

Recovery Assistant

Definition

Recovery Assistant - A flexible range of supportive assistance provided face-to-face in accordance with a Waiver Recovery Plan that enables a participant to maintain a home/apartment, encourages the use of existing natural supports, and fosters involvement in social and community activities. Service activities include: performing household tasks, providing instructive assistance, or cuing to prompt the participant to carry out tasks (e.g., meal preparation; routine household chores, cleaning, laundry, shopping, and bill-paying; and participation in social and recreational activities), and; providing supportive companionship. The Recovery Assistant may also provide instruction or cuing to prompt the participant to dress appropriately and perform basic hygiene functions; supportive assistance and supervision of the participant, and; short-term relief in the home for a participant who is unable to care for himself/herself when the primary caregiver is absent or in need of relief.

Provider Qualifications/Conditions for Participation (Both Individual and Agency-Based)

A Recovery Assistant shall:

- Be at least 18 yrs old;
- Possess at least a high school diploma or GED;
- Possess a valid Connecticut driver's license; and
- Be registered with the Department of Mental Health and Addiction Services (DMHAS) as having completed an approved Recovery Assistant training program and meet any continuing education and/or training requirements set by DMHAS.

Training requirement: Training programs will address abilities to:

- Follow instructions given by the participant or the participant's conservator;
- Report changes in the participant's condition or needs;
- Maintain confidentiality;
- Meet the participant's needs as delineated in the waiver Recovery Plan;
- Implement cognitive and behavioral strategies;
- Function as a member of an interdisciplinary team;
- Respond to fire and emergency situations;
- Accept supervision in a manner prescribed by the department or its designated agent;
- Maintain accurate, complete and timely records that meet Medicaid requirements;
- Use crisis intervention and de-escalation techniques; and
- Provide services in a respectful, culturally competent manner.

Unit of Service: 15 Minutes

Rate:

- \$5.65 (per 15 minute unit for agency-based Recovery Assistant)
- \$3.34 (per 15 minute unit for individual Recovery Assistant, i.e., not agency based)

Covered services

Recovery Assistant services of at least 15-minutes duration provided to the participant in his/her home and in other community settings. These services include:

- (1) Performing the following tasks if the participant (by reason of physical or psychiatric disability) is unable to perform them, or assisting, or cueing the participant to perform them:
 - (A) Meal planning and preparation, shopping, housekeeping (e.g., changing linens, washing dishes, vacuuming/dusting, laundry, mending clothing repairs), basic household tasks (e.g., regulating home temperature, storing food appropriately, resolving issues about bill paying).
 - (B) Dressing, personal grooming and hygiene (e.g., bathing, dressing, and oral care).
 - (C) Appropriate use of emergency medical services.
- (2) Assisting or cueing the participant to perform or become engaged in:
 - (A) Family, social, and recreational activities.
 - (B) Appropriate use of natural community supports (e.g., social clubs, faith-based supports).
 - (C) Appropriate use of routine medical/dental services.
 - (D) Use of medications as prescribed, including self administration of medications.
 - (E) Healthy habits (e.g., healthy diet, exercise, and behaviors designed to alleviate stress).
 - (F) Fulfillment of personal commitments, and adherence to scheduled appointments/meetings (e.g., clinical, vocational, educational, and judicial/court).

- (3) Assisting or cueing the participant to avoid:
 - (A) Risky behaviors (e.g., unprotected sex, smoking/excessive use of tobacco products, unsafe driving/driving without seatbelt, unsafe relationships, criminal activities).
 - (B) Substance abuse.
 - (C) Overspending.
 - (D) Unnecessary conflicts.
- (4) Supportive and problem solving-oriented discussions with the participant.
- (5) Establishing and maintaining a helpful, supportive, companionship relationship with the participant that involves such activities as:
 - (A) Escorting the participant to necessary medical, dental, or personal business appointments;
 - (B) Reading to or for the participant;
 - (C) Engaging in or discussing recreational, hobby, or sport-related activities;
- (6) Other activities directed at reducing disability, restoring participant functioning and achieving independent participation in social, interpersonal, family, or community activities and full community re-integration and independence;
- (7) Participation in waiver Recovery Plan development and quarterly Recovery Plan update meetings, if requested by the DMHAS Support Coordinator; and
- (8) Travel with a participant when the Recovery Assistant is also engaged in a qualifying waiver service activity.

Limitations

- (1) Coverage of Recovery Assistant services shall be subject to the following limitations:
- (2) Recovery Assistant services are subject to service volume (number of ¼ hours service units per day and/or week) and duration (number of months or specified service end date) limits established in the waiver Recovery Plan approved by DMHAS and DSS. The departments or their designee will enact these limits;
- (3) Recovery Assistant services shall be based on the waiver Recovery Plan;

- (4) A claim for reimbursement may be submitted for the qualifying waiver services activities of only one Recovery Assistant for services to a participant during a specific time period (i.e., billable unit of time);
- (5) Individuals receiving residential rehabilitation services paid for by Medicaid in a group home are excluded from Recovery Assistant services, except during a brief transition phase to a lower level of care (not to exceed 30 days);
- (6) The department shall not pay for:
 - (A) Time spent by the provider solely for the purpose of transporting participants;
 - (B) Programs, services or components of services that are of an unproven, experimental, cosmetic or research nature;
 - (C) Programs, services or components of services that do not relate to the participant's diagnosis, symptoms, functional limitations or medical history;
 - (D) Programs, services or components of services that are not included in the fee established by the department;
 - (E) Services or components of services provided solely for educational or vocational purposes;
 - (F) Waiver services provided by a relative of the participant; and
 - (G) Costs associated with room and board for participants.

Non-billable Activities

The following activities are not billable, but have been factored into payment rates:

- (1) Day-to-day monitoring regarding the participants health and welfare and problem solving to address concerns;
- (2) Communication and coordination with the DMHAS Support Coordinator, and with other service providers to relay information germane to the participant's needs and continued recovery;
- (3) Telephone contact with the participant;
- (4) Telephone contact with the department or its designated agent for the purpose of requesting or reviewing authorization of services;
- (5) Completion of progress notes or billing documentation;

- (6) Individual or group supervision, routine case reviews and rounds, ad hoc consultation with supervisors and discussion or consultation among recovery team members, including for the purpose of treatment planning;
- (7) No shows, missed or cancelled appointments, and visits to the participant when the participant is unavailable;
- (8) Recovery Assistant services of less than fifteen minutes duration for recovery procedures whose billing codes are defined in 15-minute increments; and
- (9) Time spent engaged in activities required by a credentialing, certification or oversight entity such as gathering and submitting care plan, service data or other information.