis with profound MR & Autism. Family is on a fixed income. | As behaviors improve, review annually to determine if this continues to be an ongoing need. |
| Region: NR Request Date: 23-Mar-04 Response Date: One Time Amount: \$0 Outcome: Approved | Individual requires 2 pairs of shoes per year at \$75.00 a pair. Individual lives in a Health Care Center. Receives only \$50.00 a month. Individual has Prader Willie Syndrome and is very hard on shoes. Needs special shoes form Foot Prints because of swelling in feet and legs. | Clothing required as a result of the individual's disability is allowable subject to prior approval. |
| Region: SR Request Date: 12-Jul-05 Response Date: 19-Jul-05 One Time Amount: \$0 Outcome: Approved | Replace clothing items which are destroyed when Jeremy becomes agitated. Jeremy is diagnosed with ADHD and Autism. He exhibits many challenges including aggressive behavior, property & clothing destruction and verbal abuse. He takes medication to control his outburst, however he continues to destroy his clothing frequently. Jeremy is seen by Psychiatrist Henry Mann, M.D for his behavior and clothing issues. | Review his progress at least annually to determine if clothing is still needed as a result of his behaviors. |
| Region: SR Request Date: 25-Sep-03 Response Date: 07-Oct-03 One Time Amount: \$0 Outcome: Approved | The request is for specialized clothing that is not readily available in the typical clothing stores and is also more expensive than regular clothing. The clothes will help her to maintain a positive self image, further her vocational pursuits, and become more independent in the future. The request is for \$500 annually. | ISA Cost Accounting Standards state that clothing is a personal item funded by the personal funds individuals receive through awards from State and Federal sources. Clothing required as a result of the individual's disability is allowable subject to prior approval. The supports relate to the person's disability, are a part of her individual plan and the funds are covered in the ISA. |

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 3 of 74

BudgetCategory

Summary Rationale of Request

Comments

Clothing

Region: WR

Request Date: 18-Dec-03

Response Date: 07-Jan-04

One Time Amount: \$0

Outcome: Approved with Qualifications

John is a 15 year old autistic boy residing with his parents in Waterbury, CT. As John ages, his behaviors are becoming more distinct and new behaviors are beginning to emerge. Before John had an ISA in place, he was receiving a family support grant (\$250 per month) to address his needs for clothing and shoes, relative to John's disability. The shoes are necessary as John is a "toe walker" which causes a quick deterioration of the shoes. The clothing costs are a result of an increased need for clothing due to John's destructive behavior as well as his propensity to throw clothes away. Most recently, John has been projectile vomiting which has added to the need to replace clothing. The family is requesting a \$100 per mth to address the clothing needs..

ISA Cost Accounting Standards state that clothing costs as a result of the individual's disability are allowable with prior approval. While we believe these costs are needed, we also feel that these behaviors need to be addressed in JD's plan of care. We recommend approval for these costs. However, we also recommend that these costs be reviewed again before the next renewal period to determine if they are still necessary and if necessary if the amounts can be reduced.

Communication

Region: SR

Request Date: 25-Sep-03

Response Date: 07-Oct-03

One Time Amount:

Outcome: Approved with Qualifications

The request is to purchase a cell phone to help manage and support the needs of the individual on a daily basis. There are three to four staff supporting the individual for day and residential supports. The individual has significant challenges that frequently result in changes being made to the scheduled event, or work activity. This will allow ongoing communication with the family for consultation with the staff on the best option for each situation. The cost of the ongoing cell phone service is 29.99 a month and the one time cost of the phone and car adapter is \$120.

It is preferred that staff use their own call phones and provide documentation for reimbursement of cell phone charges each month. However, there are several staff involved and all of the staff may not have or be able to use their own cell phones while supporting the individual. The individual has significant challenges that result in frequent changes to the planned activity. Because of the behavioral challenges and the number of staff involved in supporting the individual, the cost of the monthly cell phone service is a reasonable expense. The costs are budgeted as a part of the ISA. We disallow the actual cost of the phone itself as a free or cheaper costing phone should be available. We also disallow the one time cost for the in car adapter, unless the selected phone did not come with a hands free device or adapter.

Region: WR

Request Date: 28-Jan-04

Response Date: 02-Feb-04

One Time Amount:

Outcome: Approved with Qualifications

The individual needs to have access to her support staff for guidance, day to day decision making and as a resources to enable her to live independently in the community and to support her children. The cell phone has been an integral part of her support plan to help her maintain her family unit, work and live independently in the community, and maintain contact with her support staff. The phone enables her to communicate with others when out of her home, as it is frequently necessary for her to be. Request is for \$550 a yea.

The request was approved for up \$20 a month.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 4 of 74

BudgetCategory

Summary Rationale of Request

Comments

Communication

Region: WR

Request Date: 18-Nov-03

Response Date: 01-Dec-03

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual is a very independent person who has epilepsy since birth. He explores his surrounding community without staff support, and has a history of sudden seizures. The use of his cellular phone allows him to contact his staff or to call for help in the event of a seizure, or other problems that he may encounter when alone in the community. The agency supporting him adds that the cellular phone is necessary part of his plan. The cost of the cellular phone is currently being supported through existing dollars. The cost of the current plan is 39.99 a month.

The cell phone is used as one component of the individual's support plan, and it enables him to access the community independently with the ability to call for assistance when needed. There are less expensive plans that can provide the same level of service. Costs are allowable only for the portion of the expense that relates directly to individual's care. In reviewing this cell phone request, we would recommend funding \$20 per month for the cell phone bill. This would fund a very basic plan and would provide minimal available minutes that could be used in the case of an emergency. Emergency use is the basis of this request. Any additional cellular phone bill should not be funded through the ISA.

Region: WR

Request Date: 17-Feb-04

Response Date: 25-Feb-04

One Time Amount: \$0

Outcome: Approved with Qualifications

Cellular use allows the individual to contact her support person at any given time of the day, especially during the late evening. Because of her personal habits, she finds herself in unsafe predicaments which requires support to help her to de-escalate her anger from someone who knows her well. Consistent supports are needed due to her intense habits and it has been an effective.

Approved at the current rate for the term of the cell phone contract, December 04. Approved for an ongoing rate of \$20 a month after the contract expires. If there is a need to provide more financial assistance than \$20 a month, submit a prior approval with plan of care details as to programmatic efforts to change the habits that places her in unsafe predicaments.

Region: WR

Request Date: 05-Nov-03

Response Date: 25-Nov-03

One Time Amount: \$0

Outcome: Approved with Qualifications

The request is to pay \$30 a month for a cell phone for a cell phone. Given the individual's aptitude for all forms of electronic equipment, the cell phone has proven invaluable for maintaining support and supervisory contact. Support team members have often found the cell phone to be the best method for reaching the individual; core members of the team include a behavior specialist, direct care worker by private hire, a psychiatric social worker and the individual's father, who is employed in New York City. The cell phone provides a link between father and son which could not be replaced by another means of communication. When facing a difficult problem or emergency, the individual has utilized the cell phone on many occasions to summon instant advice. An example of the cell phone's usefulness occurred when the individual was staying temporarily in motel room while searching for an apartment: the cell phone was an important lifeline for him during this period of crisis.

The cell phone is used for communication between the individual and his circle of support and for the individual's personal use. Because the phone is used for personal use, the individual should be responsible for at least a portion of the cost. This request is recommended for approval for \$20 per month for emergency use only. This should allow for the opportunity to place phone calls as needed for emergencies or to summons advice, and will limit the cost to the ISA to \$20 per month. Should the phone bills exceed \$20, the amount over \$20 is not to be funded by the ISA.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 5 of 74

BudgetCategory

Summary Rationale of Request

Comments

Communication

Region: WR

Request Date: 07-Oct-03

Response Date: 23-Oct-03

One Time Amount: \$0

Outcome: Approved with Qualifications

Operational Costs (fax machine bill, phone line for fax, supplies for fax machine such as paper and ink cartridges) The fax machine was purchased several years ago. The expenses that the employer is seeking to have covered include the monthly fax bill (approximately \$ 20 per month) and the supplies that are needed to maintain and use the fax machine. The individual's day program and residential program are run from the guardian's home. However, the circle of support that is integral to individual's overall plan remains in constant communication with the guardian. Such communications are quite often made via fax machine. Utilizing the fax machine is also a very effective way of maintaining the needed paperwork between all parties, including the fiscal intermediary.

ISA Cost Standards state that communication costs are allowable if they are related directly to the care of individual, they are reasonable, and they are budgeted for as part of ISA. We agree that the costs of the fax calls and supplies are necessary for the ISA, however, we question the need for a second phone line for the fax machine. The fax machine can be plugged into the main phone line for the home for the time that faxes need to be sent out each day. We recommend the fax costs, phone calls and supplies are funded by the ISA. However, the additional phone line for the fax machine is not a necessity because a phone line is already available in the home.

Region: WR

Request Date: 06-Oct-03

Response Date: 19-Oct-03

One Time Amount: \$0

Outcome: Approved with Qualifications

The request is for a cell phone for \$30 a month. The individual has unpredictable aggressive behaviors associated with Autism. These behaviors can create an unsafe situation for her and her support staff when going into the community. Several strategies have been developed to address and help the individual manage behaviors. The individual enjoys and benefits from participation in a variety of community activities, as a part of her individualized day support plan. The individual lives in an urban area, and uses public transportation or walks to a variety of destinations in the community.

Costs are allowable for that portion of the expense that relates directly to the individual's care, separate from costs incurred by other members of the household. The primary use of the phone is for communication between the mother and the staff, and as a back up option to call for assistance when the individual has difficulties that cannot be managed by the staff. The phone is requested for use for day supports, which are provided at 15 to 20 hours per week. The expense relates directly to the individual's disability, prevents or minimizes a safety risk to the individual, and directly supports the individual's ability to participate in the community. However, the cost to be funded by ISA's will be \$15 per month or \$180 per year. This is half the average/reasonable cost of a \$30 plan. The 150 minutes is sufficient to handle emergency situations. This would equate to 5 minutes a day. The use of prepaid phone minutes can also be considered, if the family does not want to pay the balance of the cell phone charges for the current plan. The effective date of implementation is January 1, 2004.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 6 of 74

BudgetCategory

Summary Rationale of Request

Comments

Communication

Region: WR

Request Date: 07-Jan-04

Response Date: 16-Jan-04

One Time Amount: \$250

Outcome: Approved with Qualifications

Cell phone/walkie-talkie communication system. There is the initial charge for the phones and a set-up fee. There are ongoing monthly service charges for each phone. \$318.-one time for phones, \$182.initial service charge, \$105.56 monthly charge for 2 phones. The individual has significant challenges which require monitoring and the ability to have continuous contact. The cell phone is an integral part of the individuals treatment plan.

The ISA Cost Accounting Standards state that communication costs including cell phones are allowable subject to prior approval and they are related directly to the care of the individual, they are reasonable, and they are budgeted as part of the ISA. The need for a cell phone based on the criteria for prior approval has been established. We also determine the extent to which the ISA should fund the costs. We recommend approval for a reduced cost, \$46/month.or roughly half the monthly cost of the service as well as half of the initial service charge and cell phone purchase. The total one time costs that should be funded by the ISA is \$250 and the recurring monthly charges funded by the ISA is \$46 per month.

Region: WR

Request Date: 24-May-04

Response Date: 09-Jun-04

One Time Amount: \$0

Outcome: Approved

This request is for postage, mailings, fax paper, supplies for job that are not provided. Cleaning gloves, batteries for 2-way communication system, special gloves to wear when cleaning tables at her job due to Punctate Palmer Plantar Keratoderma on her hands. Special gloves are to keep this condition under control. Two-way communication system that was purchased due to the distance from work site to supervisor in the event of an emergency and for any questions she may have. The distance she would have to walk and her unstable balance issues has been a benefit. Batteries are needed to keep this functioning. Postage is used for job related items; fax paper is used as she has her job coach has timesheet faxed to the FI.

C These costs are reasonable and directly related to the care of the individual.

Community Activities

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 7 of 74

BudgetCategory

Summary Rationale of Request

Comments

Community Activities

Region: SR

Request Date: 09-Nov-05

Response Date: 15-Nov-05

One Time Amount: \$0

Outcome: Approved

Ted has been on the DMR "E" list for RES support and recently has been allocated (AO) funding (11/15/05). PRAT lists Ted as requiring SL supports as they "did not think that the documentation justified 24 hour supervision". However, the team and those that know Ted do not feel that SL supports are enough to keep Ted safe in the community at this time due to his mental health instability and lack of independent living skills. The PST feel that it is in Ted's best interest at this time to provide in-home and community supports while remaining at home and assessing his skills for community living (if appropriate and with the right supports), thereby giving Ted's mom weekend and some weekday relief so that Ted can remain at home as long as possible. In order to provide Ted with community integration doing person-centered activities, Ted will require activity money for activity fees for himself and his support staff. Ted does not have sufficient funds to budget for this, as his finances are being budgeted for his daily needs. Ted needs structured activities as he roams the streets when he is home and badgers his mother constantly for money and cigars, especially on the weekends and holidays when he is not at his work program. Ted's mother finds it difficult to manage Ted at home due to her own health concerns. Family cannot provide the structure that Ted needs when he is not at his work program. There have been a number of concerned-citizen phone calls to DMR over the years as well as police concerns. In order for Ted to be safe in the community, Ted requires supervision and support. His RES support funding will be utilized to provide a variety of home and community supports until his mental health can be stabilized, his community living skills can be assessed and he can hopefully transition to supported community living .

Direct Care by Family Member

Region:

Request Date: 07-Jan-04

Response Date: 16-Jan-04

One Time Amount: \$0

Outcome: Approved

The individual was living in a CLA that was not meeting his needs. The individual has moved into his mother's home, and his mother gave up her full time job to provide 40 hours of support per week and coordinate his day, residential, and clinical supports. The request is to continue paying his mother, \$17 an hour, which includes transportation.

The supports have been effective and in place for several years and are cost effective. It is also our understanding that the individual's behavior needs creates the need for supervision. This would exceed the typical family support function. The rate of \$17 per hour is a reasonable rate.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 8 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: NR

Request Date: 16-Jul-04

Response Date: 21-Aug-04

One Time Amount: \$0

Outcome: Denied

She requires 24 hour care due to her disabilities and medical conditions. She has multiple disabilities (encephalopathy, resulting in severe cerebral palsy with spastic quadriparesis, seizures, severe scoliosis, blindness, respiratory complications, hydrocephaly, and difficulties in regulating her body temperature). She also has increased muscle tone and extension, which can put her at great risk during transfers with her lift when untrained, unqualified people are using it with her. She uses a wheelchair. Her mother coordinates all of her services and trains staff on specific lifting, communication, and eating procedures. Her mother works 25 hours/week and would need to give this up to care for her daughter for those hours. Over the years, it has been difficult to find consistent, qualified caregivers for her daughter, and has also experienced high staff turnover. She says that other occasional privately-hired caregivers have proved to be short-term, unreliable, and unable or unwilling to provide the quality level of care. Rachael currently uses her grandmother and her aunt periodically as paid caregivers.

There is no indication that the current support staff is terminating her employment, and this support staff is a Certified Nurses Aide who also provides home schooling support to Rachael. It is our understanding that the difficulty with staff turnover in the past was mostly related to the home health care staff that Rachael was entitled to. The use of parents to provide direct support is only applicable when the parent is uniquely qualified through training or specific certifications. It is also difficult for parents, who are also guardians, to separate their parental role from their role as support staff.

Region: NR

Request Date: 02-Jul-04

Response Date: 19-Jul-04

One Time Amount: \$0

Outcome: Approved

This request is to pay this individual's mother \$15.00 an hour for 15 hours a week to provide supports. This support system has been in place for over two years. The family renovated the home so that this individual can live in her own apartment. Services provided include: grocery shopping, cooking, menu planning, teaching and training in housekeeping, personal hygiene, transportation to and from recreation events and all her medical appointments. The mom is an RN and meets the qualifications to provide these services. This individual is very happy with the supports. There are no other budget items in her individual budget.

The individual receiving services is also the sponsoring person for the ISA and the supports are not typical family support functions.

Region: NR

Request Date: 10-Nov-03

Response Date: 18-Nov-03

One Time Amount: \$1,109

Outcome: Approved

The parent is requesting to be paid on a temporary basis while the current long term worker goes on a medical leave for about one month, and for some occasional days when the long term care taker takes time off.

The request to pay the family member for temporary service supports the individual's ability to remain home and is a cost effective arrangement. The mom will be filling in while direct care staff is having surgery and recovering, this would seem to be a reasonable request. The mother would be getting paid the same rate of pay that the direct care worker receives, which is reasonable. However, if the mother becomes the full-time direct care giver, when the current direct care staff retires, another prior approval request would be required to review the details at that time.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 9 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: NR

Request Date: 18-Jun-04

Response Date: 25-Jun-04

One Time Amount: \$0

Outcome: Denied

This mom is a Real Estate Agent and has to go out and show houses on short notice. She has had trouble finding staff for these short periods of time in a crunch. This individual's mother is requesting that her 14 year old daughter fill in with regular support staff during short crunch times when regular staff are not available. Mom has tried to hire staff; has called her regular staff and has not met with success during these short crunch times, and is frequently the only caregiver as her husband is away on business a lot and has a job that requires a long work week.

We are unable to pay for personal support services to anyone under the age of 18.

Region: NR

Request Date: 27-Feb-04

Response Date: 04-Mar-04

One Time Amount:

Outcome: Approved

The individual's mother is requesting that she be paid to provide job coaching supports to her daughter on a temporary basis from December through May. She would be paid at a rate of \$11.50 per hour for up to 9 hours of support per week, however actual paid hours of support are likely to average less than half that amount. The previous support person is in college. The cost for this support is within the dollars allotted in the budget.

The ISA Cost Accounting Standards state that direct care provided by family members is unallowable, but exceptions may be made when service is not typical family support functions, family member is qualified, and family member has reduced income in order to provide supports. In this instance, it appears that the services are not typical family support functions. Approved on a short basis.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 10 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: NR

Request Date: 01-Aug-05

Response Date: 31-Aug-05

One Time Amount: \$0

Outcome: Denied

Rachel's mother Gina Potvin received approval in November '04 by Kathryn duPree (through an appeal process) to begin working for her daughter as of 1/1/05, through Rachel's current residential ISA. The approval was for Gina to be able to work up to 25 hours/week to support Rachel in her home. Conditional with this was the stipulation that Rachel's main employee Darlene Wagner continue to be employed 2 hours/day (10 hours/week) through the ISA, in addition to the school-funded hours Darlene was working (20/week). All of the hours worked by Gina and Darlene had to be funded in total by the existing residential ISA budget (\$22,680). It was determined that the budget could accommodate this from 1/1/05-6/30/05 if the budget continued to have savings See pg2 Darlene was/is currently paid \$14.25/hour and Gina said that she would/should be paid at the same rate (\$14.25/hour). See pg2 continuation Gina Potvin has now requested, through a Programmatic Administrative Review held 6/2/05, that she be allowed to work as a paid employee for her daughter Rachel for 30 hours/week (an increase of 5 hrs./week from what was approved by Kathryn duPree). Upon Rachel's "Aging-Out" in June '05, Darlene Wagner is expected to be the main implementer of Rachel's home-based day program. This will give her 25 hours/week from the DMR Day Program funding. Gina would like to pick up 5 hours/week from the 10 hours/week that Darlene theoretically had been working through the residential ISA. This would give Gina 30 paid hours/week through the residential ISA. This would not allow Darlene any hours to work/get paid through the residential ISA, due to employer contributions and worker's comp policy costs.) This would give Darlene a total of 25 hrs./week total for support for Rachel (DMR Day funding.)Gina maintains that if she was approved for the 30 hrs./week, she could then afford to purchase health insurance for herself and any other 30+ hours/week employee of her daughter. Gina continues to maintain that she is the best and optimal caregiver for her daughter. She has continued to be aware of Rachel's changing and increased needs as a young adult and has continued to adapt routines and care to address Rachel's needs. Examples of some of the challenges that have occurred in the past year or so: 1) Restoring and maintaining skin integrity- Rachel has developed a skin rash that periodically creeps up on various parts of her body due to her increased perspiring and continued incontinence; she needs specialized personal care that involves a lot of changing of clothes/diapers and increased frequency of cleansing/hygiene, which includes time for areas on her body to air-dry and/or use of a blow-dryer. 2) Rachel's mother continues to encourage Rachel to use her verbal words; Rachel's spoken vocabulary has increased yearly with expectation and reinforcement from her mother (and her other caregiver, through direction by Gina); See pg2

Requests for prior approvals cannot be approved if the resources are not committed by the region. This request is for resources that are approved by the region and in the individual budget.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 11 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: NR

Request Date: 02-Jun-04

Response Date: 04-Jun-04

One Time Amount: \$0

Outcome: Approved with Qualifications

Staffing needed for this individual-the staff person who had been providing services is no longer available due to reliability issues (this staff person would leave this individual alone in the house with the younger sister who is only 16 years old (this person should not be responsible for the complex level of care that is required), and there were no other staff arrangements in place. New staff needs to be hired; however in the interim, care needs to be met. Mom just returned home for the hospital and is still quite seriously ill with significant cardiac issues. At this time she cannot participate at all in personal care. She is requesting that her husband (individual's step-father) be paid for these direct care hours. Individual is currently supported through this ISA for 18 hrs/wk at the rate of \$16./ph. Step-father is quite familiar with the needs and personal care routines. The step-father is extremely capable of caring for this individual. Step-father is willing to make arrangements with his employer to be available to provide this care.

The step-father is qualified to provide the support needed. This temporary arrangement will ensure care is provided. Approved as a temporary support until a long-term arrangement can be worked out.

Region: NR

Request Date: 01-Oct-03

Response Date: 02-Oct-03

One Time Amount: \$0

Outcome: Approved with Qualifications

The request is to pay the mother for 38 hours a week at \$15 and hour. The individual required surgery for bladder repair, and has multiple disabilities. The individual's mother works for a home health care agency. The mother has been unable to find reliable, qualified help who can properly perform the catheterization procedure, and has experienced frequent staff turn-over. The funds are available within the existing ISA, and the mother is reducing her work by 24 hours. The mother is a single parent and there are no other family members living in the home to provide supervision, care, and support. The have tried using an agency provider and individual providers, but have not been successful at finding reliable, qualified staff. The doctor has indicated that the necessity of the recent surgery could be the result of improper or unsuccessful catheterization, or delays in the catheterization procedure. Full recovery from the recent bladder surgery will take one year. The individual also requires night time care and catheterization.

