

CDCS

(Consumer Directed Community Supports)

Expenditure Guide – Person Driven Support

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Consumer Directed Community Supports

Consumer Directed Community Supports (CDCS) is a Home and Community Based (HCBS) waiver and Alternative Care Grant (AC) program option that offers participants a person-centered approach allowing more flexibility and responsibility for directing their own services and supports, including hiring and managing direct care staff. It may include services, supports, and/or goods currently available through licensed waivers, as well as additional services/goods that provide needed unlicensed support to the participant. There are specific requirements for all services, supports, and/or goods that are available through HCBC waivers and AC grants, including CDCS.

Services under the CDCS option, offer support, care, and assistance to participant(s) to allow them to live an inclusive life in their community. Supports are designed to build, strengthen, or maintain the informal networks of community supports for the participants. It allows the participant to purchase services that will best meet their needs from people they have selected. The participant identifies staff qualifications and training requirements. All services must be paid within the participant's CDCS resource allocation. Approval of certain services or goods may be denied if health, safety, and/or welfare concerns are not met, funds are misused, or criteria is not met.

All CDCS waiver fund expenditures must be prior approved. **New services, supports, or goods are not allowed to be added to the Community Support Plan (CSP) 30 days prior to the end of the participant's annual service plan date.**

CDCS Annual Resource Allocation

People receiving HCBS waiver services or Alternative Care (AC) services requesting the CDCS option will be notified by their case manager of their resource allocation. The resource allocation is determined by an annual MnCHOICES assessment which includes the Long-Term Care Consultation (LTCC) and Developmental Disabilities (DD) screening assessments. CDCS allocations are based on a yearly plan (365 days) – the resource allocation will be pro-rated if the plan runs less than one year. Funds will not be carried over from year to year. Goods and Services will not be authorized without a signed and completed community support plan.

Consumer Directed Community Supports

Service Criteria for Allowable Expenditures

The purchase of goods and services must meet all of the following criteria:

1. Must be required to meet the identified needs and outcomes in the person's community support plan and assures the health, safety, and welfare of the person; **AND**
2. Goods and services collectively provide a feasible alternative to an institution; **AND**

3. Be the least costly alternative that reasonably meets the person's identified needs; **AND**
4. Be for the sole benefit of the person

If all the above criteria are met, goods and services are appropriate purchases when they are reasonably necessary to meet the person's outcomes including:

- Maintain the ability of the person to remain in the community
- Enhance community inclusion and family involvement
- Develop or maintain personal, social, physical, or work-related skills
- Lessen the need for formal supports
- Increase independence of the individual
- Increase the ability of unpaid family members and friends to receive training and education needed to provide support

Allowable Expenditures

Consumer Directed Community Supports (CDCS) may include traditional goods and services provided by the waiver as well as alternatives that support people. There are four general categories of services which may be billed:

- Personal Assistance
- Treatment and Training
- Environmental Modifications and Equipment Guidelines
- Self-Direction Support Activities

Additionally, the following goods and services may also be included in the person's budget as long as they meet the criteria and fit into the above categories:

- Goods and services that augment state plan services or provide alternatives to waiver or state plan services
- Therapies, special diets, and behavioral supports not otherwise available through the state plan that mitigate the person's disability when prescribed by a physician who is enrolled as a Minnesota Health Care Programs (MHCP) provider
- Expenses related to the development and implementation of the community support plan
- Costs incurred to manage the person's budget
- Fitness and exercise programs for ADULTS only

Unallowable Expenditures

Goods and services that shall not be purchased within the person's budget are:

- Services provided to people living in licensed foster care settings, settings licensed by DHS or MDH, or registered as housing with services establishment
- Services covered by the state plan, Medicare, or other liable third parties including education, home based schooling, and vocational services