The mother is qualified through the home health agency to provide care and has reduced her income. The mother normally is getting paid for 40-44 hours per week, with 24 at the hospital and 16-20 at the home health agency. The prior approval committee approved this request with qualifications; payment to the mother for 24 hours a week, the amount of hours reduced from her hospital job.

Upon appeal the following decision was made; the request to pay the family member up to 38 hours a week at \$15 an hour has been approved. The decision for this approval was based on the following: the family member met all of the criteria in the cost standards related to direct care provided by family members, the individual has significant medical challenges that cannot be safely or easily provided by others, and has a one year recovery period from surgery, the family member is uniquely qualified because of her experience with the required procedures, and her training from her current employers, the physician wants one person doing the catheterization for the recovery period, and has recommended the family member to perform this procedure, and the resources to cover the compensation for these wages are in the ISA.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 12 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: SR

Request Date: 03-Dec-04

Response Date: 14-Dec-04

One Time Amount: \$7,600

Outcome: Approved With Qualification

Requesting funds currently paid to DCF provider and guardian continue to be paid as a monthly stipend after Rebecca ages out of the DCF system in January. Currently, the provider is paid a DCF's medically fragile rate for Becky. It is anticipated that Rebecca will be placed in another program in July. This request is time limited through the remainder of this fiscal year.

Approved on a temporary basis. Stipend will have to be treated as taxable income if this arrangement continues, either as a wage or a taxable stipend.

Region: SR

Request Date: 04-Oct-05

Response Date:

One Time Amount: \$0

Outcome: Approved with qualifications

Decontee would like to hire her father as her job developer, job trainer, and on-going job coach. She would like to hire him for 10 hours per week of support. This will likely lessen as she learns a job and is comfortable at her place of employment. She would also like to pay him for transporting her while looking for a job and then on-going once she is hired. Decontee was awarded \$19,500.00 annually in left over 617 funds. She wants to find competitive employment in the community with on-going supports when needed. Hiring her father would cost significantly less than going through an agency. She would prefer to work with her father because they are from Liberia and is more comfortable with family members who understand their culture.

Approved on a temporary basis up to four months. If Decontee wants to have her father support her after she has secured a job, another request is required with the type and number of support hours needed for ongoing job supports.

Region: SR

Request Date: 14-Oct-23

Response Date: 23-Oct-03

One Time Amount: \$0

Outcome: Approved

The individual requires 27 hours per week of support for monitoring his medical condition, and providing community experiences out of the home when his health and weather conditions permit. In home ADL skills training, and crafts are provided on days he can not go out. The individual's sister has been chosen to provide these supports which she has been providing as part of his ISA when other staff are not available. Recently, due to difficulties with other providers, the individual's sister has taken on full responsibility for his care. A majority of the support hours were provided by a nurse in the past; the individual's sister provided back up supports. Recently, due to personal problems, the nurse/provider has been inconsistent and services have been below expectations. The individual's sister has prior experience working in a DMR group home, and has also been a CTH provider licensed through DMR. She will need to arrange day care for her children so she can support the individual on a daily basis. The rate of \$11.00 per hour is very reasonable.

The Cost Standards allow direct care by family if the support is not typical family support function; if the family member is qualified; and if there is a reduction to income. The services are budgeted for in the ISA, the services are not typical family support functions, and the family member is qualified. It would appear reasonable for the services to be provided by the family member, at the budgeted \$11 per hour for 27 hours per week.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 13 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: SR

Request Date: 22-Dec-04

Response Date: 27-Jan-04

One Time Amount: \$0

Outcome: Approved

These supports allow Michael to take classes using facilitated communication at Albertus Magnus and have assistance with his homework as well. Siblings charge less than Benhaven does and fall under the allowable cost standards. Although they are siblings an exemption should be made due to the scarcity of people versed in this method of communication. It is also difficult to foresee homework requirements. Helena is 23 years old and averages 10 hours per month. She is trained in Facilitated Communication by Suzie Kane from Benhaven.

Region: SR

Request Date: 11-Feb-04

Response Date: 19-Feb-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The request is to continue paying the guardian a stipend equal to the DCF stipend she was receiving. The individual is a 21-year-old female living with cancer. Her health has improved since moving in with her guardian, and she has expressed wanting to live with her guardian permanently. She has lived with her guardian for almost four years along with several other foster children whom she calls her sisters and brothers. She leads a full life with this family, and she continues to need some medical and physical assistance. The guardian's support is specialized and is cost effective.

The service of round the clock supervision would not be the normal family support function. If compensation is made as a non taxable stipend, the guardian needs a CTH license. Otherwise, compenstiaon should be in the form of wages.

Region: SR

Request Date: 27-Sep-04

Response Date: 27-Sep-04

One Time Amount: \$9,000

Outcome: Approved with Qualifications

The individual and her Circle are recommending and requesting approval for funding for her Mother's staffing of a 16-week behavioral program (developed and approved by her Circle). Circle recommends staffing by her Mother for consistency, cost-effectiveness, and professional care her Mother is a nurse). Goal is for individual to be stabilized and safe in the community by the end of January. This also enables the exploration and identification of appropriate residential settings. Her Mother will be taking a leave of absence from her employment. If this is not approved, it is unlikely that she will be ready to return to the community. She has the funding for this plan. She was evicted from VISTA program in early September. She both MR and anxiety/impulsivity disorder. 2) Major goal in her Support Plan is to maintain her emotional/behavioral balance. She has experienced breakdown in all of these areas-physical poor hygiene, sustained a fracture, began cigarette addiction, gained 50 lbs), emotional (medications were not taken regularly) and behavioral stealing escalated placing herself and others at risk). Her current emotional/behavioral imbalance places herself and others at risk in the community. GOAL: She will be ready to return to an appropriate identified residential setting by the end of January. Her Mother can provide the most consistent, professional, cost-effective staffing. The training and cost of hiring professional staff for her behavioral program would be prohibitive.

Direct care provided by family members (mother, father, or siblings) for routine care and supervision is unallowable. Exceptions can be made when the service is not a typical family support function, such as support for intensive medical, behavioral, or supervision needs, the family member is qualified to perform the service, and if the family member has reduced their income in order to provide the service. The conditions for this request fall within cost standard guidelines. Approved as a temporary measure. If this arrangement changes from temporary to an ongoing support, prior approval is required.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 14 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 12-Dec-03

Response Date: 19-Dec-03

One Time Amount: \$0

Outcome: Approved

The request is to pay the individual's brother 14 hours per week for personal care and activities of daily living, as the individual is physically disabled and needs assistance in all areas of personal care. The individual's mother has health issues that prevent her from meeting all of the individual's needs at home. The family lives in a rural area of CT and has had a difficult time finding and retaining staff. The individual has a good relationship with his brother and wishes to continue with this arrangement.

The brother is qualified to provide the supports and the rate of pay is within the reasonable rates.

Region: WR

Request Date: 12-Dec-03

Response Date: 19-Dec-03

One Time Amount: \$0

Outcome: Approved with Qualifications

The request is to pay the individual's sister, \$15 an hour-24 hours a day for 14 days, total yearly amount of \$4447), to provide respite support for two weeks a year when the individual's mother visits her relatives out of state. The respite is provided in the sisters home.

If the in home supports are to continue during the respite supports, then the respite hours should be adjusted so that only one provider is paid. The rate of pay for 24 hour respite is approved at \$7.10 and hour. The total for a 24 hour period not to exceed \$170.40.

Region: WR

Request Date: 15-Jun-05

Response Date: 27-Jun-05

One Time Amount: \$0

Outcome: Approved

The individual was allocated \$7,000.00 EFS Funding that will be utilized to obtain Personal Supports through an individual provider. She contacted several individuals and two initially stated they were interested in providing supports to her, however, one individual started a new job and is no longer available. A request is being made for approval to hire her brother, who does not live with her, to provide Personal Supports as a short term solution until at least one other individual is hired. Case Manager to assist here in her continued search to find other individuals interested in providing the supports she needs.

The family member must meet all of the qualifications that are required for the service provided. (personal support)

Region: WR

Request Date: 10-Mar-05

Response Date: 16-Mar-05

One Time Amount: \$0

Outcome: Approved

To continue to pay Marks staff person after the staff person gets married to Mark's mother.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 15 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 21-Jul-04

Response Date: 01-Aug-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual attends BARC for his day program He attends Monday-Friday from approximately 9am –2:30pm. BARC was originally providing transportation to and from day program. During the course of the year BARC no longer had their own vehicle available and had to subcontract for this particular run. This arrangement did not work out, as he encountered problems with the subcontracted provider. As a result of these problems, the team determined that he should not use the service any longer. The only solution and the ONLY means of transportation is to have his brother Michael provide the transportation for him. BARC is willing to release the \$6806.00 that was allotted for transportation in the ISA. This transportation is very necessary for him to get to his program and back home. The \$6806.00 will be used to pay \$14.00per hour for two hours a day times 243 days per year. He will be paid for snow days and sick days. Michael has turned down other employment to provide this service for his brother and he has arranged his classes around his brothers needs. No other means of transportation will be covered by this given allotment. The amount that would be needed for transportation would be exceedingly higher.

The hourly rate approved for transporting is \$10. You can include mileage reimbursement for the actual miles traveled. Payment can only be made for services that are provided. We do not approve payment for snow days, sick days, or any other days that transportation is not provided.

Region: WR

Request Date: 05-Dec-03

Response Date: 09-Dec-03

One Time Amount: \$0

Outcome: Approved

This request is to pay the individual's step mother and sister for direct supports in the individual's apartment at 12.25 an hour for a total of 65 hours per week. They have been providing in Home support for 5 years. The other supports are provided by a private hire. Family members were hired to support the individual due to her extreme behaviors, as she does not accept others easily and can be combative, and most of her staff quit soon after being hired. Her previous living arrangement was in a public CLA, where she was hostile towards her peers and unable to live with others. This ISA was developed to provide her self determination dream to live in her own apartment. She has difficulties at her day program and needs one to one level of supervision to prevent injuries to others. The supports from her step mother and sister have been successful in supporting the individual. She requires supervision throughout her day, but can be left alone for short periods during the week. The staff sleep overnight till about 6:00 am each week night, as she cannot be left unattended at night due to extreme anxiety and her behavior of calling the police. These supports have kept her healthy and safe with familiar people who can assist her to cope throughout the day. The hope is that in time she will require less support hours due to being involved with a new psychologist and is now on new medications for her psychiatric diagnoses .

The cost standards state that "Exceptions may be made when it can be demonstrated that the service is not typical family support functions, the family member is qualified to perform the service and the family member has reduced their income in order to provide the service. Family member includes mother, father or spouse, and siblings residing within the home." The mother and sister seem to be performing functions that are not typical family support functions and seem qualified to perform the support based on reported improvements in Karen's behavior. While it is not clear that they reduced income to provide the support, the improvements in her situation, the cost effectiveness of this living situation over the group home, and the length of time this arrangement has been in place would all support approval of this request.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 16 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 19-Dec-03

Response Date: 15-Jan-04

One Time Amount: \$0

Outcome: Approved

The request is to pay the individual's mother for daily transportation to and from work at a rate of \$15 an hour and .36 per mile. The family has a van that has been adapted to accommodate the Individual and his wheel chair. Other transportation arrangements are limited because of the rural area the individual lives in, and they are not cost effective. The individual's day program is a critical part of his plan, and the individual's mother is unable to work full time because of the times transportation is needed. Time of travel is two hours per day, but can vary as they have to wait for the day staff to arrive at the work site.

The ISA Cost Accounting Standards state that reimbursement for mileage should be paid at the mileage reimbursement rate recognized by the IRS, which is \$.36 per mile. We would recommend the mileage to and from the day program be paid at \$.36 per mile, or \$15.84 for 44 miles (2 round trips at 22 miles each). The request totals \$15 per hour up for up to 2 hours per day. We recommend approval of this rate.

Region: WR

Request Date: 08-Nov-04

Response Date: 07-Dec-04

One Time Amount: \$0

Outcome: Approved With Qualification

Ed has lived with the Marchi's for several years in there CTH. Ed is currently treated for A AXIX 1 DX of Schizoaffective disorder. Ed also requires very close supervision (Eye Contact). All behaviors are addressed through behavior strategies. Prior to Diane Marchi working as Ed's current job coach the the team had to begin to restrict community activities due to the potential risk of Ed's behaviors. Several hours of inservicing were also required by BMPs to help support job coaches to work effectively with ED at his current job site location. It is clear to the team the improvement gained with ED through the support of Diane as his job coach. Observations of both Ed and his work peer have shown an increase in functional behavior. Diane also focuses on increasing social adaptive behaviors which have made community participation able to occur on a daily basis.

Approved for 15 hours a week at \$10 an hour. Someone other than Diane has to sign the ISA and Diane's time sheet.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 17 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 05-Dec-03

Response Date: 09-Dec-03

One Time Amount: \$0

Outcome: Approved with Qualifications

The request is to continue to pay the individual's sister for 35 hours a week at 12.00 an hour and to pay the individual's brother in law for 9 hours per week at 12.00 an hour for vocational support. The individual has been living with his sister for the past 5 years, prior to this arrangement he was in a SLA supported by a private provider. He struggled living in this situation, his health was failing, and he was losing his ability to care for himself. He moved to rural setting with his sister where it has been difficult to find and hire staff. Since he moved in with his sister and brother in law, the supports they provide have helped him to improve his quality of life. Prior to his moving, he was 40 pounds over weight, missing regular physicians visits, and was making poor choices with his diet and his health. He is now involved with a regular exercise routine, attends special Olympics, can shop for himself and eats well and knows what foods are good for him. He is no longer over weight in fact is in fantastic condition. At work he is able to complete work task that he was not exposed to at his previous job and can rely on a regular work schedule. He is very proud of his success. He loves obtaining the supports from his sister and brother in law and would not want to have other support providers to care for him. This plan keeps him healthy and safe throughout his life. His sister and brother in law have been providing residential supports for 5 years and 1 ½ years vocational support.

The cost standards state that "Exceptions may be made when it can be demonstrated that the service is not typical family support functions, the family member is qualified to perform the service and the family member has reduced their income in order to provide the service. Family member includes mother, father or spouse, and siblings residing within the home." The brother in law does not seem to be an issue because he is not covered by these cost standards. The sister seems to be performing functions that are not typical family support functions, seems qualified to perform the support based on reported improvements in his quality of life. While it is not clear that the sister reduced income to provide the support, the improvements in his situation, the cost effectiveness of this living situation over the group home, and the length of time this arrangement has been in place would all support approval of this request. We would recommend reimbursing for actual mileage driven at \$.36 per mile and that mileage logs be maintained. The hourly rates should also be reviewed for consistency. The in home supports are paid at \$11.35 and \$12 per hour, with no notations of different services being provided; and additional supports paid at \$12.13, the location of which is not identified.

Region: WR

Request Date: 18-Aug-03

Response Date: 25-Aug-03

One Time Amount:

Outcome: Approved with Qualifications

Transport an individual from home to day program and back by the individual's family member. The request included mileage at 160 miles a day and compensation in wages for \$60 a day. There is no other feasible or cost effective alternative as the individual lives in a very rural area of CT. The individual also has challenges that would require a second support person in the van. The individual's family member has given up her job in order to provide this service. The family member is qualified to provide the supports.

Payment to family members is based on the actual supports and services that are required above and beyond what would be considered routine care, and not on lost wages. The rate of mileage reimbursement is within the reasonable rates. A rate of \$12 an hour for actual time providing the service and the mileage reimbursement rate of .36 a mile were approved.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 18 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 29-Sep-05

Response Date: 05-Oct-05

One Time Amount: \$0

Outcome: Approved

When the family first requested placement five years ago, an ISA was put into place to remedy the situation until a placement came about. The ISA was primarily used to pay for after day program hours (3pm-6pm) and 6 hours of support on Saturdays. Since that time, Amy was "dismissed" from the family support/after day program due to her behaviors being a risk to others around her. Acquiring a new agency to support Amy during those hours proved difficult, as two of the three that were tried out stated that they were unable to provide services to her. The third agency, WARC (family support), has been able to provide a limited amount of supports (only 8 hours per week). Between the lack of available supports and the health issues Mrs. Mantz has been experiencing, she had no choice but to cut her hours at work. Peter O'Meara had responded to Mrs. Mantz in letter form as well as in person by way of a home visit on September 29th. In response to her requests for a furniture allotment and compensation for wages, he asked her to submit a prior approval request

approved until other services can be secured, to compensate Mrs. Mantz for some of the support hours she is providing in the form of wages (personal support). (\$150 per week plus employer benefits).

Region: WR

Request Date: 30-Sep-04

Response Date: 24-Oct-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual had an SLP staff which did not work. She can be very difficult to get along with and refuses assistance from anyone other than her mother. She needs assistance with community access for leisure activities, recreation, and medical appointments, and supports for budgeting, grocery shopping, and meal preparation. Dana wants to hire her mother to provide these services. She wants to pay her mother \$14.00 per hour which would average out to approximately 1.75 hours per week.

Exceptions may be made when it can be demonstrated that the service is not a typical family support function, such as support for intensive medical, behavioral, or supervision needs, and the family member is qualified to perform the service. The conditions for this request fall within cost standard guidelines, as the services are not typical family support functions. Approved for 1.75 hours a week at \$14.00 an hour. The mother cannot be the sponsoring person of the ISA, and a time authorized by the sponsoring person of the ISA is required to verify when the hours of support were provided. Any increase in the hours of support or the hourly rate paid to the mother require prior approval.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 19 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 08-Nov-04

Response Date: 07-Dec-04

One Time Amount: \$10

Outcome: Approved With Qualification

Bill has lived with the Marchi's for several years in their Community Training Home and he is an active participant in his CTH. Bill is currently treated for Bipolar Disorder and OCD prior to his work placement Bill was in a sheltered work shop. During this time his symptoms of OCD and Depression effected his level of independence and quality of work. With the start of his new position at Interlaken, Bill has shown growth but due to his OCD and the ability for past job coaches to effectively address his behavior Bill was not meeting his full potential as an employee at Interlaken. With the support of Diane Marchi Bill has been able to expand his repertoire of work activities and skills. He is able to move from one activity to the next with the implementation of behavioral strategies in his program. Observations made on several occasions by CTH team members reflect positive and adaptive growth in both social and work related behavior. With the support and direction of Diane, he has been able to overcome obstacles related to his psychiatric conditions and has improved his quality of life.

Approved for up to 15 hours a week at \$10 an hour. Someone other than Diane has to sign the ISA and Diane's time sheet.

Region: WR

Request Date: 09-Sep-03

Response Date: 15-Sep-03

One Time Amount: \$0

Outcome: Approved with Qualifications

Transportation to and from the individual's day program. The individual lives in a rural area of CT and there are no feasible or cost effective options. The family member is requesting to be paid \$100 a day for this support. The family member has reduced his work hours to accommodate the individual. The anticipated time of travel including dropping off and picking up is four hours a day. The individual would need a second person in the vehicle if transported by others due to behavioral challenges.

The family member has reduced his work schedule to accommodate the transportation of the individual, and the rate of pay, \$10 an hour, and the mileage reimbursement rate, .36 a mile, are reasonable. The service will help to maintain the individual in his home.

Region: WR

Request Date: 16-Apr-04

Response Date: 24-Apr-04

One Time Amount: \$0

Outcome: Approved

The request is to pay the individual's sister to provide support when school has delayed openings, early dismissals, school vacations, or any time when their mom is away from home. The support will be temporary because, his sister will be going away to college in the fall. She is 18 and a certified EMT. Funds would come from existing ISA. She will be providing support when other support staff is unavailable. He needs 24 hour support, as he has life threatening allergies and asthma.

The ISA Cost Accounting Standards state that direct care that is not a typical family support function, that the family member is qualified to perform are allowable. Recommend approval as a temporary support plan.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 20 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 25-Sep-03

Response Date: 29-Sep-03

One Time Amount: \$0

Outcome: Approved

The request is to provide in home support to the individual for 20 hours a week. The individual requires support from a skilled provider to successfully complete his daily routine as he has significant challenges. The individual also lives in an area of CT where there are no readily available providers. An extensive search by DMR staff for qualified providers was not successful. The family member left her job because the individual cannot be left alone and there are no other available options at this time.

The rate of pay for the family member is reasonable at \$12 and hour and consistent with what we pay for similar services in other settings. The family member has given up a job and has experience that makes the family member a qualified provider. The supports are a necessary part of the plan and will enable the individual to remain at home until a suitable residential setting becomes available. The resources are in the ISA.

Region: WR

Request Date: 09-Oct-03

Response Date: 10-Oct-03

One Time Amount: \$0

Outcome: Approved with Qualifications

To pay the guardian's daughter, who is 26 and lives at home, on a temporary basis (until a new staff person can be hired) to support the individual in the community and on the job. The resources are currently in his ISA for these supports. The individual has been living with the guardian's for the past 15 years. (\$14/ hr. 33 hours per week) The individual requires intensive support to participate on the job and in the community. Learning style, community awareness, social competencies and safety skills are impacted by without this support. The individual's job coach was let go due to performance issues. In order for the individual to continue employment, volunteer work, and to participate in community experiences, apart from his family home, a one on one support person must be available to him. The guardian's daughter works a part time job in human services and has experience.

The Cost Accounting Standards cost item: direct care provided by family members, notes, direct care provided by family members for routine care and supervision that would be expected to be provided by a family member is unallowable. Exceptions are made when it can be demonstrated that the service is not a typical family support function, the family member is qualified to perform the function, and that the family member had reduced their income in order to provide the service. In this request, the guardians daughter is providing the job coaching services in order to keep him at his jobs, volunteer opportunities, and in community experiences. The daughter is not related to the individual, that is not parents or siblings. It would also appear that job coaching is not the "typical family support function". Being that the direct care provided by family members cost standard doesn't pertain to this instance, and that the service is a necessary service, this would be an allowable cost of this ISA.

Region: WR

Request Date: 12-Jun-04

Response Date: 29-Jun-04

One Time Amount: \$0

Outcome: Approved with Qualifications

Vocational Support Worker experienced in farming needed to provide assistance to this individual during work. A family member is interested in become the hired assistant. Previous worker quit. Services will lapse for this individual without support being provided during work. This individual is involved in the family farming business and has developed valuable skills. Requires assistance to keep healthy and safe throughout the work day. There is difficulty in finding an experienced person to care for a disabled person and has knowledge in farming.

Approved for July and August or a maximum of 44 days to recruit a permanent staff person.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 21 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 26-Jul-05

Response Date: 03-Aug-05

One Time Amount: \$0

Outcome: Approved

Charlene would like to continue to provide this support in the form of a private hire personal support person. Natalie has been working on improving her cooking and budgeting skills, along with all activities of daily living. She needs supervision in the areas of housekeeping, laundry, and shopping for 24 hours per week. . Natalie's goal is to get her driver's license and own a car. Charlene has been assisting with this also.DCF was paying for Natalie to live at Charlene's house with her own living space. Natalie has been attending classes at HCC and would like to continue to do so.

The employee is required to meet all of the qualifications for the service type. (personal support)

Region: WR

Request Date: 01-Apr-05

Response Date: 15-Apr-05

One Time Amount: \$0

Outcome: Approved with Qualifications

Due to having Prador Willie shes has intense Dental problems that requires her to average at least 3 visits x a month. Her father transports her to the appointments in Farmington CT. He also transports her to the Lee's Stable in Litchfield where she volunteers he time and rides horses. This activity keeps her involved and its what interests her. She has not displayed any target behaviors related to Prador Willie while volunteering her time at Lees. The hope is that soon the family will hire someone to transport her the three days a week until this time her father will drive. The Long Term Plan is that she will be placed into a Home that provides 24 hour support.

We are approving this request at a mileage reimbursement rate of .35 per mile and an hourly rate of between \$10 and \$12 and hour on a temporary basis.

Region: WR

Request Date: 09-Sep-03

Response Date: 16-Sep-03

One Time Amount: \$0

Outcome: Approved

The family member has been providing paid supports to the individual for the past three years through a DCF subsidized adoption program. The family member requested to continue this arrangement when the individual turned 18. The family member has a reduced work week as support is needed before and after school. The individual cannot be left alone or unsupervised. There are no other care givers in the home to provide support due to the behavioral challenges the individual has.

The rate of compensation is in the range of rates we pay in other settings. The family member has reduced his work schedule and has been successful in providing supports for three years. The arrangement is cost effective and meets the requirements under the cost standards #14 Direct Care by Family Members. This arrangement will enable the individual to remain in his home.

Region: WR

Request Date: 11-Mar-05

Response Date: 16-Mar-05

One Time Amount: \$2,621

Outcome: Approved

This year March 2005 hisvoc instructor quit working. His mother wants to meet Ben's needs by working with him at LARC for one month, (March) until another instructor is hired, estimated at one month to hire a new vocational staff . The a plan involves a back up when his mother cannot provide support. The actual hours adjusted for March may not all be used.

Approved for one month.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 22 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 12-Jun-05

Response Date:

One Time Amount: \$0

Outcome:

The individual has comprehensive needs and requires supports to keep healthy and safe. His mother, is having a difficult time hiring staff. She wants to hire her 24 year old son to provide supports so she can work. Her son will also train staff when they are hired. Once he is accepted into a day program his brother will provide training to staff. The ISA is the secondary plan for Aaron and hope it will be short term. He is on the list for a 24 hour facility-Group Home placemen. The previous Vendor backed out at the last minute.

The plan to provide to support to him while he is in the day program needs to be revised. You can't provide two direct services at the same time: a day service and a residential service. His brother must meet all qualifications for the support he is providing.

Region: WR

Request Date: 31-May-05

Response Date: 20-Jun-05

One Time Amount: \$0

Outcome: Approved

The individual is a Non-verbal 33-year-old Brazilian male who is diagnosed with Severe Mental Retardation and Atypical Pervasive Developmental Disorders. He has a long history of compulsive and self-injurious behaviors. These include running, jumping, Pica, banging his head on the walls, eating/chewing glass and vomiting. In 2003, his vomiting was first noted as a major issue. This occurred while he was being picked up by his day program van at his house. Since then, he has high levels of anxiety in anyone's car or while at the community expressing it through his vomiting behaviors. He is unable to tolerate the company of others except some of his family members. During his incidents of anxiety, he vomits on a continuous basis as well as anywhere else (i.e. driveway, in the car, parking lots, public settings, etc). Both medical and psychiatric assistance/treatments are in place. Due to this issue, his parents opted to portate his funding into an ISA, after several attempts to engage him into attending his day program without success. After exploring other day programs the team concluded he really does not want to attend any program at this time. Day program support funding of \$12,000 was portated to an Individual Support Agreement. His circle feels that he needs to have a relative that can work with him developing a community integration program while desensitizing him slowly with a behavioral management person support. At this time, heo can only tolerate very few community outings with very few family members. The plan is to first increase his community activities, while with his sister, whom he appears to feel safe and not exhibit any vomiting behaviors. Then, very slowly, expose him to different peer groups and eventually to a private staff person or agency. The budget of the plan is to reserve \$10,000 for the support staff person, \$500 for recreational activities and the last \$1,500 to be use for behavioral management consultations.

Approved at \$13 an hour for Individual Day Support. The family member must meet all of the qualifications for this service description.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 23 of 74

BudgetCategory

Summary Rationale of Request

Comments

Direct Care by Family Member

Region: WR

Request Date: 05-Apr-05

Response Date: 16-Apr-05

One Time Amount: \$0

Outcome: Approved

Jessica's maternal grandmother cares for her during the night and at other times during the week to keep her breathing and to meet other areas related to her health needs. Most important is that she is suctioned at night. Her mother wants to pay the grandmother for 20 hours a week. Jessica is a fragile child (18years of age) who needs 24 hour supervision health care to be offered to keep her healthy and safe. She depends on others for all ADL's. The most important role that her Health Care worker have is to suction her. Her grandmother provides this medical procedure during the night. (Approx. works 2 nites a week).

Region: WR

Request Date: 08-Jun-05

Response Date: 17-Jun-05

One Time Amount: \$0

Outcome: Approved

He is an autistic 17 year old who resides with his parents and his older brother. An ISA was put into place several years ago to assist with managing him in the home, as his behaviors were quite difficult to manage and his needs were intense. The budget was used to purchase a combination of agency and individual hire supports as well as to afford for special needs items in the home. His primary support agency provides a great deal of the hours allotted, and the \$ 5 per hour rate increase greatly affects the number of hours he will be able to purchase. As such, his mother has asked that she be allowed to pay her son to provide support for various hours during the week so that new money will not need to be requested to support a rate increase. She does not have any other individually hired staff that are able to work those hours and the other agency is not able to provide service during those hours either. Finding a staff to work with him is difficult due to his intense needs. His mother Angelo feels that her son would be best suited for the position given his knowledge of caring for him and his availability of time. please note: The employee meets all of the qualifications for personal support services and if hired will review/meet the training requirements.

Emergency Shelter

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 24 of 74

BudgetCategory

Summary Rationale of Request

Comments

Emergency Shelter

Region: NR

Request Date: 31-Mar-04

Response Date: 04-Jul-04

One Time Amount: \$175

Outcome: Approved

Request is for emergency shelter at the YMCA of Hartford. Cost is \$25.00 per day for a room and private bath. Requested amount is for 7 days. On 3/6/04 this individual was arrested. Individual went to court on 3/8/04 he was referred to Family Relations, must complete 3 anger management sessions, and refrain from having any contact with victim. This individual was living with his mother while his ex-girlfriend, the alleged victim, moves from the building where both she and this individual rents an apartment. The understanding was that the ex-girlfriend was to move out by the end of March. This individual's mother notified this CM that over the weekend she kicked individual out of the apartment and he has been sleeping in his brother's car. In order to keep this individual safe, it is necessary to move him to the YMCA.

Request approved.

Goods/Svcs-Supp Staff

Region: SR

Request Date: 02-May-04

Response Date: 18-May-04

One Time Amount: \$1,228

Outcome: Approved

Tuition for Pipe Organ Encounter, staff costs that include hotel, airfare, and four meals for staff. This is an opportunity for the individual to participate in a program which is consistent with his vision and his plan. To assure his health and safety, it is necessary for a staff person to accompany him. The funds to support this request are in his budget and require no additional funds from the state. The need for the staff to attend results from a seizure disorder.

The cost for the pipe organ encounter for the individual are approved as a recreation expense. The staff costs are approved as a one time expense for Goods and services to support staff.

Region: WR

Request Date: 07-Jun-04

Response Date: 09-Jun-04

One Time Amount: \$0

Outcome: Approved

This individual is in need of support staff to accompany him and participate in recreational activity of choice. This service was provided this past year and it has helped eliminate psychiatric hospitalizations for this individual. This is a need of support that should be continued. This individual has learned social skills and to become less reliant on his elderly mother. Individual pays his own fees for community activities

The cost of amusements, diversions, organized social or recreational activities are allowable when it is a necessary part of the plan and does not exceed \$1,200. Costs of goods or services for personal use of individuals other than the individual named in the ISA are unallowable except when those costs may be required and are related to the care of the individual.

Home Maintenance

Region: NR

Request Date: 23-Mar-04

Response Date: 26-Mar-04

One Time Amount: \$75

Outcome: Approved

The last employee had keys to family's home, for the purpose of securing the home upon leaving in the morning and entering the home upon arriving in the afternoon. This employee was terminated due to poor judgement. The employee did not return the house keys to the family. The cost to replace the door locks on the family home are \$75.00.

The need to replace the door locks is established as a result of supports purchased through the ISA.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 25 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Maintenance

Region: SR

Request Date: 05-Jun-03

Response Date: 11-Jun-03

One Time Amount: \$1,600

Outcome: Approved

One time request, for \$1600, to have substantial accumulation of material and debris removed from the individuals apartment. This accumulation of material and the current condition of the apartment is the result of ongoing mental health issues. This will provide the individual with opportunities to begin to have visitors and start to reconnect with family and friends. The individual is using the portability procedure to redesign supports to meet specific needs that were not met through her existing provider supports.

The problem was created by the clients inability to maintain a clean environment for many years. The one time cleaning request falls under the prior approval process (#24, page 13 Housing Maintenance). The consensus is the services are needed as a result of the persons disability and are an important part of the person's individual plan to help achieve the desired vision.

Region: WR

Request Date: 16-Jan-04

Response Date: 02-Feb-04

One Time Amount: \$0

Outcome: Approved with Qualifications

Household maintenance: Windowing cleaning (\$ 40 each time, two times per year), Clean ducts in home 2 xs per year, \$ 245 each time(to be completed by Advantage Air),and carpet cleaning \$ 112 each time, 4 times per year. The individual is very sensitive to allergens and is often prone to outbursts when she ill. It has taken many years to reveal medical issues that have been linked to her behaviors and her mother has gone to great lengths to ensure that she minimizes those risks, as identified in the plan summary. Funds are available within current budget., The individual 's mother is vigilant in her efforts to ensure that the home is clean to avoid allergic reactions, and to avoid another incident of infestation. The ductwork and the window cleaning is to rid the home or allergens and to maintain an overall clean environment. The individual lives alone , is autistic and falls within the severe range of mental retardation. She is unable to complete these cleaning tasks on her own. She has purchased new vacuums and a large quantity of cleaning supplies and the staff clean on a regular basis but the carpets need to be cleaned professionally to ensure quality cleaning.

Approved for four carpet cleanings and one duct cleaning per year. The window cleaning is not approved. The recommendation is for staff to clean the windows.

Region: WR

Request Date: 28-Oct-03

Response Date: 29-Oct-03

One Time Amount: \$377

Outcome: Approved

Extermination Fees; The individual lives in a condominium with 24 hour supports-with overnight staff accommodations. The staff bedroom is infested with bed bugs. The bed bugs were discovered when one of the overnight staff broke out in a rash. One staff member has thoroughly cleaned the room and the rest of the house, but final extermination of the bugs must be done professionally. Until this is done, the individual is living with her mother, who is elderly. The individual's mother cannot care provide care on her own for an extended amount of time.

ISA Cost Accounting Standards state that housing maintenance costs that are disability related are allowable. The overnight staff need a sanitary environment to work in. The extermination services are necessary to accomplish this and the resources are available in the ISA.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 26 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Maintenance

Region: WR

Request Date: 08-Jun-04

Response Date: 18-Jun-04

One Time Amount: \$800

Outcome: Approved with Qualifications

Request is for pool filter and pool cover for above ground pool. This individual is diagnosed with severe autism and MR. He is in need of physical activity to exert his energies appropriately. Swimming in his backyard pool fulfills many of his needs, including leisure activity, cardiovascular fitness, sensory stimulation and socialization. The pool is primarily used by this individual. Swimming is a preferred activity and individual has been assessed to have competencies. Without appropriate outlets, this individual has been known to regress emotionally, behaviorally and socially.

Payment for pool filter and cover not to exceed the combined total for all recreation expenses of \$1,200.

Home Maker Services

Region: NR

Request Date: 15-Jul-04

Response Date: 21-Jul-04

One Time Amount: \$0

Outcome: Approved

Bathroom cleaning- Ashlee is paralyzed from the eyes down and is unable to clean her own bathroom. Although Ashlee lives with her family she is the only person to use this bathroom. She has nursing svices for two shifts a day and uses the bathroom for all of her perosna careand medical needs. The bathroom is attached to her bedroom and is used by her her only. The service has been a part of her original ISA.

Cleaning services are unallowable except when these costs are related to the disability of the individual named in the ISA and cannot be performed by another resident in the household. The cleaning is specifically for the individual's bathroom, which is used throughout the day for her intensive needs. Although the parents live at home, the services is directly related to the individual's needs and disability.

Region: SR

Request Date: 08-Sep-05

Response Date: 15-Sep-05

One Time Amount: \$0

Outcome: Approved with Qualifications

There is room in the budget to support this because the program started after the start-up date and the nursing component and the overnight competent of the program have been unable to be fulfilled to date. This mother works full time and is overwhelmed by all the needs of her daughter. This would represent a way to unburden and alleviate some pressure on Jill's mom. Also, due to Jill's urinary and fecal incontinence if the laundry is not done immediately it makes the home smell badly. The family believes that adult diapers are demeaning to their daughter. The family has an industrial strength washing machine and all this lanundry is causing it to break down.

We have reviewed this request and are approving laundry services for up to \$1560 annually. This service should be reviewed periodically as the RN and overnight supports are put into place.

Region: SR

Request Date: 07-Jan-05

Response Date: 25-Jan-04

One Time Amount: \$0

Outcome: Approved

His family is requesting housecleaning supports. Scott has severe mental Retardation, is extremely overweight and has difficulty breathing. He provides no support for cleaning. Mrs. Marrinuzzi can no longer manage to do many of the day to day tasks that keep Scott in a safe, clean, enviornment. Due to his gait problems he requires a barrier free home and has fallen due to Mother's inability to maintain the apartment. \$1200 has been budgeted for to clean the bathroom and kitchen, vacumning and dusting. The cleaning would help his breathing diffculties and allow this family to stay together.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 27 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Maker Services

Region: SR

Request Date: 12-Jun-03

Response Date: 15-Jun-03

One Time Amount: \$0

Outcome: Approved

Ongoing cleaning service weekly for \$82.00. The cleaning service to be scaled back as the individual obtains greater control of mental health challenges. This service is crucial to the individual's plan for improving self esteem and mental health conditions, living in a safe and clean environment, and establishing relationships with her family and friends who have been disconnected due to the individual's present life style. The person was refusing services from a private agency and used the portability procedure to design supports that would help to achieve the desired goals.

The ongoing homemaker services is a regional approval under the cost standards #22, page 12. The consensus was that this is an appropriate request to be funded under the ISA. There are no other residents in the household who could perform these tasks, and the individual is currently unable to maintain her environment in a sanitary condition.

Home Modification

Region: NR

Request Date: 09-Jun-05

Response Date: 20-Jun-05

One Time Amount: \$3,955

Outcome: Approved

The individual has had two back surgeries and spinal fusion. She continues to have problems with some of her spinal discs. She recently had surgery on her right hip and continues to have problems due to hip dysplasia. She now needs to use a walker and a wheelchair. A ramp will make it possible for her to access her day program more safely and with greater ease to her and her family. Family wishes for her to remain at home and ramp would eliminate the potential for injury to herself and caregivers in navigating Lauren and her apparatus to and from the home. Lauren would have a greater sense of independence.

Costs applicable to renovation and/or modifications to the primary residence the individual lives are allowable but cannot exceed \$10,000. Physical adaptations to the home are allowable if they are required by the individual's plan of care, are necessary to ensure the health, welfare, and safety of the individual, enable the individual to function with greater independence in the home and without which, the individual would require institutionalization.

Region: NR

Request Date: 23-Jan-04

Response Date:

One Time Amount: \$400

Outcome: Approved

Family is proposing to purchase two air conditioning units for the family's apartment. This individual has chronic asthma, and has a need for two air conditioners in the apartment, one for the bedroom and the other for the kitchen/living room area. The apartment is on the third floor and is poorly ventilated building. The size and layout of the apartment would require two air conditioners to meet the needs of this individual and assist with the difficulty with breathing. Family is on a fixed income, living below the poverty line, and cannot afford to purchase the units.

Region: NR

Request Date: 01-Sep-05

Response Date: 10-Sep-05

One Time Amount: \$375

Outcome: Approved

Jess is bothered by the heat and behavioral incidents escalate at those times. The family has a pool and a platform is needed for Jess to be able to get out of the pool. For being able to be included in this family activity safely; the platform allows accessibility for Jess. Platform materials and labor for Jess to be able to access the family pool.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 28 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: NR

Request Date: 19-Jul-04

Response Date: 27-Jul-04

One Time Amount: \$95

Outcome: Approved

This request is for the installation of a hard-wire smoke detector. This is needed in this individual's apartment in order to be eligible for the rent subsidy program. The apartment has a smoke detector but it is not hard wired. Individual has limited income and does not have the resources to cover this expense.

This request is approved.

Region: NR

Request Date: 31-Aug-04

Response Date: 21-Sep-04

One Time Amount: \$3,500

Outcome: Approved

Theresa is in a wheelchair and needs someone to push her up and down the ramp in order to access to the home and community. The existing ramp has deteriorated and is unsafe. Therasas' health and safety needs as well as community access needs would be met by having this new ramp built.

Costs applicable to renovation and/or modifications to the primary residence the individual lives are allowable but cannot exceed \$10,000. Such adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems that are necessary to accommodate the medical equipment and supplies that are necessary for the welfare of the individual. Three bids must be secured for projects over \$2500. Contractors must have a valid CT license and insurance that is current. All building permits must be secured before the project starts.

Region: NR

Request Date: 30-Sep-04

Response Date: 16-Oct-04

One Time Amount: \$4,700

Outcome: Approved

The individual needs to be transferred into his current tub to be bathed. The tub has about a 2 foot wall and his support workers need to lift him over this barrier with a Hoyer lift. He is wheelchair reliant and cannot weight bare. This method currently being used at home is not the safest mode to transfer him in a bathroom setting. This adaptation will prevent injuries from occurring both for the individual and his support workers. This family plans to keep there individual at home. This is a cost efficient way to provide a safer environment and enable the individual to continue to live in the community with his family.

Approved on the condition that the landlord approves the renovation.

Region: NR

Request Date: 23-Jun-03

Response Date: 30-Jun-03

One Time Amount: \$2,499

Outcome: Approved

Exterior ramp to make it more feasible for individual to get in and out of his home with a wheel chair. The parents have to assist the individual to stand and physically support him to get into the house. The family is requesting to have \$2499 covered through an ISA for a \$3500 project, and will pay the difference to use a contractor they used previously. A detailed description of the project was provided including a diagram, the materials required, the square footage. The project meets all requirement from the local building inspector.