- Services, goods, or supports provided to or benefiting people other than the person who is using CDCS
- Any fees incurred by the individual such as MHCP fees and co-pays, attorney costs, or costs related to advocate agencies; with the exception of services provided as flexible case management
- Insurance except for insurance costs related to employee coverage
- Room and board and personal items that are not related to the disability
- Home modifications that add any square footage. **Exception to increase the square footage:** the increase to square footage of a home when the increase is necessary to build or modify a wheelchair accessible bathroom
- Home modifications for a residence other than the primary residence of the person or, in the event of a minor with parents not living together, the primary residences of the parents
- Expenses for travel, lodging, or meals related to training the person or their representative or paid or unpaid caregivers
- Services provided to or by individuals, representatives, providers, or caregivers that have, at any time, been assigned to the Primary Care Utilization and Review Program
- Experimental treatments
- Membership dues or costs except for fitness and exercise programs for ADULTS ONLY
- Vacation expenses other than the cost of direct support services
- Vehicle maintenance; does not include maintenance to or modifications related to the disability
- Tickets and related costs to attend sporting or other recreational events
- Animals and their related costs
- Over-the-counter medications and dietary supplements
- Medication prescriptions; including compounds and solutions
- Warranties
- Medical marijuana
- Exercise equipment for adults and children

CDCS Expenditures by Category

ALL expenditures require a Community Support Plan (CSP) approved by Washington County. Everything purchased **must be related to the disability and outside of what is typical age-appropriate parenting responsibility or typical spousal responsibility**. All services and items should be the least costly alternative or may have suggested limits. Limits are included as a guide to what is considered “customary” and “fiscally responsible”. Requested amounts beyond what is suggested will require written explanation in the CSP and/or an evaluation:

- Personal Assistance
- Treatment and Training
- Environmental Modifications and Equipment Guidelines

- Self-Direction Support Activities
- Unallowed Expenses

Personal Assistance

This service category allows for supports and services when the person needs someone to do things for them or needs reminders to do things such as self-care tasks, chores, communication, supervision, and community integration. A paid parent of a minor or spouse must go in this category.

- **Camp:** (Used as caregiver relief.) Camp providing supervision to a person in order to give the primary caregiver a needed break. Must be able to maintain health and safety and meet identified needs.
 - Disability and non-disability specific (e.g. YMCA camp, church camp) day and overnight camps are allowed.

Camps that are more about skill building are approved but should be listed in the Treatment and Training Section.

- **Day Care:** Costs above and beyond typical parental responsibility are fundable. For children under 12, the difference between the cost of regular day care and specialized day care due to disability is fundable. Day care may be fundable for children ages 12 and over if needed.
- **Homemaker:** Washington County's suggested CDCS homemaking guideline for children on waiver is up to \$4,000 annually when seen as necessary. In general, maintaining a clean home, including the completion of indoor and outdoor maintenance, are activities that parents of minor children (or homeowners) would ordinarily perform or are responsible to perform. For these reasons, many CDCS support plans for minor children do not include these types of services. Because this request is evaluated on a case-by-case basis, it is the county's responsibility to evaluate the need. Prior to approving 'homemaker-like' services as part of a minor's CDCS support plan, the county must evaluate the minor child's assessed and unique needs, including the overall capacity of the primary caregiver and composition of the household in terms of maintaining a safe and sanitary environment for a child that is medically fragile (above and beyond a child without a disability). Depending on the circumstances of a household/family, the county could approve or deny these types of services for minor participants. If the county determines the request meets the criteria for approval as well as a documented need in MnCHOICES assessment, the county will approve frequency of support needed based on the needs of the individual participant.
- **Nursing staff:** Staff person must be a Licensed Practical Nurse (LPN) or Registered Nurse (RN). May be employed through an agency or an independent contractor. Must have a copy of professional license. The need for nursing services must be outlined in the CSP

along with identified job duties. Wages will be established based on the state set rate and customary wage for similar support.