The contractor's bid provided detailed information on the materials, square footage, and design of the ramp. The cost is reasonable for the ramp, and the project meets the cost standards- necessary to ensure the health, welfare and safety of the individual as well as enabling him to remain home. The contractor is licensed and insured.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 29 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: SR

Request Date: 30-Aug-05

Response Date: 15-Sep-05

One Time Amount: \$12,200

Outcome: Approved with Qualifications

) costs for Travis's bathroom renovations/accessibility *Family will pay the balance of the total renovation costs. Travis has Cerebral Palsy and utilizes a wheelchair for mobility. He can transfer and scoot on the floor for short distances and with assistance can ascend and descend uneven surfaces/stairs. Due to the effects of his CP he has chronic joint and muscle pain. He receives PT and Aquatic therapy to maintain his strength, flexibility and decrease discomfort. In addition, Travis' suffers from severe OCD and compulsions; he excessively uses personal hygiene and antiseptic/sanitary products. He takes baths 2 to 3 times per day, which seems to relax him emotionally and physically. Over the past year/year and a half his spasms have been intensified and it has resulted in minor injuries while toileting for example: his leg spasm and knocked his leg into the walls and back again on the side of toilet. His current bathroom needs to be renovated to provide accessibility and safety adaptations such as, reinforced grab bars by the toilet and inside the tub, a wider tub so that he can independently move inside the tub while in a seated position, a large tub faucet positioned fairly high inside the tub so he can sit and independently get shampoo, condition out of his hair (due to his spastic nature he is unable to control a hand held shower head as it floods the bathroom), an accessible sized vanity with cushions/material sounding the outside for safety, in addition to padding the walls and outside of the toilet. An OT provided necessary specs for the bathroom modifications and a licensed contractor will do the work. The work is estimated to take up to a week / week and a half. Due to Travis OCD condition he will not emotionally or clinically be able to tolerate not having access to a bathtub. Team discussed options of staying at a hotel, neighbors and other family member's home, however due to the frequency of his bathing it is not a feasible option. The other bathroom in the house only has a shower stall. The plan is to have a small tub put into the 2nd bathroom 1st so that Travis will have access to a bath when his bathroom is going to be worked on. The cost of the additional tub will be included in this 1x- His baths are amedical necessity fo rhis CP his muscles so badly that the hot water is used to try and stop the spasms. Trying to get this for two years. Case managers were swamped. 203 248 5717. Karen Sternberg

We are only approving the home modificatons to the main bathroom by Island View Woodworks. The contractor has to be licensed and secure the appropriate building permits prior to starting work. The request to renovate the second upstairs bathroom is denied. The renovation to the second upstairs bathroom is an improvement to the home that the family would have to cover.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 30 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: SR

Request Date: 30-Aug-05

Response Date: 05-Sep-05

One Time Amount: \$10,000

Outcome: Approved with Qualifications

Travis has Cerebral Palsy and utilizes a wheelchair for mobility. He can transfer and scoot on the floor for short distances and with assistance can ascend and descend uneven surfaces/stairs. Due to the effects of his CP he has chronic joint and muscle pain. He receives PT and Aquatic therapy to maintain his strength, flexibility and decrease discomfort. In addition, Travis' suffers from severe OCD and compulsions; he excessively uses personal hygiene and antiseptic/sanitary products. He takes baths 2 to 3 times per day, which seems to relax him emotionally and physically. Over the past year/year and a half his spasms have been intensified and it has resulted in minor injuries while toileting for example: his leg spasm and knocked his leg into the walls and back again on the side of toilet. His current bathroom needs to be renovated to provide accessibility and safety adaptations such as, reinforced grab bars by the toilet and inside the tub, a wider tub so that he can independently move inside the tub while in a seated position, a large tub faucet positioned fairly high inside the tub so he can sit and independently get shampoo, condition out of his hair (due to his spastic nature he is unable to control a hand held shower head as it floods the bathroom), an accessible sized vanity with cushions/material sounding the outside for safety, in addition to padding the walls and outside of the toilet. An OT provided necessary specs for the bathroom modifications and a licensed contractor will do the work. The work is estimated to take up to a week / week and a half. Due to Travis OCD condition he will not emotionally or clinically be able to tolerate not having access to a bathtub. Team discussed options of staying at a hotel, neighbors and other family member's home, however due to the frequency of his bathing it is not a feasible option. The other bathroom in the house only has a shower stall. The plan is to have a small tub put into the 2nd bathroom 1st so that Travis will have access to a bath when his bathroom is going to be worked on. The cost of the additional tub will be included in this 1x-

We are only approving the home modifications to the main bathroom by Island View Woodworks. The contractor has to be licensed and secure the appropriate building permits prior to starting work. The request to renovate the upstairs bathroom is denied. The renovation to the upstairs bathroom is an improvement to the home that the family would have to cover.

Region: SR

Request Date: 30-Oct-03

Response Date: 01-Dec-03

One Time Amount: \$5,500

Outcome: Approved with Qualifications

The individual is a 51 year old man with degenerative hip disease who lives with his 75 year old mother in their family home. He uses a stool in the bathtub and his mother gets into the tub with him to assist him. It has become increasingly more difficult for him to get in and out of the tub-lifting his legs over- and it has also become more difficult for mom to support him. The shower renovation is critical for the safety of the individual and the mother. An conditional approval was granted based on submission of copies of the contractors insurance and a building permit.

This project will ensure the health, welfare, and safety of the individual in his families home. The project was given a conditional approval on 11/4/03, and final approval on 12/1/03 when requested documentation, the insurance certificate for the selected contractor, the building permit, and evidence of home ownership, were submitted.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 31 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: SR

Request Date: 09-Nov-05

Response Date: 02-Dec-05

One Time Amount: \$10,000

Outcome: Disapproval

The Davies would like to use \$10,000.00 to put towards home modifications that will allow Matt and Jack to safely access all areas of their home and yard. Matt and his twin brother Jack are 6 years old and reside in their family home; both boys receive DMR services. Matt and Jack have significant medical issues and require constant supervision and support. The Davies' have a pool in back yard that Jack and Matt use therapeutically. Mr. & Mrs. Davies would like to replace their existing decking to include ramps to allow safe access to the pool for their sons. As Matt and Jack grow, lifting them in and out of the pool is proving more difficult and is becoming a health and safety concern. The Davies have 3 bids for the work that they would like to have completed ranging from \$22,430.00 to \$35,875.00; they would like to go with the \$22,430.00 bid and pay for the remainder of the deck themselves.

Swimming pools, repairs to swimming pools, and swimming pool decks are not covered under the waiver and are considered standard items purchased by families.

Region: SR

Request Date: 10-Sep-04

Response Date: 01-Oct-04

One Time Amount: \$10,000

Outcome: Approved

The individual and his family have explored and attempted various support settings and situations, which unfortunately have inhibited his growth and level of independence. Prior to moving back home (June 04), he lived with 2 roommates with supports in a community setting. His maturity blossomed, unfortunately the level of funding assigned to Mark was inadequate to that of his roommates. This setting did not allow for him to have any individualized activities and his self-directed focus suffered. He moved back home due to no other appropriate options to find that he does not have ample privacy, space, which inhibits his opportunity for a fully independent life style. He and his family agreed that with some moderate renovations residing in the family home would not only meet his needs but also would afford the comfort, familiarity and access to enhanced supervision/support when needed. He does require assistance in specific ADL areas: Medical (seizure disorder), financial, etc., however he is a very capable and independent gentleman with much interest. He and his family would like the opportunity to keep the family unit intact, provide him with an environment that promotes independence with adequate levels of supports and a setting where Mark feels respected and is free to self-direct his life.

Home Renovations to the primary residence of the individual cannot exceed \$10,000. Renovations and adaptations to the home are allowable if they are required by the individual's plan of care, are necessary to ensure the health, welfare, and safety of the individual, enable the individual to function with greater independence in the home and without which, the individual would require institutionalization. Adaptations that add to the total square footage of the home must be noted on the ISA. Approval is based on the disclosure of the full scope of the project and budget, (2) documentation that the project has the approvals from local building inspectors and fire marshals, (3) the documentation that the project has been competitively and each bidder is currently licensed with the State. This request meets the costs standards for a home renovation. Approved for \$10,000 one time expense.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 32 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: SR

Request Date: 28-Oct-03

Response Date: 18-Nov-03

One Time Amount: \$10,000

Outcome: Approved

The request is for an addition of an accessible bathroom to the individual's apartment where he has lived for the past 14 years and has a renewable lease for the next 5 years. The individual's health has deteriorated and this has effected his ability to walk independently. His mother is having an increasing difficult time in supporting his personal needs. An initial approval was granted, but final approval was based upon submission of copies of the lease, the contractors insurance, and the building permit.

All home renovation projects must document in the submission the disclosure of full scope of the project including a budget that identifies the cost of the project, documentation that the project has the approvals from local building inspectors and fire marshals, documentation that the project has been competitively bid from three qualified bidders who are licensed through DCP and have insurance, and that all bids are competitive and are comparable. The project is allowable because the bathroom would be helping the individual remain in his home. Also the submission provided the bids and scope of the project along with contractors DCP license numbers, insurance certificate and a copy of the building permit. A copy of the executed lease has been provided to document the terms of the lease which include renewable one year lease options for the next 5 years. Overall, this project will maintain the individual in the family home, maintain his independence, and ensure the health, welfare and his safety.

Region: SR

Request Date: 05-Jun-03

Response Date: 25-Jun-03

One Time Amount: \$10,000

Outcome: Approved

To finish the basement so the individual will have opportunity to exercise regularly, improve health related to diabetes and address behavioral needs. The individual does not have any day supports, and cannot be transported safely into the community due to health and behavior challenges. The family agrees to pay for costs over \$10,000. Individual is non ambulatory and there is no room in the main living area to use a scoter board, or to exercise on a matt on the floor. The total square footage to be renovated is about 1000 square feet. The needs and outcomes for the individual have been documented in the plan. The initial request did not provide enough information on the need for renovating the basement versus other options that might be considered, such as using a local recreation and fitness center, and the contractor's bids did not include the square footage of the project, and the bids did not include the same materials and fixtures-making it difficult to do actual comparisons between the bids. This delayed the prior approval committee's decision. The total request for the renovation is for \$10,000

All of the contractors were licensed. The consensus was the renovation would contribute to the health and welfare of the individual and help to maintain the person in the current living setting. The costs were reasonable based on the square footage of the renovation.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 33 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: WR

Request Date: 10-May-04

Response Date: 18-May-04

One Time Amount: \$10,000

Outcome: Approved

Vertical Platform Lift and a Ceiling Lift. The price of the Vertical Platform Lift is between \$19,000 to \$21,000 The ceiling lift is \$ 5,800. The family has received two proposals for the Platform Lift and only one for the ceiling lift due to the limited amount of resources in the area. The individual is diagnosed with Muscular Dystrophy. He is a very big man who is non ambulatory and too heavy to lift. The Vertical Platform Lift would be used to get him from the garage to the upstairs portion of the house where his bedroom, kitchen and living room are. They need the Ceiling Lift to get him from his bedroom to the bathroom.

Costs applicable to renovation and/or modifications to the primary residence the individual lives are allowable but cannot exceed \$10,000. Approved for \$10,000. The contractor who installs the equipment must be currently licensed with the State of Connecticut's Department of Consumer Protection to perform the work for the project they are contracting, and the contractor must be insured.

Region: WR

Request Date: 19-Sep-05

Response Date:

One Time Amount: \$10,000

Outcome: Approved with Qualifications

Elaine Breunich currently lives home with her sister and father. Elaine uses a wheelchair for mobility and needs to use a lift to gain access to her home. Elaine must enter the house through the garage to utilize her wheelchair lift, and if the lift is broken or they lose power, Elaine can not enter the house. Installing a wheelchair ramp in the front of the house will accomplish two things. 1: Elaine can enter her house without having to rely on the wheelchair lift. 2: In case of an emergency (fire, etc.) having to rely on the wheelchair lift could pose a safety problem. The Portico is to be used in conjunction with the wheelchair ramp that is to be installed. This will allow for proper cover when entering and exiting the house. The new window will replace an old 1940's single pane window which is currently in Elaine's room.

The ramp is approved. All home improvements projects must document (1) full scope of the project including a budget that identifies the cost for the entire project, (2) the project has the approvals from local building inspectors and fire marshals, (3) project has been competitively bid from three qualified bidders, currently licensed with the State of Connecticut's Department of Consumer Protection to perform the work, that the bidders are insured. Approved for up to \$7000.

The portico is not approved. The individual has two means of entrance to the home, the garage and the exterior ramp. The portico is considered a general improvement to the home. The replacement of the window is also considered a general home improvement. These types of improvements are not allowable with DMR funds.

Region: WR

Request Date: 19-Sep-03

Response Date: 14-Oct-03

One Time Amount: \$10,000

Outcome: Denied

The request was to renovate the basement of the home the individual lives in. The renovation was intended to provide a separate space in the home to operate the individual's day program. The request included two bids. A third bid was not included as the family had difficulty getting private contractors to submit bids. The individual has tried several private agency day programs in the past without success. Through the portability process the individual was able to design a program that has been meeting her needs. She has a support staff that she is comfortable with and participates regularly in the community. The home renovation will provide an area of the home that will be specifically for her and her support staff use. The request was for the maximum allowable under the cost standard. The bids were for \$25000 and 18000.

The basement is being refinished to provide another living area in the house which includes a bedroom, bathroom, and laundry room. The request for the home renovation for a day program space and the bids were not consistent. The bids were not comparable, as one bid did not include the specific materials that were to be used. The total square footage of the project was not included in either bids. Additional information is needed regarding the planned day program and why the renovation is necessary to accomplish day support outcomes. Parts of the job are beyond what would be needed for day program: laundry room, tile floor, a bedroom, and half bath. This appears to be finding the basement for multiple purposes and not specifically for a day program space.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 34 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: WR

Request Date: 19-Mar-04

Response Date: 02-Apr-04

One Time Amount: \$5,995

Outcome: Approved

Bathroom modifications: Handicap access, raised/handicap toilet, handicap shower to allow for roll in shower chair. The individual is 61 years old and suffers from a variety of medical conditions that have worsened dramatically throughout the last few years. Physically, she has lost much of her ability to walk on her own and has been experiencing a great deal of difficulty with bending. Consequently, she has been placing herself at great risk in her family home when it comes to using the bathroom facilities. She has fallen in the past and has aggravated her existent condition.

This project meets the requirements for health, safety and welfare, would allow greater independence as well as allow the individual to remain in her family home. Approval is granted once a building permit has been.

Region: WR

Request Date: 31-Aug-05

Response Date: 05-Sep-05

One Time Amount: \$1,450

Outcome: Approved

The item being requested is a vinyl fence to replace an existing wood stockade fence that is falling apart and creates a safety hazard for Shana. The job consists of taking down the existing rickety fence and replacing it with a new vinyl fence including two gates. The DeJesus live on a corner lot on a busy street in Bridgeport and the need for a fence is necessary to ensure that Shana can play safely in the yard. The existing fence is falling apart and creates an unsafe environment. Shana could get hurt on the broken wood or wander in the street through holes.

Region: WR

Request Date: 17-Jul-05

Response Date: 08-Jul-05

One Time Amount: \$10,000

Outcome: Approved

The individual requires total assistance to have all of her needs met. The parents are elder and lifting has become a health and safety issue for the whole family. The family is requesting a barrier free lift system installed in the home. Patient Lifts of New England will be installing the system and Title 19 will be covering the cost of the lift. The presenting problem is that the ceiling in the bedroom is not domered, and therefore, will not accommodate the barrier free lift system. The family has received 3 estimates to have the needed ceiling renovations completed to allow for the barrier free lift system to be installed. As a result the barrier free lift system can not be installed without domering.

All building permits must be acquired prior to work beginning.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 35 of 74

BudgetCategory

Summary Rationale of Request

Comments

Home Modification

Region: WR

Request Date: 30-May-05

Response Date: 09-Jun-05

One Time Amount: \$10,000

Outcome: Approved

Convert dining room measuring 15' x 26' to one 15' x 13' handicapped accessible bathroom and one 15' x 13' bedroom; She is an 8 year-old girl who is growing and requires adaptive equipment and support to move about her environment. Her bathroom is not handicapped accessible.. This requires that her parents make significant modifications to their home, as it is not possible to modify the existing bathroom, a new one must be built in another part of the house. Additionally, to provide for her safety and future care (in order to maintain her at home for as long as possible). Her parents need to move her bedroom adjacent to the bathroom. This will minimize lifts and transfers and because of the planned location in the home will facilitate easier monitoring, as she needs to lay down after a seizure. *The project will not increase the square footage of the home and the parents are prepared to pay the portion of home modifications in excess of \$10,000.

the project is approved for a maximum amount of \$10,000 with the following conditions: the PRAT authorizes the funding, the maximum amount allowed is \$10,000, the contractor who does the work has a current CT license, and all local and state permits are secured before the work begins.

Region: WR

Request Date: 01-Oct-04

Response Date: 01-Nov-04

One Time Amount: \$1,500

Outcome: Approved

The fence was originally put in on September 22, at a cost of 9510. The contractor was approached regarding liability, but at the time of installation, the company put the fence based on the plot plan. The town is doing on site property assessments and this was discovered.

Region: WR

Request Date: 22-May-05

Response Date: 01-Jun-05

One Time Amount: \$600

Outcome: Approved

The request is for one-time funds to address an identified health and safety concern within the home. The request is for minor bathroom modifications to occur, specifically the following: installation of grab bar(s), installation of a hand held shower head, and all related parts for these 2 primary items. Labor costs are also requested. The completion of these modifications will enable both the family and aides to bath him in the downstairs bathroom, rather than in the upstairs one. Ambulation up the stairs is often difficult even with the support of his aide. This causes great safety concerns for all involved. Three bids/proposals were received. One from Pacific Baths (preferred vendor and lowest cost), Sachs plumbing, and Klaff's.

The plumber is required to have a license.

Household-Cleaning Supplies

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 36 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Cleaning Supplies

Region: WR

Request Date: 30-Dec-99

Response Date: 30-Dec-99

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual has a long history of collecting and storing anything from used cans found on the street to spoiled food. This practice creates an unhealthy environment and is very offensive to persons residing in the same apartment complex, which has jeopardized her living arrangements. Designated funds for cleaning supplies would enable her or persons supporting her to purchase cleaning items as needed to maintain a safe, healthy, and acceptable living space while maintaining her residence.

The ISA Cost Accounting Standards state that cleaning supplies that are needed as a result of the person's disability are allowable subject to prior approval. Funding this as an ongoing cost should be made with consideration of the effects of positive interventions..

Household-Damages

Region: NR

Request Date: 12-Nov-03

Response Date: 04-Jul-04

One Time Amount: \$900

Outcome: Approved with Qualifications

Request is to create a line item from existing funds for the purpose of allowing for reimbursement for this individual's live-in support provider, for personal property, which this individual has destroyed. This individual lives with a single mom and two children. This individual during aggressive/violent outbursts destroyed items in the home, drapes, toaster oven, doorframe and window. These incidents occurred prior to the individual having the proper respite support. The amount of \$900.00 is based on the maximum dollar amount that is available for such a line item. This will leave up to \$530.00 available if other property is destroyed in the future. This individual does not have the resources to pay for the expense of replacing such damaged items, the line item is necessary to be able to preserve his current living situation.

Approved for the costs requested: drapes \$325., toaster-oven \$42.26. If other damages occur resubmit prior approval.

Region: NR

Request Date: 24-Mar-04

Response Date:

One Time Amount: \$1,804

Outcome: Approved with Qualifications

To repair household damage caused by this individual's out-of-control behavior, including aggression and property destruction. Family continually replaced windows, doors, fixed holes in the walls, replaced furniture. Not replacing & repairing these items would represent a health and safety risk to this individual. Individual has intermittent explosive disorder, oppositional defiant disorder and a depressive disorder as well as MR and CP. This individual has always had a line item to repair damages, which are continual, and sometimes extensive. Last year the money went to replace the support staff's eyeglasses.

Approved for one year. Resubmit ASAP prior approval with next years renewal, if this is still needed, with a list of the specific damages and the cost or repairs.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 37 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Damages

Region: NR

Request Date: 12-Apr-04

Response Date: 16-Apr-04

One Time Amount: \$0

Outcome: Approved

Funds requested to suplliment repairs to home for items such as broken windows, holes in the paneling, broken fixtures in the bathroom such as tile in the shower, toilet paper dispenser taken off the wall. This breakage is caused by violent drop seizure followed by disorientation and flailing. The individual under a doctor's care for his seizures, takes medications, but sustains frequent activity. Family repairs most damage, but for extensive repairs will contract out. For instance, it was discovered that the floor under the shower was rotted from the leakage created by damaged tiles.

Damages that result from the actions or are the result of the disability of the individual require prior approval. The numerous damages are related to the disability. The cost is reasonable based on the type of repairs. The family is contributing to the repairs.

Region: SR

Request Date: 07-Apr-04

Response Date: 16-Apr-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The individual has a long history of damaging household items. The Case Manager and family are working on proactive strategies, environmental and programmatic, to address these issues.

Broker to review each request prior to FI making payment. Resubmit in one year with a list of items that were repaired, and any effects of program interventions.

Region: SR

Request Date: 20-Sep-04

Response Date: 29-Sep-04

One Time Amount: \$0

Outcome: Approved

The individual's living sitaition is unique and challenging. His mother has her own ISA as does his sister. As he has grown, he has become more difficult to manage. The family has a very positive relationship with their landlord partially because we have, in the past, been able to support the upkeep and repair of the apartment. Continuation of this support is critical in allowing the family to remain in this home. The funds for this expense are being moved from his mother's ISA to his own to better reflect where the need for household damages exists. By placing the funding in his budget we are putting the support where it most needed. This request as it allows the family to maintain their home. If they were to lose this apartment, it will be extremely difficult for them to find a new home.

. Expenditures for damages that result from the actions or are the result of the disability of the individual named in the ISA require prior approval. This request meets the criteria in the cost standards. Aggressive strategies to address Dsyhon's behaviors are recommend.

Region: SR

Request Date: 04-Jun-03

Response Date: 11-Jun-03

One Time Amount: \$1,086

Outcome: Approved

Individual fell in the bathroom of the apartment due to a seizure, a fixture was broken resulting in water damage, and the living room rug was ruined. Replacement cost was \$1086.00 The individuals budget was able to cover the expense.

Consensus was damage was caused as a result of disability and not considered normal wear and tear.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 38 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Damages

Region: SR

Request Date: 25-Sep-03

Response Date: 03-Oct-03

One Time Amount: \$1,316

Outcome: Approved with Qualifications

Damages have been a part of the ISA for the past two years. This request is to keep the current damages line item for \$1316. The individual is curious and has a long history of constantly manipulating and tinkering with a variety of objects. He spends a great deal of his spare time taking things apart. Some examples include taking apart the water pump, plumbing fixtures, and household appliances. In many instances it results in damages that cannot be easily corrected. The broker reviews each request for compensation as a result of damages. Other damages include ripping, shredding and tearing of clothes, towels, and rugs. He is engaged in structured work time for a significant part of each day as a strategy to reduce this behavior. It is during the times when he is alone or when his mother is tending to his siblings that damages most often occur. His neighbor will intervene when he is engaging in this behavior outside. The damage he has caused exceeds the amount being requested in this line. The family has absorbed the majority of these costs.

The broker is reviewing each request to have repairs made as a result of the individual's behaviors. All payments made for repairs are reimbursements paid against a receipt. In reviewing the ISA Cost Accounting Standards, the damages cost item would be allowable to the extent they are the result from the actions or are a result of the disability of the individual named in the ISA. However, normal damages are not allowable. Approved for one year. This will allow time to develop and evaluate strategies to support him more productively at home.

Region: WR

Request Date: 13-Jun-05

Response Date: 28-Jun-05

One Time Amount: \$1,594

Outcome: Approved

The individual had a significant behavior in the community and damaged the support staff's car door to the extent that significant repairs are required.

The damage to the car was a direct result of the individual's disability. A review of proactive and reactive behavior interventions by a qualified behaviorist is recommended.

Region: WR

Request Date: 13-Jun-05

Response Date: 28-Jun-05

One Time Amount: \$975

Outcome: Approved

The individual has frequent soiling and vomiting accidents during transfer to her portable unit. The carpet is many years old and has been cleaned repeatedly. A new carpet is needed.

Damages are unallowable unless they are result of the individual's disability and meet prior approval criteria. The replacement of the carpet is needed as a direct result of the individual's physical and medical disability.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 39 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Damages

Region: WR

Request Date: 11-Aug-04

Response Date: 18-Aug-04

One Time Amount: \$254

Outcome: Approved with Qualifications

At the end of an excursion the individual became irate and shattered the windshield of her support persona automobile using her hand. There were no injuries, but she shattered the support persons windshield and has brought fear to persons supporting her with regards to bring her out into the community and furthermore transporting her in there automobile. The individual is requesting approval to utilize her budget to pay for the expenses to repair the windshield of her support person since this was done while out on excursion while being supported by someone other than a family member. She further requests that expenses such as this be automatically reimbursed utilizing her budget since her behaviors unpredictable.

Approved as one time expense. Other requests for damages must be prior approved.

Household-Furnishings

Region: NR

Request Date: 25-Aug-05

Response Date: 03-Sep-05

One Time Amount: \$1,400

Outcome: Approved with Qualifications

Cost for dressor = \$496.00 to \$499.00Needs to purchase new bed Cos=t \$699.00 to \$899.00 Aaron will be placed into a Group home in the near future. Aaron has the same bed since he was a child and is in need of a new bed. The bed set has two beds in it and will allow the family to provide the group home with one bed and the other will stay at home for when he visits. The need to purchase a dressor is because he punches through the drawers and becomes injured. He then tosses his clothes all around the room. His family reports that he will do the same with the closet. This is a health and safety need. This need for a dressor is addressed in the IP. Aaron is enrolled HCB Comprehensive Waiver.

The request is approved for a dresser and bed up to a total cost of \$1000. A second bed is not needed as CLA's provide bedroom furniture.

Region: SR

Request Date: 06-Jan-04

Response Date: 14-Jan-04

One Time Amount: \$1,222

Outcome: Approved

One time funding is needed to provide necessary items to set up an apartment for the individual and her children, who also are clients of the department: Bunk beds with drawers and mattresses (purchasd at Bob's furniture), lamps, TV, VCR, stereo, chair (through salvation Army and Goodwill), towels, and kitcehn utensils ,and shelves for kitchen cabinets.Doris disability contributed to her being taken advantage of by her boyfriend. The individual has relocated back to an enviornment that she is more familiar with, and no longer lives with her boyfriend. Items such as a bed, kitchen table, dresser and chairs have been donated to her.

The ISA Cost Accounting Standards state that furniture costs unrelated to the disability of the individual are limited to a maximum one time expense of \$1,000 and will be tracked in the Department's ISA database. Additionally, household furnishings are unallowable unless they are part of the one time set up cost, with exceptions granted if the item is disability related and has prior approval. The amount of the request above and beyond the set up cost is \$222, and these furnishings do not appear to be disability related. While these costs are not disability related, the total costs of \$1,222 is to cover the individual and her children. We recommend approval based on the additional \$222 will not only support the individual but also her children who are clients of the Department as well.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 40 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Furnishings

Region: SR

Request Date: 23-Nov-04

Response Date: 10-Feb-05

One Time Amount: \$2,012

Outcome: Approved

Barry is an individual who likes to be as independent as possible. He is in a wheelchair, therefore, needs to have situations, environments, etc. modified to allow for more independence. His washer and dryer are currently in the basement where he does not have access to them. He recently changed residential agencies and now has the support to put a washer and dryer in his kitchen. The typical apartment washer and dryer which is a unit with one on top of the other would not work for him. The unit specified above is front loading and washes and dries in the same unit without needing to move clothes from the washer to dryer. Allowing Barry to gain independence in this area would greatly increase the overall quality of his life.

Region: SR

Request Date: 24-Aug-05

Response Date: 01-Sep-05

One Time Amount: \$9,224

Outcome: Disapproval

This is a request for a Heater for the pool . The costs include the materials, labor, installation and an upgrading and connecting the electric service for the pool heater. There are 3 estimates for the heater although 2 of the companies do not do the installation. There is one estimate from an electrician. Please note that there is a ceiling fan for Laura's room included in the Electrician's estimate. Laura is a 41 year old woman who is non ambulatory, blind and behaviorally challenged. She lives with her 65 + year old mother who has health issues of her own. Laura physical activity is extremely limited. She does enjoy being in the pool and does get some physical movement when she is in there. She has developed diabetes over the last year and a half and the doctors recommend watching her diet and any form of exercise possible. The pool is a major source of exercise (and enjoyment) for Laura. Mrs. Esposito is asking for a heater for the pool to increase the number of days that the pool is comfortable temperature for Laura to be in it.

Swimming pools are cannot be covered under the waivers and are considered standard items purchased by families.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 41 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Furnishings

Region: SR

Request Date: 23-Oct-03

Response Date: 24-Oct-03

One Time Amount: \$450

Outcome: Approved

The individual is non-ambulatory, wears adult depends, and uses a bed regularly throughout the day. There is a significant amount of laundry associated with the individual's care. There are several staff and home health aides who use the washing machine to launder the individual's clothing and bedding, and the machine is used daily for these needs. The washing machine stopped spinning, and the water had to be drained from the tub of the machine. The individual's mother has some of her own serious health issues making it difficult to go to a Laundromat. The individual's mother is on a very limited income, and has indicated she is not in a position to purchase or repair or replace the machine. The washing machine is used primarily for Laura and is beyond typical household use as a result of the individual's disability. Funds are available in the budget, and the ability to laundry routinely is an important factor for the individual's health and well-being. The initial request was for a repairs, however based on the cost to repair versus purchase it was more cost effective to purchase.

ISA Cost Accounting Standards cost item Household repairs notes that the repairs to household items, including washers, are unallowable unless disability related and documented. The individual's mother is an elderly care give and the only other family member in the home. The other staff who provide support use the washing machine to wash the individuals clothes. The individual is non-ambulatory and has high intensity laundering needs. Since the washing machine is used heavily due to the individual's disability, the repair cost to the washing machine is an allowable expense. Because the cost to repair versus purchase was not cost effective, the recommendation is to purchase a new machine for up to \$450. The request for repairs was originally approved on 10/24 and the request to purchase was approved on 10/29.

Region: SR

Request Date: 02-Feb-04

Response Date: 06-Feb-04

One Time Amount: \$1,400

Outcome: Approved with Qualifications

The request is for a box spring, mattress, and bed frame. The individual has a disability related weight problem and weighs over 400 pounds. She has back and leg problems and the bed will help to alleviate her back and leg problems.

Approval was granted up to \$1000 using the one time set up allowance for home furnishings.

Region: WR

Request Date: 14-Mar-04

Response Date: 16-Mar-04

One Time Amount: \$140

Outcome: Approved

The individual frequently dumps liquids down the drain (cleaning supplies, milk and other liquid products he manages to get a hold of). His mother has been keeping the milk and other products form the refrigerator outside so that he doesn't get a hold of them to dump them out. She is requesting that she be allowed to use part of her January/February allotment of money (in the special needs line item) to purchase a refrigerator (similar to one a college student might use in a dorm) to store the products that he tends to dump down the sink. Her intentions are to keep the refrigerator downstairs in the cellar and access it as she needs to. She also plans to keep a lock on this refrigerator. A reference was made the last prior approval request to have appropriate behavior needs be addressed in the plan. The school has been providing consistent information for the family to use at home via PPT meetings, a daily journal and frequent phone calls. His mother has been mirroring the school's intervention and supports to the best of her ability.

ISA Cost Accounting Standards state that household furnishings are unallowable unless they are part of the onetime setup cost, is disability related, and has prior approval. It would appear that this refrigerator could be considered disability related and allowable. Recommend approval using current allocation of funds and as part of the onetime setup cost.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 42 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Furnishings

Region: WR

Request Date: 13-Jun-05

Response Date: 28-Jun-05

One Time Amount: \$110

Outcome: Approved

The individual has physical and medical needs that require an adaptive bed. She has difficulty sleeping during the summer months with high temperatures and humidity.

Household furnishings are unallowable unless they are part of one time set up costs. Exceptions are granted if the item is disability related and meets prior approval criteria. The need for the air conditioner is directly related to her medical and physical needs.

Region: WR

Request Date: 13-Jul-05

Response Date: 19-Jul-05

One Time Amount: \$624

Outcome: Denied

We agree with the need for environmental modifications. We recommend that this type of modification becomes part of an overall strategy to address Aron's behaviors. The use of nonconventional furniture should be reviewed by a behaviorist and or OT for safety and effectiveness. We also recommend you check with your Human Rights Committee to see if this warrants a review.

Region: WR

Request Date: 29-Sep-05

Response Date: 05-Oct-05

One Time Amount: \$3,000

Outcome: Approved

To increase the one time allowance for furniture. Allowable amount is \$ 1,000. Mrs. Mantz is requesting a one time allowance of \$ 3,000 using her current budgeted funds. Amy, who will be 26 next month, is diagnosed with severe mental retardation, oppositional defiance disorder and recently has been followed by a psychiatrist for possible anxiety disorder. Amy can be described as active and challenging. She tries to change her clothes repeatedly all day long, she has little attention span, becomes verbally aggressive and physically aggressive when she doesn't get her way and has broken a great deal of items in the home.

Household-Repairs

Region: SR

Request Date: 20-Sep-04

Response Date:

One Time Amount: \$0

Outcome:

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 43 of 74

BudgetCategory

Summary Rationale of Request

Comments

Household-Repairs

Region: SR

Request Date: 14-Oct-03

Response Date: 16-Oct-03

One Time Amount: \$65

Outcome: Approved

To pay for the cost of repairs to the washing machine. The individual is non ambulatory and has intensive laundering needs on a daily basis. Support staff assist with her laundry needs as a part of their daily responsibilities. There is one elderly care giver in the home. There are no other family members or residents who reside in the home. The request is for the initial cost of \$65.00.

ISA Cost Accounting Standards, cost item Household repairs, including washers, are unallowable unless disability related and documented. Since the washing machine is used heavily due to the individual's disability, the repair cost to the washing machine is an allowable expense.

Insurance

Region: WR

Request Date: 08-Jun-04

Response Date: 16-Jun-04

One Time Amount: \$0

Outcome: Approved with Qualifications

This request is to pay for this individuals medical insurance as a part of a cobra plan until suitabel medicaid providers can be located.

Approved with the following qualifications: this cost is to be reviewed at least annually for reauthorization and the case manager should research annually the availability of this specialty from a physician in the area who accepts Medicaid.

Other

Region: NR

Request Date: 04-Jan-05

Response Date: 21-Jan-05

One Time Amount: \$0

Outcome: Approved With Qualification

Carol DellaBitta is a 62 year old woman whom had been living on her own with drop-in supports from her siblings until her health declined and she could no longer manage on her own. She was admitted to an assisted living center, Chancellor Gardens in April 03. Prior to this move she had worked at KUHN in a supported workshop program. Carol did not wish to return to a work-based program but instead wishes to receive services in her current residence which allows her to be as self-sufficient, physically healthy and socially active as possible. Her family has chosen to use her day program money to purchase services at Chancellor Gardens. Receives daily recreational activities including cultural and educational programs and social events. Arts and crafts. Scheduled transportation to local shopping and restaurants. This allows her to remain socially active. Cost also covers daily ADL assistance for safely transferring in/out of her wheelchair.

The use of DMR day program dollars can only be used for recreation and leisure activities above and beyond what is typically provided as a part of the cost of care at the LTC. We are not authorizing the use of \$11624 for the cost of care at the residential facility. A provider agreement should be established to define what the specific DMR funds will be used for and how they will be billed for. The billing arrangement should be based on service provided versus a regular monthly payment.

Out of State Services

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 44 of 74

| <i>BudgetCategory</i> | <i>Summary Rationale of Request</i> | <i>Comments</i> |
|-----------------------|-------------------------------------|-----------------|
|-----------------------|-------------------------------------|-----------------|

Out of State Services

Region: SR

Request Date: 07-Oct-05

Response Date: 01-Nov-05

One Time Amount: \$0

Outcome: Approved with Qualifications

Requesting to use of a portion of Brenda's EFS funding to purchase personal supports while vacationing in Florida (26 weeks/year total) from Actell Elderly Care 1130 E. Donegan Ave Suite 10 P.O.Box 453061 Kissimmee, Florida 34745. 12 hrs/week @ \$16.50 = \$198 x 26 wks = \$5148 Brenda spends this amount of time in Florida every year with her guardian.

Approved as a state funded service with the qualification that the provider meets the CT DMR provider qualification requirements.

Personal Supplies

Region: NR

Request Date: 23-Mar-04

Response Date: 31-Mar-04

One Time Amount: \$0

Outcome: Approved

These items are required as a result of the individual's intensive needs for hygiene and sanitary reasons. Items include mouth wash, toothbrush, antibacterial body wash, and acne soap.

These items are extraordinary and related to the individual's disability.

Professional Services

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 45 of 74

BudgetCategory

Summary Rationale of Request

Comments

Professional Services

Region: NR

Request Date: 01-Nov-05

Response Date: 10-Nov-05

One Time Amount: \$0

Outcome: Approved with Qualifications

PRAT recommended approval of 2 therapies requested to be added to Rachel's home-based Day program. One is Massage Therapy which Rachel has been receiving for a few years funded through the LEA (home-based educational program). She got this relaxation therapy 1x/week (1 hour) all year. The therapist has a great relationship with Rachel. Her charge to the family would be \$75/hr. (this charge includes that fact that the therapist comes to the home for the sessions). The total cost of the annual therapy would be \$3,225 (43 weeks/hours @ \$75/hr.) This service was targeted to start in October 05. The therapist is not a TXIX provider. Rachel's primary MD has written an order for the massage therapy to continue. DSS has said they cannot issue any official denial of a service unless the family submits a request for that service through an enrolled TXIX provider. If the massage therapy is approved for funding, it would be considered a part of Rachel's Day program. The second therapy service Rachel's mother is requesting is physical therapy services through Crossroads Physical Therapy in Columbia, CT. The provider is located close to where Rachel lives and mother would plan to take Rachel there for therapy (or have her taken by some one else.) The type of therapy is called Cranial-Sacral and it is hands-on (manual) therapy that is holistic in nature. Rachel's MD has written an order for the therapy 1 hr./week and also a letter of support/justification for this specialized therapy as being best for Rachel's needs. The therapy costs \$100/hr. Crossroads is not a TXIX provider. If both these requests are approved, this would increase her Day funding from \$24,389 to \$29,914.

Costs of professional and consultant services rendered by persons who are licensed members of a particular profession or possess a special skill are allowable when reasonable and necessary for the care of the individual named in the ISA, are included in the budget that supports the ISA and are not covered by private insurance, Medicare or Medicaid, other State funded programs, or other sources. A denial by t-19 was submitted with a doctors recommendation for massage therapy. Based on the submission of these documents both therapies are recommended for approval. We approved the cranial-sacral therapy. We did not approve the massage therapy, as this therapy is a service that can be provided by a T-19 provider. On 11.9.05 a denial by t-19 was submitted with a doctors recommendation for massage therapy. Based on the submission of these documents both therapies are approval.

Region: NR

Request Date: 03-Feb-05

Response Date: 04-Feb-05

One Time Amount: \$2,800

Outcome: Approved

The family is on fixed income with limited SS benefits. DSS will provide \$1200. The funeral home is holding on burila opeations util the balance of \$2800 is received.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 46 of 74

BudgetCategory

Summary Rationale of Request

Comments

Professional Services

Region: NR

Request Date: 01-Jul-05

Response Date: 15-Jul-05

One Time Amount: \$975

Outcome: Approved

Melissa team met on July 29, 2005 and determined that Melissa's s new staff requires the specialized training provided by Debra Dickson RPT to insure her health and safety in her day, residential, and community programs. Debra Dickson RPT 's evaluation was completed and paid for by Mrs. Tyler as regular insurance and Title XIX does not cover the cost, nor will it cover the cost of training staff, video taping training sessions(to be used for training future staff) or evaluating the success of implementations of recommendations including environmental modifications, Willabarger Brushing and compression program and development of sensory diet of activities. The anticipated cost is \$975 for 15 hours (\$65 per hour for 15 hours over 12 months).Melissa has a diagnosis of severe autism with sensory intergration and spatial issues. Because Melissa is a non-verbal individual she relies upon her care givers to interpret and address her daily needs. Specialized training is critical to maintain health and safety of Melissa. Melissa's current plan identifies the need for specialized staff training related to Melissa's medical and behavioral needs.

Region: NR

Request Date: 13-Jul-04

Response Date: 14-Jul-04

One Time Amount: \$400

Outcome: Approved

This individual needs to have dental braces removed. Has had them on for approximately 6 years. The cost of the consult by the dentist, who put them on is \$40. The procedure will cost anywhere from \$250.00 to 350.00 dollars. The final cost will be determined after the consultation. This individual has had many changes in living arrangements and service providers, so overall lack of follow through when it comes to appointments in general, the braces were never removed. The braces must be removed to preserve her teeth.

The funding for this proposed expenditure is available within her current budget.

Region: NR

Request Date: 10-Aug-05

Response Date: 15-Aug-05

One Time Amount: \$489

Outcome: Approved

Deb is interested in driving and it is part of her IP to pursue a drivers license. She has the potential to be a driver. Getting a license would increase her independence and eliminate the need to purchase transportation., making this venture cost effective for DMR. Driving would allow her access to her community and job in an independent manner. The request is to purchase a driving assessment form Easter Seals to assess vision, visual perception, motor function, cognition, and general driving knowledge. The evaluation is performed by an specifically trained OT.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 47 of 74

BudgetCategory

Summary Rationale of Request

Comments

Professional Services

Region: NR

Request Date: 05-Apr-05

Response Date: 13-Apr-05

One Time Amount: \$12,500

Outcome: Approved

A years tuition at Baran's Institute of Technology starting July 2005. Adrian is graduating and has been allocated \$12,500. maximum for day supports. His dream has always been to become a certified auto mechanic. He has demonstrated great mechanical aptitude when working around cars. Baran's has a hands on approach with people who have disabilities, therefore accommodating for greatest success. Baran staff have met with him and feel the program would be appropriate. he would like to apply the \$12,500. allocated by PRAT towards the total tuition of \$18,900. Adrian is also applying for financial aid. Baran's will help with Adrian apply for aid. Adrian and his parents will pay the remaining costs for the program.

Approved for one year certificate program.

Region: SR

Request Date: 17-May-04

Response Date: 25-May-04

One Time Amount: \$0

Outcome: Approved with Qualifications

Family would like to hire an Au Pair through the Cultural Care Au Pair Agency. They already have someone who has worked for them in the past (not through agency) and is willing to commit to another year. The expenses are as follows: \$250. application fee, \$5,395. per year agency feed, insurance, the roundtrip international air fair for Au Pair, health, dental insurance for Au Pair, 4 day training course in NY, \$139.05 weekly stipend for 51 weeks, \$500. for tuition and educational requirements. This individual requires 24 hr. care. The additional funds requested are \$20,148. however, if they hire staff for the overnight hours the cost would be \$57,000. There are several letters from the primary physician, as well as the mother documenting the need for total care.

The age requirement for the Au Pair (18) meets DMR requirements. The Au Pair works 45 hrs/wk, not more than 10 hrs .in one day with a least 1.5 days off each week, and one weekend off a month. Room and board is provided by the host family. Au Pair costs have been previously approved and this is a cost effective way of supporting someone with intensive needs such as this individual. The ISA Cost Accounting Standards do not specifically address Au Pair services but the Standards states that compensation includes salaries, wages, and fringe benefits. It would appear that many of the costs that are stated in the request would be allowable, for education, insurance, training (presuming related to duties).

Region: SR

Request Date: 21-Mar-05

Response Date: 01-Apr-05

One Time Amount: \$0

Outcome: Disapproval

Sonia ia an attractive twenty four year old woman with extensive dental concerns. She visited the dentist on February 23rd to follow up on her teeth randomly falling out and causing her constant pain and embarrassment. After visiting the dentist it was determined she must have all her teeth removed.The dentist called it permanent dentation. Being twenty four years of age the dentist suggested having her dentures ready for her after her oral surgery to ensure she does not have to be in the community without teeth. Title 19 will pay for the surgery but not for the dentures. Title 19 will cover \$8,044 but her dentures must be paid from another source. \$4000 is requested to pay the dentist to prepare the dentures. and have for her after her operation in May, 2005. The surgery date is the soonest she can be seen at St. Raphael since she must use her Title 19 benefits.

T19 should pay for it. If it is a timing question, an appeal to T19 to do it quickly should be done.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 48 of 74

BudgetCategory

Summary Rationale of Request

Comments

Professional Services

Region: WR

Request Date: 18-Aug-04

Response Date: 01-Sep-04

One Time Amount: \$2,700

Outcome: Approved

Admission for substance dependency treatment for 21 days from August 15, 2004, through September 4, 2004, at High Watch Farm, Kent, CT, at a cost of \$3,500 of which \$800 will be refundable on completion of program. He is a young adult, adjudicated, with mild or borderline mental retardation; additionally diagnosed psychiatrically with a number of mental health disorders involving impulse control problems and substance dependency. By origin, his behavioral difficulties are related to his history as a neglected and traumatized infant who was placed by the state into foster care at an early age, and subsequently adopted by his foster parents. He has clinical support from the New Milford Mental Health Clinic and he has behavioral support from wlee known behaviorist, whose services as consultant are funded by the present ISA. In addition, he has 40 hours per week of direct support under his ISA, but notwithstanding this, it has required constant struggle by the support team to keep him out of trouble. The present admission to High Watch Farm was prompted by the probation officer's finding that his urine tested positive for cocaine. The program at High Watch Farm was selected for him by his behaviorist because this program offers a highly structured environment with 24-hour support. The program unfortunately does not accept Medicaid as a payment source. According to Dawn Wilson, Substance Dependence Case Manager for DMHAS Region 5, only two programs in Ct now accept Medicaid, one of which is located at CT Valley Hospital, (CVH), Middletown, the other in Stonington. Neither of these Medicaid funded programs would be appropriate for because they do not offer the required level of structure and supervision. The Stonington program has a component of unsupervised residences in Norwich, New London or Groton and the CVH program is organized along similar lines. The geographical distance of these programs from the Brookfield-New Milford area would be another serious disadvantage.

Cost items must not be funded by other sources, including but not limited to: Participants personal funds, income and assets, private insurance, or Medicare, and/or Medicaid. Although other options that accept T-19 are available, the services at High Watch Farm are a better match to address Dwayne's needs. Savings from staff support will offset the costs for this hospitalization.

Region: WR

Request Date: 17-Feb-04

Response Date: 24-Feb-04

One Time Amount: \$0

Outcome: Approved with Qualifications

Piano Lessons \$25 an hour for 39 weeks. Lessons were recommended by a licensed music therapist and the request was accompanied by an evaluation. .

Approved as a recreational support within the recreation budget limit of \$1200 per year.

Region: WR

Request Date: 31-Mar-04

Response Date: 02-Apr-04

One Time Amount: \$3,000

Outcome: Approved

Expenses for funeral and burial. The individual does not have resources to cover these expenses. Funds are available in her ISA.

Approved

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 49 of 74

BudgetCategory

Summary Rationale of Request

Comments

Professional Services

Region: WR

Request Date: 26-May-04

Response Date: 03-Jun-04

One Time Amount: \$0

Outcome: Approved

This individual is very fragile and is diagnosed with severe MR. Individual needs to receive Massage Therapy 2x per month due to the condition of Rett Syndrome, this service is necessary to promote overall relaxation and stimulation to her muscles. This individual has rigidity due to this disorder and this treatment therapy is beneficial toward keeping this individual comfortable, clam, and healthy. The individual budgett can be adjusted to fund this need, a line item will be created for 1,200.00 a year, the money will move from the recreation line item.

The support is related to the individual's disability and part of her support plan. This would appear to be a reasonable request and be beneficial to the individual.

Region: WR

Request Date: 04-Jan-21

Response Date: 07-Dec-04

One Time Amount: \$11,000

Outcome: Approved With Qualification

Dwayne is a youth of 23 with borderline mental retardation and a problem drug dependency. Brookfield Police arrested Dwayne on November 14, allegedly finding a cocaine pipe and traces of cocaine in Dwayne's motel room. As Dwayne is currently on probation, he is at risk of incarceration for violating his probation as well as for present charges. On today's date, November 17, 2004, Dwayne's father James Ellis has brought Dwayne for voluntary admission to High Watch Farm drug rehabilitation program in Kent, CT. Mr. Ellis hopes the High Watch Farm admission will be an extended stay of three months. Dwayne previously in August and September had a briefer admission of three weeks at High Watch Farm; by Dwayne's own report this prior admission was a beneficial experience, however Dwayne did not fully comply with discharge recommendations such as attendance of AA meetings; Dwayne followed through only on the portion of his discharge plan which involved individual counseling with Mr. Anthony Frias MSW of New Milford Mental Health Clinic. Behavioral Consultant Mathew Brinkerhoff, whose services are funded under Dwayne's individual support agreement, has stated a strong opinion that admission to in-patient drug rehabilitation, even for an extended period, will be insufficient to address Dwayne's problems. In Mr. Brinkerhoff's analysis, Dwayne requires a structured program of 24-hour supervision for the indefinite term, and such resources should be accessed for Dwayne through the DMR forensic process. Two years previously I brought Mr. Brinkerhoff's recommendation to the Region's Risk Assessment Team Chaired by then Regional Director George Moore. The advice of Risk Assessment was that Dwayne's individual support agreement should be maintained at the existing level of funding, but additional DMR resources should not be made available. This determination was based on apparently the preception that a person of Dwayne's cognitive-adaptive level should be capable of a

All other ISA supports are suspended during the hospitalization.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 50 of 74

BudgetCategory

Summary Rationale of Request

Comments

Professional Services

Region: WR

Request Date: 02-Oct-03

Response Date: 09-Oct-03

One Time Amount: \$1,800

Outcome: Approved

To pay the portion of dental surgery that is not covered by insurance. The anticipated amount is \$1800. The initial request did not have specific information on the type of medical procedure, the doctor, and the individual's insurance.

Dental surgery: To be an allowable cost according to the cost standards (Attachment A, A6) costs items must not be funded by other sources, including but not limited to: participant personal funds, income or assets; private insurance; insurance settlements and insurance awards; other state or federal agencies, BRS, BESB, or DMHAS; or Medicare and/or Medicaid. To the extent that this could be funded by the clients insurance then we should not be funding the cost. However, if the \$1,800 is the amount of out of pocket expenses after insurance pays their portion, then we would approve this request.

Program Supplies and Reinforcers

Region: SR

Request Date: 25-Sep-03

Response Date: 02-Oct-03

One Time Amount: \$0

Outcome: Approved

Materials & supplies: sanitary handy-wipes, liquid antiseptic hand soap, shampoo, conditioner, deodorant, Q-tips, baby powder, lotions, paper towels & trash-bags On going request/support: Behavioral Reinforcements: edible reinforcements: D & D coffee, donuts & Coolatas, Cinnabons, candy-bars, and ice cream, social dinners/lunches, Harry Potter merchandise, movies, videos, paper money, playing cards and a negotiated "item" of the week which varies in cost. The individual's plan includes a preventative strategy to encourage/foster "appropriate" response/behavior. The behavioral reinforcement component provides the individual with opportunities to participate in preferred outings, receipt of preferred items and edible rein forcners for displayed compliance. The quantity and the price of these reinforcements change daily as they are dependent upon the individual's ability to adhere to his program. These rein forcners need to be available/accessible as they are immediate reinforcements. The individual suffers from severe OCD and compulsions, he excessively uses personal hygiene and antiseptic/sanitary products. He showers 2 to 3 times per day and his family constantly needs to restock: soap, shampoo, conditioner, deodorant, Q-tips, baby powder on a continual basis. He also carries around antiseptic hand soap and wipes which he compulsively wipes down seats and railings, windows, etc. He uses paper-towels to dry off the surfaces and trash-bags to discard the used wipes and other perceived garbage/trash. Not having these items can and will trigger inappropriate behavior responses. The request is for \$2080 annually.

In reviewing the ISA Cost Accounting Standards, the personal care items are allowable if required as a result of the individuals disability, are not items normally used for an individual at that age and are not covered by private insurance, Medicaid, Medicare, other State funded programs, or other sources. However, to the extent there are extraordinary personal expenses related to the individual named in the ISA and those expenses have been included in the ISA budget personal expenses are allowable. Overall the costs appear reasonable and would appear to be extraordinary expenses to be funded by the ISA.

Reasonable Rates

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 51 of 74

BudgetCategory

Summary Rationale of Request

Comments

Reasonable Rates

Region: NR

Request Date: 26-Aug-04

Response Date: 21-Sep-04

One Time Amount: \$0

Outcome: Approved

Requesting weekly counseling services at a cost of \$100.00 per session. he has a diagnosis of Mild Mental Retardation, Depression, ADHD, and ODD. Since he is neither taking any medication nor affiliated with a mental health clinic, Title 19 will not cover any counseling costs. In addition, as part of his pending court case for Disorderly Conduct, Criminal Mischief, Threatening, and 5th Degree Larceny, he will be mandated to participate in court-ordered counseling. Due to his level of intellectual functioning, this participation will need to be provided by a therapist who has experience with individuals with developmental disabilities. The counseling will be provided by a licensed psychologist, who was identified by the current private provider and specializes in working with developmentally disabled adults. |

This request is approved based on the lack of a qualified provider to meet the unique needs of Mark. Therapy sessions are approved for \$100/ session.

Region: NR

Request Date: 26-Aug-04

Response Date: 21-Sep-04

One Time Amount: \$0

Outcome: Approved

Requesting weekly counseling services for a cost of \$100.00 per session. He has a diagnosis of Mild Mental Retardation, Schizo-affective Disorder and Anti-Social Personality. He needs to be supported in learning anger management techniques and developing coping skills. He needs a therapist that is willing to be creative, use non-traditional therapeutic methods, and has experience working with individuals with complex needs and issues. Although he receives medication through CHS, a behavioral health provider, the counseling staff do not have the time nor the expertise to provide him with the specialized support he needs. He has proven to be very challenging and, at this time, he is at risk of being terminated due to his abusive language and sometimes threatening posture. Title 19 will not cover this expense through another provider. In addition, as part of his pending court case for Harassment in the 1st Degree, he will be mandated to participate in court-ordered counseling. Due to his level of intellectual functioning, this participation will need to be provided by a therapist who has experience with individuals with developmental disabilities. The counseling will be provided by a licensed psychologist, who was identified by the current private provider and specializes in working with developmentally disabled adults.

This request is approved based on the lack of a qualified provider to meet the unique needs of Jose. Therapy sessions are approved for \$100/ session.

Region: NR

Request Date: 03-Nov-05

Response Date: 02-Dec-05

One Time Amount: \$0

Outcome: Disapproval

The team has identified the need for IS Habilitative supports from a staff person who is and RN or LPN because of Marie's complex needs. mother has found an LPN and RN to provide these supports but is requesting to pay over current rate for IS Hab. In order to secure qualified staff she has to provide a competitive rate of pay between \$35 - \$40 an hour. The \$40 an hour rate includes a contribution towards the expense of health insurance. This allows the family to attract and maintain consistent staff with the appropriate qualifications. These services are requested for an average of 8 hours per month.

Total compensation and rates of payment to individual employees are allowed within the cost guidelines for each service: IS Habilitation, Personal Support, Adult Companion, Respite, Supported Living, Individualized Day Support, Supported Employment, and Family Individual Consultation and Support. Skilled nursing is covered by the Medicaid State Plan. An appeal to DSS for additional skilled nursing should be made if this is the type of support that Marie needs.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 52 of 74

BudgetCategory

Summary Rationale of Request

Comments

Reasonable Rates

Region: SR

Request Date: 25-Sep-03

Response Date: 07-Oct-03

One Time Amount: \$0

Outcome: Approved

The individual requires intensive supports and services to participate in any/all of his daily functions. The team was unable to find a specialized psychiatrist, who accepted Title XIX and was willing to work with the individual. Fortunately last year, the team was referred to , a private pay psychiatrist. He not only made a commitment to take on this intensive case but he has made considerable strides in working with the individual. The individual has history and diagnosis of PTSD/abandonment issues. He has extreme difficulties in establishing trust, building and maintaining relationships and accepting services/supports. The psychiatrist has and continues to exercise extreme flexibility in working with the individual, especially in the development and implementation of individualized counseling techniques. The psychiatrist does home visits, conducts counseling sessions over the phone, picks him up and takes him out, attends team meetings and is on call/available for team consultation and emergencies. It has not only helped the individual in trust building but it has become a model "relationship" for him to foster additional friendships, etc. He is displaying increased ability to accept disappointments, increased frequencies of appropriate self-expression and he is attempting/experiencing new opportunity. Clinically, the individual has been much more stable and displayed a decrease in intensity of outbursts, rages and depressive episodes. He should continue to receive these valuable and essential services. The requested rate is \$200 and hour. The annual amount is \$4800.

In reviewing the ISA Cost Accounting Standards, the professional service costs rendered by persons who are licensed members of a particular profession are allowable when reasonable and necessary for the care of the individual named in the ISA, are included in the budget that supports the ISA, and are not covered by private insurance, Medicare or Medicaid, other State funded programs, or other sources. This appears to be a programmatically necessary expense. The services being provided may be appropriate for the high per hour rate. The Regional data for this type of service ranges from \$126-\$150 per hour. The rate being paid for these services exceeds the Regional rates by \$50 per hour.

Region: SR

Request Date: 09-May-05

Response Date: 10-May-05

One Time Amount: \$0

Outcome: Approved

Immediate implementation of extended day supports through the ARC of NL County. Due to comprehensive needs she needs a two to one ratio of support. Without this extended day support both her and her father are at considerable risk. The SD Director and the Private ARD support this plan. Funds are available in the individual budget.

Approved as a temporary support plan.

Region: WR

Request Date: 04-Jun-04

Response Date: 09-Jun-04

One Time Amount: \$0

Outcome: Approved

Rate for house manager is over the allowable rate. Individual is in the process of moving into own home with the company of two other roommates. The home will be fully staffed with employees who are being paid within the allowable range. Debbie B. was hired to work as the house manager. Her duties will be commensurate with a group home manager's duties. Her role is supervisory in nature and will require her to be on call. She will be working an average of 20 hours per week. This request is to allow her rate to exceed the Cost Standard's rate, as she is in a managerial role.

The rate is for a supervisor to schedule, supervise and train staff, in addition to on-call responsibilities. The cost guidelines do not specifically address this cost for this type of position. The rate of \$24.00 an hour is within 10% of the range for individual staff for residential skill training and habilitation.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 53 of 74

BudgetCategory

Summary Rationale of Request

Comments

Reasonable Rates

Region: WR

Request Date: 14-Apr-04

Response Date: 16-Apr-04

One Time Amount: \$0

Outcome: Approved with Qualifications

The provider agency has submitted a proposal for \$38.00 per hour. The service to the family will be provided by staff from the agency's CLA. The individual needs staff 7 days per week. Scheduling requires the early morning and an hour in the early evening with a long interval between the two coverage periods. Two round trips per day to the home are required. In this rural area the agency is the only provider in the immediate vicinity. The provider agency may often need overtime to ensure staffing. T. Sufficient incentive must be offered to attract qualified staff. The basic hourly wage will be at least \$18 per hour plus overtime and benefits. Services have been developed in response to an emergency. This is a short term plan until another living arrangement can be secured.

The ISA Cost Accounting Standards Reasonable Rates: agency residential services for personal assistance and habilitation/skill training is allowed at \$28 per hour. The request totals \$38 per hour. This is a temporary approval because of the rural area, the urgency of the request, and until a more suitable living setting is found.

Region: WR

Request Date: 18-Aug-04

Response Date: 01-Sep-04

One Time Amount: \$0

Outcome: Denied

Recreation fees: The request is to increase the yearly allotment allowed for recreation costs from the cap of \$1200 to \$1600. Her uses his ISA to pay a variety of staff members to work with him on all of his everyday needs, including community outings. As documented in his plan, her has been participating in a variety of outings each week. As such, there are costs that accompany these outings and in any normal circumstance an allotment of \$ 1,200 would suffice. However, there is always a staff with him and the cost of admittance fees, tickets, etc. for the staff are covered by his ISA. The recreation line item is used appropriately, according to the cost standards already established. It is just an increase in the allowable amount that is being requested. The overall increase would be \$ 400 yearly, making the recreation line item a total annualized amount of \$ 1,600. The money would be moved from another line item in the budget, most likely from the wages line item.

Recreation/Entertainment costs. The cost of amusements, diversions, organized social or recreational activities and related costs such as meals, lodging, rentals, transportation and gratuities may be an allowable expense if it can be demonstrated that it is a necessary part of the plan and does not exceed \$1200.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 54 of 74

BudgetCategory

Summary Rationale of Request

Comments

Reasonable Rates

Region: WR

Request Date: 13-Nov-03

Response Date: 09-Dec-03

One Time Amount: \$6,000

Outcome: Approved with Qualifications

This request to provide educational consultation, behavior program development, and behavior management training to staff and family members for a rate of \$125 and hour for up to four hours a week. The individual has a long history of significant behavioral issues including aggression and destruction of property. Last fall (2002) the school system contracted with Behavioral Development and Educational Services (BDES) to provide his education program. This is a highly structured program in which he receives 1:1 educational services. Unfortunately, his behaviors at home and in the community were still present. In March 2003 DMR agreed to pay for in-home behavioral support to teach the family and home health aides how to address the individual's behavior. BDES was hired to provide the in-home behavioral/educational training in the hopes that they could carry over into the home what was working in school. Many other behaviorists have been tried over the years with little success. He has made tremendous progress and has many accomplishments, so the plan is to continue with BDES. He has made such progress because of the consistency between the school and home program. The service provider's credentials include 3 Master's Degrees in Special Ed/ED, Reading, and Theology.

The services have been effective in supporting the individual and have resulted in a significant improvement in his life. The hours per month have been decreased from the previous year because of the individual's progress. Training to home health aides, who assist in the home, is also provided. This request is approved on the condition that the cost of the school program be submitted to determine the maximum rate that should be funded by this request.

Region: WR

Request Date: 28-May-04

Response Date: 09-Jun-04

One Time Amount: \$0

Outcome: Approved with Qualifications

This request is for rate for a BRS qualified provider for job coaching and coordination/education with individual's natural supports at his work site. The individual has complex medical needs which make require ongoing communication and coordination. This individual is very successful at his job and it is largely due to the efforts of his job coach.

The total cost for the program is \$10,992., and payment is made only for services that are provided. The rate was established by BRS. The relationship between the provider and this individual has been therapeutic. The rate is above the cost guidelines; both over BRS approved reasonable rate of \$5,000 per year or the supported employment individual hire of \$25 per hour. Approval for one year and then require continued justification or decrease in rate or hours to under the \$5,000.

Recreation

Region: NR

Request Date: 12-Jul-04

Response Date: 26-Jul-04

One Time Amount: \$900

Outcome: Approved with Qualifications

Request for wiring of pool pump, above ground pool and liner 15x30 oval x52. All 15 individuals will benefit from having a pool located at home. The pool was donated to the family. The pool will allow individuals to receive their physical therapy in the water. It also provides an exercise and leisure activity within the home setting. It is not always possible for everyone to access the community due to a lack of wheelchair accessible van that accommodates everyone.

Approved as a recreation expense.

Room and Board

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 55 of 74

BudgetCategory

Summary Rationale of Request

Comments

Room and Board

Region: NR

Request Date: 23-Mar-05

Response Date: 01-Apr-05

One Time Amount: \$1,500

Outcome: Approved

She only gets 451.00 for SSI and her pay check from Good will and that adds up to 550.00 Her rent is covered by Section 8 and she pays 200.00 rent.

The deposit should be returned to the state when if she moves to another location. If her finances and earnings change, a repayment plan should be implemented.

Region: NR

Request Date: 14-Mar-05

Response Date: 31-Mar-05

One Time Amount: \$2,700

Outcome: Approved with Qualifications

Monthly food and clothing allowance of \$250.00. At present, Loan does not have any income. She is neither eligible for SSI nor a cash supplement from DSS. She was at one time receiving SAGA supports from DSS in the amount of \$200.00. However, upon speaking with DSS personnel, it was learned that, due to Loan's current immigration status, she should never have received any cash support through the SAGA program (see attached information regarding SAGA eligibility requirements obtained through the DSS website). In addition, Loan will not be able to apply for SSI benefits until she has been in the United States for five years. As of July 2, 2005, Loan will have been in the U.S. five years and at that time will receive assistance from DMR to apply for SSI benefits. The support requested is only temporary, and will cease once SSI benefits are in place.

Approved on short term basis as long as she is a legal immigrant.

Region: NR

Request Date: 20-Jun-05

Response Date: 01-Jul-05

One Time Amount: \$1,095

Outcome: Approved

The individual is currently living in a one-bedroom condo unit. She has lived there for at least 10 years and has had no problems and/or issues with the area until the last few months. Her neighborhood, which was once very quiet, has recently become home to several delinquent teenagers. On several occasions, within earshot, there have been several fights in her parking lot. Weapons, guns and knives, have been drawn and arrests have become more commonplace. She has neighbors who have had their windows broken and cars burglarized. She and her circle of support, which consists of her therapist, OPA advocate, support staff and Support Boker, are concerned for her safety. She has located an apartment in a safe and secure building, where other individuals served by the Department currently reside. She is in need of a security deposit to make the move, because her landlord is sure not give her her security deposit back. First, by moving she is breaking her lease and secondly, he has been a very difficult person to work with during the time she has lived there. If she gets her security deposit or any portion of it, her team would ensure that she paid it back to her ISA.

This request is approved as a one time request. Room and board expenses are not allowed. The approval is based on the health and safety needs of the individual.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 56 of 74

BudgetCategory

Summary Rationale of Request

Comments

Room and Board

Region: NR

Request Date: 04-Nov-05

Response Date: 10-Nov-05

One Time Amount: \$1,208

Outcome: Approved

Request if for rent for the months of October and November. Amount of rent for October is \$632.50, which includes a 10% late fee. Rent for the month of November is \$575.00. This amount is within her current allocation. Jasha has been hospitalized since June 13, 2005. She was taken to Hartford Hospital by ambulance after suffering from severe dehydration and acute renal failure. Jasha was later sent to IOL and then discharged to the Bidwell Care Center at the end of July. Community Enterprises, Inc and DMR continued to pay her rent with her own resources and benefits. However, for the months of October and November, Jasha's benefits were used toward the cost of her care while at Bidwell. She is currently ready for discharge, however is not able to pay her rent. By paying her rent and maintaining her current apartment, this will help greatly with a smooth transition back into the community, including the resuming and acceptance of supports from Community Enterprises. In addition, if DMR is not able to pay her outstanding rent, she will be homeless and given her mental state, this will pose a threat to her continued health and safety.

Region: NR

Request Date: 23-Mar-04

Response Date: 01-Apr-04

One Time Amount: \$1,500

Outcome: Approved

Susie is moving from Hartford to Bloomfield and doesn't have the money to pay the security deposit. She is living in the apartment with a overnight staff. Her supports fit her need for supervision. We are asking to use the exsisting money in her ISA to pay for th security deposit. Susie only gets 451.00 for SSI and her pay check from Good will and that adds up to 550.00 Her rent is covered by Section 8 and she pays 200.00 rent.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 57 of 74

BudgetCategory

Summary Rationale of Request

Comments

Room and Board

Region: NR

Request Date: 26-Jan-05

Response Date: 27-Jan-05

One Time Amount: \$1,200

Outcome: Approved

Jose is need of emergency shelter and food. Funds requested are as follows: \$225.00 per week for up to a four week period to pay for an efficiency-type unit in a motel, out of the Greater Hartford; \$50.00 per week as a supplemental food allowance. Jose's benefits are not sufficient to pay for the expense of this temporary housing. Although, he will pay for the majority of his food himself, he will need a supplement since he will be in a less than ideal living situation that will require him to purchase food daily, with few accomodations for cooking and food storage. Jose is currently living with his father in the North End of Hartford. Within this last week, Jose has had two incidnets with other individuals that live in the area. Last week, the brother of his former girlfriend and the mother of his child was found casing his apartment building, trying to find out where Jose lived. Jose has a protective order and is not to have any contact with the girlfriend or her family. However, some members of this family have had phone contact with Jose and made numerous threats of violence against him. Yesterday, Jose was followed to his home by a man with a full head mask. The individual tried to engage Jose and get him to come out of the apartment. Jose refused. Jose's father went outside to tell this person to leave. The individual then attempted to prevent the father from returning into the home and tried to enter the apartment. Jose responded by assualting the individual. Police were summoned, but there were no arrests. Jose fears for his safety and believes he will be subject to some type of retaliation. Knowing the level of violent crimes in this neighborhood, his fears are real and justified. The goal is to remove Jose from the current living situation to a more calm and stable environment within a month's time. He will use mentoring and individual supports to assist him in relocating .

Region: NR

Request Date: 22-Feb-05

Response Date: 02-Mar-05

One Time Amount: \$1,200

Outcome: Approved

Jose is currently living with his father in the North End of Hartford. Within this last month, Jose has had two serious incidents with other individuals that live in the area. These incidents put Jose, his father, and others in the community at risk. On 1/26/05, this case manager received prior approval to find suitable emergency housing for Jose. After, several days at an efficiency, Jose opted to return to his father's apartment. Of the \$1,200.00 originally approved, Jose utlized \$400.00 for emergency food and shelter. At this time, Jose continues to fear for his safety and believes he will be subject to some type of retaliation. The goal is to remove Jose from the current living situation to a more calm and stable environment. In order to accomplish this move as quickly as possible, he will need the security deposit. His benefits will not be sufficient to pay a security deposit and first month's rent. Although, Jose is eligible for a rent subsidy, he is not eligible for a security deposit loan, as the loan for the security deposit on his last apartment was only partially repaid. Jose will use broker and mentoring supports to assist him in relocating to know.

Adjust the ISA budget to clearly identify this as a housing cost. It he moves from this apratment, the sercurity deposit should be returned to the state.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 58 of 74

BudgetCategory

Summary Rationale of Request

Comments

Room and Board

Region: NR

Request Date: 20-Jun-05

Response Date: 01-Jul-05

One Time Amount: \$2,400

Outcome: Approved

The individual is currently living at an In., on the North Hartford line. She was evicted from her apartment in early March and went to stay with friends for several weeks, until she was eventually kicked out. She is now six months pregnant, has no permanent residence, has an assault case pending in court, and has an open case with Protection and Advocacy. OPA' recommendation was that DMR should ensure that she is provided with residential options that would ensure her health and safety. It is important to note, that both the court case and the OPA case resulted from physical altercations that She had with her mother, who is currently serving a six month prison sentence for violation of probation of a case where she assaulted her. At this time, hers current living situation is not meeting the recommendations made by OPA. The goal is to provide her with the monetary assistance she needs to secure an apartment for her self and her child, who will be born in September. This will provide her with a more calm and stable environment. In order to accomplish this move she will need the security deposit and possibly her first month's rent. Since her current benefits only amount to \$579.00 and it will take a least a few weeks to get DSS and Rent Subsidy benefits in place, she will not have sufficient funds to pay a security deposit and first month's rent.

Region: SR

Request Date: 02-Oct-03

Response Date: 07-Oct-03

One Time Amount: \$0

Outcome: Approved

The individual is funded through the 015 account. His living arrangements are critical to his continued success. The rent subsidy will allow the individual to live in an environment that will contribute to his over all well being. The request is for \$4800 annually.

The 015 funds are more flexible than the ISA cost accounting standards as the standards state that room and board is unallowable. The support relates directly to the individual's disability and to a specific need identified in the individual's plan . Supporting the individual to live in another area of the state minimizes a risk and represents a significantly cost effective support arrangement. Typically rent subsidies are paid out of 015 for individuals who meet this funding requirement.

Region: SR

Request Date: 30-Nov-04

Response Date: 03-Dec-04

One Time Amount: \$1,000

Outcome: Approved

Erin is being evicted from her apartment in Meriden. Applications to many apartment complexes and/or rentals have proved futile due to landlord rejections in the Meriden and Milford areas, where Erin prefers to live. Both Erin's case manager and real estate agent are aggressively pursuing apartments. It is hoped that Erin will only require 1-2 weeks of housing through her ISA before an apartment or temporary housing is found. Shelters are being considered but are limited due to Erin's previous experience with them.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 59 of 74

BudgetCategory

Summary Rationale of Request

Comments

Room and Board

Region: WR

Request Date: 04-Nov-04

Response Date: 12-Nov-04

One Time Amount: \$900

Outcome: Denied

Request for home heating oil. The family is in a financial crisis, the father is ill and can only work part time and the mother provides home schooling for her son and is not able to work.

Recommend follow up with through state and locate home heating assistance programs.

Region: WR

Request Date: 29-Sep-03

Response Date: 01-Oct-03

One Time Amount: \$110

Outcome: Approved with Qualifications

The request is a one time expense for renters insurance.(\$110) This will enable the individual to secure an apartment. Future payments for renters insurance will be paid through rent subsidy. This will help the individual live in safe environment and allow her to live independently.

Although not specifically mentioned in the Cost Accounting Standards, renters insurance should be an allowable cost of the ISA if it cannot be funded through the rent subsidy program. If the individual qualifies for rent subsidy, it is our expectation that this cost will be funded through the rent subsidy program in an all future years.

Region: WR

Request Date: 07-Nov-05

Response Date: 01-Dec-05

One Time Amount: \$2,500

Outcome: Approved with Qualifications

Giovanni Garcia currently receives Forensic residential supports. Giovanni accepted voluntary residential services since his departure from Riverview Hospital and has welcome and benefit from this support. While Giovanni's overall behavior has been good. His household values have changed. His mother who was committed to his care during the past couple of years has expressed she wants to live on her own. Currently, Giovanni resides with his mother and his sister. The police has been called several times, as the mother and the sister have engaged in domestic violence. Planning Team is also concerned with the mother's free lifestyle, bringing multiple partners into the household very often. Since Giovanni continues to attend night school, he has no money. All belongings in his household belong to his mother's. In addition, his mother's controls and manages all financial entitlements, leaving him with nothing but a small allowance. Apartment set-up request is hope to cover all expenses such as cooking items, towels, bedwares, furniture, and all apartment needs. The Rent start set up is so that the move can indeed happen and is done expeditiously. Request apartment set up cost of \$2500 and security deposit and first months rent.

Furniture. Furniture costs unrelated to the disability of the individual named in the ISA are limited to a maximum one time expense of \$1000 for setting up an apartment. One time set up for an apartment is limited to \$1000. We approved the first months rent and the security deposit.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 60 of 74

BudgetCategory

Summary Rationale of Request

Comments

Room and Board

Region: WR

Request Date: 29-Oct-04

Response Date: 01-Nov-04

One Time Amount: \$900

Outcome: Approved

Temporary lodging for two weeks while arrangement's for the individual's permanent residence are finalized.

Region: WR

Request Date: 01-Oct-05

Response Date: 05-Oct-05

One Time Amount: \$3,200

Outcome: Disapproval

Trash Removal, \$350.00 - Electricity \$127.00 - Home heating oil \$1500.00, Car Taxes \$350.00, Southern Ct Gas \$250.00 Aquarion Water \$332.00 Car Maintenance \$230.00 One time major engine repair \$3, 200.00 (This may have been approved already but the funds were not paid out) John is a 55-year-old man who has expenses that he can't afford to pay. If it weren't for his sister helping him out with in kind supports and financially he would be homeless and jobless. John lives in a remote part of Fairfield that doesn't provide public transportation. He lives in his deceased parents house that in need of repair. He is competitively employed at Stop and Shop in Fairfield. He doesn't make enough to make enough money to maker ends meet. His sister and sponsoring family member Doris Bulduc, contributes a great deal of her time and money helping her brother get by. The long-term plan is for John to move into senior housing within walking distance to his work. He is on the waiting list and is in the process of getting the necessary medical documents to qualify. But until this can happen we would like to have the approval to utilize his funds to pay for these items. By doing so we can maintain his health and safety in his home by assuring he has adequate heat, power, water, and refuse removal. These funds will also make it possible for him to maintain his access to transportation in order to maintain his employment and his meaningful contribution to his community. By assisting John in this manner we provide a much-needed safety net to assure his health, safety and independence while he lives in his family home. When he moves into the senior housing these funds will be reallocated to address other needs at that time.

Thereapeutic Equipment

Region: NR

Request Date: 20-Nov-05

Response Date: 02-Dec-05

One Time Amount: \$0

Outcome: Approved

The family has identified the need to install a stair glide in their home for their daughter who needs total care. The stair glide will assist Marie's caregivers (parents and nursing staff) in safely bringing her upstairs where her bedroom is located. Attached are 3 bids that the family has secured from different vendors. Their preference is to contract with Pelton's Home Health Care Center.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 61 of 74

BudgetCategory

Summary Rationale of Request

Comments

Therapeutic Equipment

Region: NR

Request Date: 03-Nov-05

Response Date: 21-Nov-05

One Time Amount: \$3,500

Outcome: Approved

The family has identified the need to install a stair glide in their home for their daughter who needs total care. The stair glide will assist Marie's caregivers (parents and nursing staff) in safely bringing her upstairs where her bedroom is located. Attached are 3 bids that the family has secured from different vendors. Their preference is to contract with Pelton's Home Health Care Center.

Region: NR

Request Date: 24-Jun-03

Response Date: 07-Oct-03

One Time Amount: \$800

Outcome: Approved with Qualifications

Individual requesting a laptop computer to assist with post secondary education, communication, development of social independence, and increased confidence. Her high school teacher has recommended a computer and a Co: Writer 400 software program to help her reach the stated goals. Individual has articulation difficulties that results in her holding back from initiating conversation and reaching out to others. The individual is a recent graduate.

The documentation supports the purchase of a computer as therapeutic equipment. The allowable range of rates for a base model desktop or laptop computer is between \$600 to \$800. If the individual wants a fully funded computer, this range should cover it. If they want a higher end model, then this will fund a portion of the cost. This is only applicable when the purchase of a computer meets the requirements in the cost standards paragraph #9, computers and software, and paragraph #17-therapeutic equipment.

Region: WR

Request Date: 02-Feb-04

Response Date: 09-Feb-04

One Time Amount: \$800

Outcome: Approved with Qualifications

The request is for a computer and software. The individual is unemployed and wants to develop computer skills to increase his chances for employment.

The request was approved for a computer up to \$800, the allowable amount for a computer. The software needs to be recommended by a licensed professional, vocational rehabilitation counselor or an occupational therapist.

Region: WR

Request Date: 07-Jan-04

Response Date: 16-Jan-04

One Time Amount: \$800

Outcome: Approved with Qualifications

The individual's therapist recommended several items as mandatory components of his treatment plan. This evaluation was done by his long-term therapist. She is recommending regular exercise and gym training as part of both relaxation and relapse prevention therapy. It is recommended that he has staff support. Computer equipment and therapeutic programs are being recommended for relapse prevention, academic skill enhancement, and social skill enhancement. This request is for \$1200 for a one time purchase of a computer, \$600 per year for an internet provider, \$1000 for computer software, and \$1300 for two gym memberships.

The ISA Cost Accounting Standards state that computers and computer software, related to the individual's disability, should be purchased as therapeutic equipment and must be recommended by a licensed professional. The approved "rate" for a computer funded by an ISA is \$600-\$800. The computer software must be recommended by a licensed professional and documentation must be on file as backup to the purchase. The request for the ISA to fund the internet connection in the home is not approved, as this is a utility cost and considered room and board. To remain consistent with other approvals given, the ISA should only fund the individual's gym membership. The staff member should be allowed to accompany the individual for free under the American's with Disability Act.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 62 of 74

BudgetCategory

Summary Rationale of Request

Comments

Therapeutic Equipment

Region: WR

Request Date: 21-Jul-04

Response Date: 01-Aug-04

One Time Amount: \$549

Outcome: Approved

The purchase of a personal homecomputer for the individual is consistent with the Vision statement of the current year's Self-determination Plan. The statement reads as follows: The expectation is that the present support plan will become more vocationally oriented with an emphasis on developing supported work experience consistent with his needs. The plan will build on his previous success in recreational community experience, but there will now be a more structured content with the goal of developing his skills for employment. Work on literacy and basic computer skills will continue, together with computer practice. It will be helpful for the purpose to obtain a personal home computer through purchase by one-time grant. He is a young adult with mild mental retardation and severe intractable seizure disorder. The intensity and frequency of his complex partial seizures make it impractical for him to be served by most vocational support programs in the community. Furthermore, sheltered employment is also not an option because he and his family resist the stigma of a congregate program. The alternative has been to utilize his individual support agreement in a flexible manner to provide as much vocational content as possible. This content has taken the form of math and literacy instruction utilizing various workbooks and reading materials as well as regular keyboarding practice at the provider agency's office location (the provider for the agreement is Education Connection). He has been encouraged to maintain a written journal of his daily activities. The provision of a personal home computer will further his progress by enabling him to practice at home in his leisure time. The funds for this purchase have already been dedicated in a line item of the current agreement labeled, "Community Experience."

Equipment that is directly related to the individual's disability and does not have another funding source is allowable to the extent the equipment is included in the budget that supports the ISA and the equipment is under the physical control of the individual. Physical control means in their residence or other locations where the individual has access to the equipment and access and use of the equipment is limited and restricted to use only by the individual named in the ISA. Documentation must be available to disclose that the equipment, and/or materials and supplies is not funded by other sources.

Transportation

Region:

Request Date: 24-Apr-04

Response Date: 03-May-04

One Time Amount: \$8,830

Outcome: Approved

The family is requesting support to modify their van so that they can transport their son safely for his Day program activities. Three estimates are attached and they are interested in the lowest quote. Besides being cheaper, the parts are in stock so the conversion can be done more quickly. The family is not in a financial position to contribute. His health has been deteriorating and it has been more difficult to get him out due to his needing to use his wheelchair more. He has experienced muscle loss in his right hip and buttock which has resulted in a decrease in his ability to ambulate and especially limits his ability to get in and out of the family van safely, they are afraid he will fall while trying to get from the van to the chair. His seizures are more frequent and last longer. He has been seen by the doctor and has had a number of tests and there is no specific reason for his deterioration other than the likelihood that his Tuberous Sclerosis is progressing.

The request is a one time cost related to the individual's disability to support community participation. The van conversion will alleviate safety concerns with transfers from the wheelchair to the van.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 63 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: NR

Request Date: 04-Oct-03

Response Date:

One Time Amount: \$0

Outcome: Approved

Vehicle repairs. Individual uses a wheelchair van for transportation. Family purchased the wheelchair on their own. Family was receiving a Family Grant of \$250.00 per month, but that has been terminated. Family used the \$1,200.00 a year to recover repairs and maintenance of the vehicle. Family has another car that they use to get around, they only use the van for the individual supported by DMR.

Region: NR

Request Date: 08-Jun-04

Response Date: 04-Aug-04

One Time Amount: \$0

Outcome: Approved with Qualifications

A full sized van is necessary to safely transport two (twins) individuals. 1999 Ford Windstar \$255.81 per month. The van would be used for both individual's. The costs for the van were put into on budget to make it easier to track and pay. A large vehicle is necessary to safely transport the twins. The two individual's are very large, and at times present behavioral challenges. A large vehicle is needed in order to provide space between the driver and the controls to the vehicle as the individual's have grabbed the driver, the steering wheel, or the controls while the vehicle was in motion. The vehicle needs to be large enough to carry @ least 5 passengers, as @ least 2 people need to accompany the twins on community trips in case the twins have a behavioral episode. There needs to be enough space to prevent the driver from being impacted by their aggression.

When the lease ends, prior approval is required to securing a new lease. Leasing costs for the individual are allowable when the vehicle is needed due to the disability of the individual, approved under prior approval, costs do not exceed the typical lease expenses for similar vehicles, and the resources are available in the budget. The mileage must be documented and disclose the dates of travel, the number of miles, and the purpose of the travel. Personal use of the vehicle purchased or leased with the ISA will be reimbursed to the State.

Region: NR

Request Date: 18-Jun-04

Response Date: 26-Jul-04

One Time Amount: \$1,000

Outcome: Approved

This request is for vehicle maintenance: 2 tires, fluid changes, tune-up, breaks and rotors, front end alignment, evaluation and fixing problems causing a ticking noise at the front of the van. Resources are in the budget. Access to the community is dependent on accessibility due to this individual's wheelchair restrictions. The family has leased a van, with cost for the lease and insurance in the budget, to allow community accessibility. The family has another vehicle for personal use. The van is used 100% for this individual's use only.

This is an approved request.

Region: NR

Request Date: 01-Nov-04

Response Date: 12-Nov-04

One Time Amount: \$2,500

Outcome: Approved with Qualifications

repairs to wheelchair van used to transport two sisters to all community activities and doctors appointments. The vehicle is a 1995 ford van with a lift. The vehicle was paid for through the ISA. The two sisters live with their mother who does not drive. Hired staff provide the transportation. Repairs include; recondition the wheel chair lift, install side assist handles, refurbish wheel chair tie downs, repair buckled floor, repair broken register, tune up, tires, front end alignment. The vehicle has 20,000 miles.

Repairs approved with the exception of installing new radio and buffing the vehicle.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 64 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: NR

Request Date: 23-Aug-05

Response Date: 27-Sep-05

One Time Amount: \$0

Outcome: Approved

Carl's wheelchair van is 13 years old and in need of many repairs. For health and safety reasons Carl needs to be transported in a wheelchair van. His mother provides to him a ride to his job with LARC at Hutzler. Van cost is \$36,164.50. Four year lease cost is \$9041.00 \$753.00 per month. See attached brochure on the cost and type of van. Carl is provided a ride by his mother to his day program at Hutzler and the family van is 13 years old and in need of many repairs. With the repairs added the van will not last. The front end is beginning to rot off and it is in need of new tires. The tires alone will cost between \$600 to \$800 dollars to replace. Mrs Tyler would need to purchase this van in the next 3 months to meet Carl's health and safety needs. He cannot be transferred into regular car due to his disabilities. Carl has spinal bifida, cerebral palsy and is wheelchair reliant. His mother is hired to provide this support service, transportation, for Carl Monday through Friday. This is a need that is addressed in his Individual Plan. He needs to be transported by his mother to the day program. Carl relies on this mode of transportation to provide rides to his doctor appointments and other community trips throughout his life. Without a wheelchair van he will not be able to participate in a job or attend any community functions. He will be confined to his home. Carl is enrolled in the HCBW.

Approved for \$753 per month. Review the cost to buy versus the cost to lease. It may be more cost effective to purchase the van. If it is more cost effective to purchase, please contact Mickey Verno (860)418-6140 to review the purchase cost versus the lease costs.

Region: NR

Request Date: 31-Aug-05

Response Date: 27-Sep-05

One Time Amount: \$921

Outcome: Approved

Mrs. Souza is requesting funds be transferred from one line item to another to pay for the deductible for repairs from accident and for brakes for the van. Note: Prior Approval Committee had approved funds for brakes and rotors on 7/26/2004. The van is a 2002 Dodge Grand Caravan, which is used 100 % for Ambers' needs for community access.

The SD Director and Broker may want to discuss the option of including a line item for vehicle repairs.

Region: NR

Request Date: 08-Dec-03

Response Date: 17-Dec-03

One Time Amount: \$0

Outcome: Approved

The request is to lease a van with a lift for the individual's use to provide safe access to the community on a daily basis and attend all medical visits. The individual has multiple disabilities, requires total care, and has numerous medical visits because of her psychiatric disability, several physical disabilities, and MS. She currently is residing with a family who has been providing her care since she was placed by DCF in 1998. She is currently transported only when the male care giver is available, as she needs to be physically lifted and placed into the vehicle. The vehicle is a 2003 Ford C Model, and the lease is for five years. The monthly costs are: \$790 lease payment, \$75 maintenance, \$100 insurance, \$150 gas & oil changes.

The vehicle is a necessary part of the individual's plan, provides a safer method for transporting the individual, and helps to maintain the individual's placement. The cost standards require that miles are documented in a mileage log, and any personal use of the vehicle be reimbursed to the State.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 65 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: NR

Request Date: 07-Jul-04

Response Date: 14-Jul-04

One Time Amount: \$0

Outcome: Approved

Ongoing vehicle costs, which include gas, maintenance and insurance. This individual needs a specialized van in order to accommodate special needs. This van is essential to provide this individual with safe transportation to medical appointments as well as providing access to the community. The parents are purchasing the specialized van, although funding is needed to maintain the expenses involved in keeping the van and having maintained properly.

Region: NR

Request Date: 15-Jul-04

Response Date: 21-Jul-04

One Time Amount: \$0

Outcome: Approved

Van repair/Maintenance- This Maintenance is not covered by any other source and is necessary to Ashlee's existence. This maintenance cost is above what the family can pay from their personal income. This line item has also been in place since the original ISA. The family owns the the van which is adapted for wheelchair accessibility.

The vehicle expense is needed to support the individual to access the community.

Region: NR

Request Date: 06-May-04

Response Date:

One Time Amount: \$0

Outcome: Approved

Total care individual who is wheelchair bound teenager needs van for community accessibility. Lease is \$644.00 per month for 2004 Toyota Sienna van leased through Chase bank. Old van died and family needed new van for community access right away; family shopped around at Lynch Toyota and compared purchase to lease price. There are other children in the family and there are other vehicles in the family. Family states that the van will be utilized exclusively for this individual's transportation needs and family can go together on outings.

To be allowable the travel costs must be documented and disclose the dates of travel, the number of miles, and the purpose of the travel. Personal use of the vehicle purchased or leased with the ISA will be reimbursed to the State.

Region: NR

Request Date: 24-Jan-05

Response Date: 27-Jan-05

One Time Amount: \$250

Outcome: Approved

Insurance policy deductible for van insurance; due to the fact that there was an accident where the van sustained damage by sliding into a snowbank. Amber needs the van for community access; she and her mom were in the van at the time of the accident and were not hurt, as the van was going slow, mom said. The family does not have the money to repair the van.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 66 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: NR

Request Date: 01-Aug-04

Response Date: 12-Aug-04

One Time Amount: \$0

Outcome: Approved with Qualifications

Requested 7/19/2004 The family is currently making payments on a 2001 Ford E-250 wheelchair accessible van. They pay \$713.18 per month for a total of \$8,559. included in this year's breakdown of costs. Payments are made directly to Peoples Bank. There is approximately 25 months remaining on the van loan. The brother and sister are fully dependent on specialized wheelchairs for mobility inside and outside of the home. The use of an accessible wheelchair van allows the family to safely and securely transport both kids to school, to therapeutic programs, and to various doctor/wellness appointments. The van is used solely for the purpose of transporting the two children in their daily routine of activities away from home. The van represents a one-time investment that will be imperative for transporting them throughout their young adult / adult lives.

Prior approval is required before entering into another lease or purchase arrangements. A mileage log should be maintained and any personal mileage should be reimbursed to the State.

Region: NR

Request Date: 25-Jun-04

Response Date: 06-Jul-04

One Time Amount: \$3,695

Outcome: Approved

Family is requesting reimbursement for a wheelchair lift for the family van. The family needed to purchase a new lift for the van immediately. The old one was no longer functional and they had no other means of transporting the individual's safely to their medical appointment and day programs.

Region: NR

Request Date: 16-Jun-04

Response Date: 21-Jun-04

One Time Amount: \$0

Outcome: Approved

Request is for a vehicle lease and insurance. The ISA will continue to provide a wheelchair accessible van so that this individual has access to her community(1995 Ford Windstar). The family does not have another vehicle. The mother does not drive. The individual has natural supports to meet all of her other needs.

The transportation costs for the individual is allowable when the vehicle is needed because of the disability of the individual, and the costs are included in the ISA budget. Transportation has been the primary support needed by this individual for years.

Region: NR

Request Date: 08-Jun-05

Response Date: 24-Jun-05

One Time Amount: \$0

Outcome:

The request is to lease a van for her transportation at home and by her day program. Her day program support is up to 5 days per week. The van would also be used by her parents for community access, recreational activities and shopping. Her day program is dependent on an accessible van. It was determined that it was more economical for the family to acquire one van that with insurance coverage, The day staff could utilize for her day program. Use of the van is necessary as she uses a customized wheelchair, has a trach and uses oxygen. Funds are available within the approved day program allocation. This purchase will allow her to remain living at home and access the community for her individualized day program. The Family researched the cost of the van, purchase versus lease and obtained three quotes.

We have approved the request with the recommendation to purchase the van as this is more cost effective. In reviewing the documentation, the lease costs are much more than the purchase and buy out costs. We recommend to do one of the 36 month purchases with the balloon payment or buyout provision. The costs for these were either \$908.55 per month or \$922.49 per month with a \$21,300 or \$15,000 balloon/buy out, respectively.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 67 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: SR
Request Date: 01-Oct-03
Response Date: 02-Oct-03
One Time Amount: \$0
Outcome: Approved

The request is for Grey Hound bus tickets from New Haven to Wooster MA. A round trip ticket costs \$50. The annual amount is \$300. (six trips per year) The individual was recently re-united with his biological sister, mother and extended family in Wooster MA. He coordinates home visits with his family and can take the bus trip independently. He takes the trips every other month. The relationship with his family is very important to the individual. His future plan includes moving to MA. The visits are giving him an opportunity to get familiar with the neighborhood, community and transit system.

ISA Cost Accounting Standards: travel costs applicable to the individual named in the ISA are allowable to the extent that travel are approved under prior approval, and costs are included in the budget supporting the ISA. This request is reasonable, within the current allocation for the ISA budget, and is to strengthen family relationships.

Region: SR
Request Date: 29-Jan-04
Response Date: 30-Jan-04
One Time Amount: \$0
Outcome: Approved

Monthly vehicle related expenses as follows: Car insurance - \$175.00Maintenance, Mileage \$150.00, Gas \$125.00, Taxes \$ 42.00 The individual receives support for employment and has moved into his own apartment.. As part of his drive to be more independent, he has his own car and uses it to get back and forth to work and to social and recreational events. Providing his own transportation is a great source of pride. This expense represents the entire amount of financial support he receives through an ISA and has been in place for over a year. The emotional impact of driving his own car has reduced his anxiety level so that he no longer requires counseling. He truly feels in control. The funds to support this plan are already allocated.

The costs are reasonable, and the vehicle is an important part of the individual's plan.

Region: SR
Request Date: 08-Jun-04
Response Date: 16-Jun-04
One Time Amount: \$350
Outcome: Approved with Qualifications

This individual is requesting funds for airfare for transportation to go and see family in Michigan. This trip has been paid for in the past through the ISA. Staying in touch with family members is very important to this individual. This individual has a limited income (works as a dishwasher).

Travel cost related to connecting the individual with family members has always been part of the plan. In the past we have approved travel for family relations.

Region: SR
Request Date: 21-Jun-05
Response Date: 13-Jun-05
One Time Amount: \$0
Outcome: Denied

Michelle is diagnosed with M.R., C.P., seizure disorder and spastic paraplegia. She can not be transported in other types of vehicles She is extremely difficult physically, as she can not transfer at all. Her parents use a Hoyer lift at home so that they can transfer without injury (to Michele). Her legs must be elevated at all times, and suffers from bruising and blisters on her legs. Parents are purchasing a 1999 Ford E-150 van equipped with side netry Vangator Lift system.Rideway is the dealer and uses the M & T bank will be financing it.Parents would like to include assistance with this within their enhanced Family Support Budget.

The request to cover the cost of the van is denied. You are allowed to bill for mileage under the IFS waiver. The family would have to log miles traveled specifically for Michelle's needs and submit a mileage log to the Fiscal Intermediary for reimbursement. The mileage reimbursement is .35 per mile

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 68 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: SR

Request Date: 08-Jun-04

Response Date: 16-Jun-04

One Time Amount: \$1,526

Outcome: Approved

Request is for repairs to this individual's wheelchair van. The van is used exclusively to transport individual to and from her day program. Line item has been in budget since the start.

The repairs are necessary to provide accessible transportation for this individual into the community.

Region: SR

Request Date: 18-Apr-05

Response Date: 06-May-05

One Time Amount: \$23,474

Outcome: Approved

Paul lives with his adoptive mother. His provider is looking for a wheelchair van so that Paul can go out into the community while at home. Currently he tends to isolate himself in his bedroom out of boredom and this has led to an increase in SIB. He loves being out in the community so this would be of great benefit to him. The van is equipped with heated cup holders for his formula (Paul is tube-fed) and even has an area for him to lie down for diaper changes. Provider is aware of the restrictions on use as outlined in the cost standards and would document as required. Paul is currently not residentially funded by DMR so this would allow him to remain in his family home for many years to come rather than outside placement. Rather than purchase the vehicle outright it would be financed to allow for staffing support hours to be included in his annualized 620 allotment. The van is a 1998 Chevy Express 1500 Explorer Limited w/ 52,000 miles. We will be applying for a Tech-Loan for assistive technology w/ a 2%-4% interest rate. The interest is not included. But, if this loan were approved, it would exempt them from property taxes.

To be allowable the travel costs must be documented and disclose the dates of travel, the number of miles, and the purpose of the travel. Personal use of the vehicle purchased or leased with the ISA will be reimbursed to the State.

Region: SR

Request Date: 18-Apr-05

Response Date: 06-May-05

One Time Amount: \$23,374

Outcome: Approved

Paul lives with his adoptive mother and her housemate. Het Paul has lived there almost his entire life. His provider is looking for a wheelchair van so that Paul can go out into the community while at home. Currently he tends to isolate himself in his bedroom out of boredom and this has led to an increase in SIB. He loves ar rides and being out in the community so this would be of great benefit to him. The van is equipped with heated cup holders for his formula (he is tube-fed) and even has an area for him to lie down for diaper changes. Provider has shopped around and this is the best deal. See attached information. Provider is aware of the restrictions on use as outlined in the cost standards and would document as required. He is currently not residentially funded by DMR so this would allow him to remain in his family home for many years to come rather than outside placement. Rather than purchase the vehicle outright it would be financed to allow for staffing support hours to be included in his annualized 620 allotment. The van is a 1998 Chevy Express 1500 Explorer Limited w/ 52,000 miles. We will be applying for a Tech-Loan for assistive technology w/ a 2%-4% interest rate. The interest is not included. But, if this loan were approved, it would exempt them from property taxes.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 69 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: SR

Request Date: 14-Jul-05

Response Date: 16-Jul-05

One Time Amount: \$1,600

Outcome: Approved

Amasai is a young man who is total care and his mother is disabled herself and not able to do any of his care. She used an au pair agency this past year and has decided not to continue with the agency because they could not guarantee her a male. Her son is now over 100 pounds and it is difficult for the young women to do the lifting necessary (even with the lifts, he still needs to be rolled and lifted somewhat). It is in the best interest of Amasai to have a male care taker to keep him safe and to maintain his health. Amasai's care requires specific training which will be provided to this staff by the exiting primary staff and Amasai's mother. He will go through the background checks and all the pertinent training. He is a live in staff which is required by the family's housing assistance program. Air fare was included in the fees for the au pair agency last year.

The request is approved on the condition that all qualifications for pre employments and prior to working alone are met.

Region: WR

Request Date: 03-Oct-05

Response Date: 15-Oct-05

One Time Amount: \$1,500

Outcome: Disapproval

partially fund the purchase of a car which would allow Michael to have transportation to and from his job in food services at Teikyo Post University where he works evenings. Michael is individually employed in the community at a job that was found for him by WARC. Michael has a driver's licence, but no car. Michael's job in the cafeteria at Teikyo Post College requires him to work until approximately 9:00pm each night. WARC provides transportation to work but not home. Michael's mother, with whom he lives, works until 10-11pm and cannot pick him up. There are no other family members to assist with this. This situation is putting Michael's job in jeopardy. The purchase of a car would allow Michael to continue to be independently employed in the community.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 70 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: WR

Request Date: 09-Nov-05

Response Date: 11-Nov-05

One Time Amount: \$40

Outcome: Approved

Jonathan is a DCF Age out who is new to our system. He currently has a budget for both day and res. The residential portion is in tact but the vocational piece is still a work in progress. Jonathan was introduced to an agency a few months ago, at which point a situational assessment was done. During the course of that assessment, Jonathan showed up at the job site with a car that he drove there. The situation was handled through the staff, the vocational agency and most importantly through the DMR legal department. Jonathan has been counseled the legal ramifications of driving without a license and without insurance. He gains access to these vehicles at times (unbeknownst to those who support him) and if /when he is confronted, he states that he'll get a license if we pay for it. He was provided with the driver's education book to study from and he said that he feels he is ready to take the test. Our hopes are to get him his license to not only remain legal, but to promote his self esteem. Jonathan agrees to get his license and in turn we will help him budget his personal money to pay for a registration fee and insurance. Using the DMR budget to pay for this first step will give him assistance on the first step towards this goal. Needless to say, those who support Jonathan are quite concerned about some of choices he has made and are working to remedy the situation as best as possible without losing Jonathan's trust. If he refuses services from us, he will most likely be more at risk in the community.

Region: WR

Request Date: 29-Sep-03

Response Date: 01-Oct-03

One Time Amount: \$4,800

Outcome: Approved with Qualifications

The request is to purchase a used 1994 Ford Aerostar that has been converted for wheelchair accessibility for \$4800. The individuals family member has located the van through an estate sale. The van has 42000 miles. This will enable the individual to participate in the community on regular basis. The resources are available in the current ISA. The individuals mother is a single care giver who has her own vehicle. The converted van will be used solely for the individual. This will allow staff to support the individual in the community on regular basis and provide a safe transportation arrangement. The costs are included in the ISA.

In reviewing the cost accounting standards, the vehicle purchase is allowable to the extent the vehicle is needed due to the disability of the individual and costs are included in the budget supporting the ISA. Allowable costs are not to exceed typical lease/purchase price of wheelchair vans and only when primary use of the van is for the individual with the disability named in the ISA. To be allowable the travel costs must be documented and disclose the dates of travel, number of miles, and purpose of the travel-with personal use being reimbursed to the State. This purchase is reasonable with the qualification that the requirements for vehicle logs be followed and any personal mileage be reimbursed to the State. The cost of the van is close to published values for this make, model and year-with the value of the conversion and low miles taken into consideration.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 71 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: WR

Request Date: 09-Nov-05

Response Date: 01-Dec-05

One Time Amount: \$0

Outcome: Approved with Qualifications

The family would like to use the \$10,000.00 as a down payment on a wheelchair van with a lift, to safely transport Linda. Linda requires total care and assistance to have her most basic needs met, as a result, her parents used the first \$10,000.00 for home modifications that would allow for Linda's bedroom ceiling to be domered so it would accommodate a barrier free lift system. Linda's mother is in her 60's and her Father is in her 70's and lifting Linda has become an issue. The family would like to use the next \$10,000.00 as a down payment for a new wheelchair van with lift for Linda. The Bowden's would prefer to buy a van instead of leasing one, but may consider leasing if it is the only option. Transportation continues to be an issue. Linda is the only family member who lives in the home that will benefit from the purchase of a wheelchair van.

We have approved up to \$10,000 for the cost of conversion of a vehicle to make it accessible. Bids must be submitted for the conversion costs. Alterations made to a vehicle which is the individual's primary means of transportation, when such modifications are necessary to improve the individual's independence and inclusion in the community, and to avoid institutionalization. The vehicle may be owned by the individual, a family member with whom the individual lives or has consistent and on-going contact, or a non-relative who provides primary long-term support to the individual and is not a paid provider of such services. The benefit package is limited to a maximum of \$10,000 within the three year period per recipient for vehicle modifications. Once this cap is reached, \$300 per individual per year may be allowable for repair, replacement or additional modification with prior approval. Examples include: wheelchair lifts or tie This service explicitly excludes: 1) adaptations or improvements to the vehicle that are of general utility, and are not of direct medical or remedial benefit of the individual; 2) purchase or lease of a vehicle; 3) regular scheduled upkeep and maintenance of a vehicle except upkeep and maintenance

Region: WR

Request Date: 30-Jun-04

Response Date: 06-Jul-04

One Time Amount: \$0

Outcome: Approved

Ongoing vehicle maintenance to insure safe transportation to maintain employment. This individual lives in a remote area of the State, miles from the town center where there is access to public transportation. Unable to access public transportation from the home. Relies on a 1994 Ford Taurus for transportation to and from place of employment, which is the only source of income. The automobile represents a lifeline to work and services that are needed to survive independently within his community. Without the ability to get to and from work, this individual would most likely become homeless.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 72 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: WR

Request Date: 10-Aug-05

Response Date: 15-Aug-05

One Time Amount: \$400

Outcome: Approved with Qualifications

one time fee to pay for staff transportation costs (utilizing current funds in their budgets. Christopher Morris and his roommates are planning a trip to Florida. They have fundraised in the amount of \$630. This fundraising money along with their entitlement money pays for their portion of the hotel and airfare. However, all three residents require staff to travel with them. The TOTAL cost of the staff airline tickets is \$ 376. The request is for \$400 in the event the price changes. The residents of this home (Christopher Morris, Tommy Palko and Peter Flaucher) have taken day trips and some overnight trips in the past and have enjoyed themselves tremendously. Each budget has the maximum \$ 1200 allotment for recreation and community expenses but the concern is that if that is used to pay the staff airline tickets, they will fall short in that line item before the fiscal year is over. The budgets all have a slight surplus in staff wages that can be used. The request is to move \$400 from one budget or (\$133 from three separate budgets) to the "transportation" line item in order to pay for the staff expenses. This particular residence has been very conscious of accessing resources outside of DMR to meet their needs. At this point they are unable to secure the staff airline ticket costs through another source and are requesting to use their ISA/budgets to cover it instead.

Approved with the condition that the money has to come from the \$1200 recreation line item in the budget.

Region: WR

Request Date: 29-Mar-05

Response Date: 05-Apr-05

One Time Amount: \$382

Outcome: Denied

3 airline tickets to Florida to visit his grandmother. The tickets are for his mother, his primary care taker and his father who is also dependent on his mother.

Out of state travel to visit relatives is not an allowable an expense.

Region: WR

Request Date: 09-Jun-04

Response Date: 16-Jun-04

One Time Amount: \$0

Outcome: Approved

A wheelchair van rental is necessary for leisure use and doctor appointments. Wheelchair Get-Aways located in Brookfield, CT provides this service for this individual. There is a transportation line item of \$3,769. This month there was a need to rent a van for several planned family functions & doctors appointments. The plan is to rent the van for 1 month-and approximately 2 weeks. A wheelchair van is the safest mode to provide transportation for this individual due to her disabilities Retts Syndrome and MR. Individual is wheelchair reliant and cannot be transferred into a regular car.

Transportation costs for wheelchair vans are allowable when the primary use of the van is for the person with the disability named in the ISA.

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 73 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: WR

Request Date: 13-Aug-04

Response Date: 01-Sep-04

One Time Amount: \$5,346

Outcome: Approved

The present request is for a one-time funds in the amount of \$5,346.25 to pay for necessary repairs and insurance on the wheelchair accessible 1990 Ford Econoline van which is owned by the individual's father, for the purpose of transportation. To keep the van on roadworthy condition, the needed repairs involve rebuilding the transmission and the front end and replacing the oil pan. The requested amount for the repairs is based on the estimate attached, including parts and labor plus tax, from the CT Auto Repair Service of New Milford, Inc., the company which has maintained the van for the family since the vehicle was purchased. To the repair total of \$4,561.25, I have added a margin of plus \$300 in case labor for the actual work is more than anticipated. I am including in the total insurance cost of \$480.00 for one year. Any unexpended balance from the present one-time grant will be reallocated to personal support wages for the individual's in-home care. The total requested amount of one-time funds is \$5,346.25. The justification for the present request is that the wheelchair accessible vehicle is absolutely essential for the individual's health and safety. He is an adjudicated youth of 19 who is neurologically impaired as a result of cerebral palsy; has mental retardation in the severe range and is blind within the legal criteria. In consequence of his physical and mental impairments, he requires total physical care with all activities of daily living. Transfers require physically lifting and pivoting. Within the family home his care is facilitated by power lifting devices on ceiling mounted tracks bedroom and bathroom. However loading him into a vehicle is unsafe unless the vehicle is equipped with a boarding ramp. Except for school, he is homebound whenever his family's wheelchair accessible van is inoperable. He is prevented from accessing the community for medical appointments and for other purposes including respite admissions. Furthermore the van will be utilized for visitation purposes after program placement has been effected, helping to maintain family involvement.

Vehicle repairs and vehicle modifications require prior approval. The repairs to the van will ensure that the individual's needs are met.

Region: WR

Request Date: 19-Apr-05

Response Date: 10-May-05

One Time Amount: \$0

Outcome: Approved

Magaly has extensive medical concerns (Sturges Webber Syndrome) and uses a wheelchair at all times during awake hours. She uses a G-tube which is attached to a feeding pump twenty-four hours a day. Magaly also needs to use a suction pump 20-25 times a day, including when she is in a vehicle. Having a van equipped with a lift and space for an additional person to sit directly next to her to monitor her during seizures as well as being able to use the suction pump allows her access to the community while ensuring that her medical needs are met. Her day program is currently run from her home. The family is requesting a renewal of a van lease that is currently covered in her ISA budget. Company's name is Accessible Van and Mobility (Manager's name is Mark Boltax @ 914-835-8267) 2005 Dodge Grand Caravan Power Lift 5 year lease Payment range is \$735-\$750/mo..

Budget Category Report For Prior Approvals

Tuesday, December 06, 2005

Page 74 of 74

BudgetCategory

Summary Rationale of Request

Comments

Transportation

Region: WR

Request Date: 07-Oct-03

Response Date: 23-Oct-03

One Time Amount: \$0

Outcome: Approved

This request is for a vehicle Lease at \$490 per month for a 2001 Ford Econoline (Lease from June, 2001 through June 2005, vehicle insurance at \$130 per month, vehicle maintenance for oil changes, brakes, repairs, etc, at \$600, and gas at \$1600 a year. All of these costs are currently paid for through the ISA. Gas is purchased through one gas station and is invoiced for the month. Transportation in a van is needed to implement the individual's residential and day program. The individual has intensive 24 hour needs that are provided by a combination of supports, some of which are covered by the ISA budget and the remaining hours of support are provided by the caretaker/guardian. The van is needed to address safety concerns for both individual and the staff. The individual presents with some very challenging behaviors which often emerge in the vehicle. The individual has a history of attacking the driver, grabbing the gear shift, attempting to reach the steering wheel, and exiting the vehicle when it is in motion. What has proven to be most effective is to have the individual sit far enough away from the driver so as not to cause injury to anyone. A regular sized vehicle such as a sedan would be too dangerous. For several years now, the ISA has been supporting the cost of a lease to provide transportation for a wrap around res/voc program in the home. The vehicle is integral to maintaining the individual in her home and to invest time in her community. If the guardian/caretaker were to be responsible for the costs associated with the lease, she would not be in the financial position to be able to do so. This request took additional time for to review, however the supports continued to be provided.

ISA Cost Standards allow vehicle purchase/leasing provided the vehicle is needed due to individual's disability, and costs are budgeted for. The van is an integral part of the individual's support plan, and is reasonable in cost. ISA Cost Standards do not specifically mention gas for vehicles, however, since the lease cost is being funded through the ISA and the vehicle is only being used for the ISA individual, it is reasonable for the ISA to fund the gas purchases as well. ISA Cost Standards require prior approval for vehicle maintenance. Since the lease cost is being funded through the ISA, and the vehicle is only being used for the ISA individual, it is reasonable for the ISA to fund the maintenance costs as well. The costs for the lease, insurance, gas and maintenance are approved. Before another vehicle is purchased/leased, the lease buyout should be considered to purchase this van, and the cost benefit of a lease versus purchase should be done to determine how the next vehicle should be obtained. We recommend that a mileage log be maintained to record travel in the van and the usage for the individual. We would also remind individual that personal use of the vehicle will be reimbursed to the State.