- **Respite Care – In Home:**
 - Family members who reside in the person’s home may not provide daily respite unless the family member is NOT the primary caregiver AND the primary caregiver is away overnight.
 - Respite services are NOT tax-exempt.
 - Unlicensed individuals providing respite who are being paid through a Financial Management System (FMS) must be paid hourly.
 - All time paid must be documented to be submitted to the FMS for payment.
- **Respite Care – Out of Home:**
 - Unlicensed individuals providing out-of-home respite may be paid hourly. A daily rate may be used when providing 10 or more hours of respite per day. CHECK WITH YOUR FMS IN REGARDS TO WAGE AND LABOR LAW POLICIES
 - All time paid must be documented to be submitted to the FMS for payment.
 - Community Alternative Care Waiver (CAC): Out-of-home respite must be provided by registered nurses.
- **Support Staff – Formal for Personal Care (PCA Agency):** The staff person must meet the requirements in state law and meet the qualifications described in the CSP.
- **Support Staff – Informal:** Is fundable and is limited to 40 hours a week per person and meets qualifications described in the CSP. Wages must fall within a customary rate for the services provided and be at least minimum wage as determined by the union.
 - The customary range for direct care staff is between \$19 - \$25 per hour. A higher rate for those with specific training, certification, or expertise necessary to meet the needs of a consumer will require information verifying the need for the higher wage and/or special qualifications.
 - Background checks are required for all staff per Minnesota Statute 245B, effective 7/1/10.
 - A participant may be a staff person for another person using a waiver if they meet the qualifications and/or requirements for the service to be provided.
 - Staff will accrue paid time off (PTO) according to the union contract.
 - Staff will receive holiday pay at 1.5% for the identified holidays in the union contract.
 - Paying staff outside of the country is not allowed.
 - Support staff bonuses are allowed. The bonus must be related to an overall compensation package and outcomes achieved by staff. The CSP must include the timeframes the bonus is to be given, amount given and outcomes achieved (e.g. punctual, longevity, specialized training, etc.). ***A bonus must be pre-approved at least two months prior to usage. Parents, legal guardians, children, and spouses cannot be paid a bonus.***

- Overtime is not allowed for staff. In the event of an emergency, it can be pre-approved only if it is a health and safety concern.
- **Support Staff – Parent of Minor Child:** Is fundable and is limited to 80 hours per week for a multiple parent household and 60 hours per week for a single parent household. All hours more than 40 per person must be paid at 1.5% of current hourly pay. Parents include biological parents, stepparents, and adoptive parents. Payment must be for tasks above and beyond typical age-appropriate parenting. Child must have at least one dependency on the “Minnesota Department of Human Services (DHS) Supplemental Assessment for Children under 18”. Parent must meet the staff qualifications described in the CSP. The CSP must include a work schedule and work tasks. The maximum hourly rate paid to a parent is set by DHS.
 - **For a parent(s) to request more than 40 hours per week in the household, the following must be documented:**
 - Job description with staff schedule that outlines all hours requested.
 - Paid tasks are not activities that a parent of a minor would ordinarily or be responsible to perform.
 - All expenses are within the person’s budget amount.
 - Shared care is allowed for Parent(s) of Minor Children. Hours are limited to 80 hours per week total for all parents paid or 60 hours per week for a single parent. The maximum hourly rate paid to a parent is set by DHS using the PCA reimbursement rate for a 1:2 and 1:3 ratio. The hours need to be reflected on all participants’ CDCS plan. For current rate information, contact your social worker.
- **Support Staff – Shared Care:** Services provided at the same time, by the same direct support worker, to CDCS participants who have entered into an agreement to share CDCS services and both participants utilize the same FMS provider.

The person can only use shared services if:

- The services are in the personal assistance category (see CDCS – Personal Assistance).
- The services are outlined in the person’s CDCS Community Support Plan.
- The person enters into a written [Shared Services Agreement](#).
- The people sharing services use the same financial management services (FMS) provider.

When developing or amending the CDCS Community Support Plan, a person intending to use shared services must:

- Document the details about the shared services arrangement, including frequency, activity type and worker rates.
- Describe how the shared services will meet the person’s needs and preferences.

- Complete and submit the following form: [CDCS Shared Services Agreement-DHS-6633D](#).
- Describe the personal assistance services (i.e., activity type) the person will use while sharing services. Shared care cannot include tasks for the completion of personal cares.
- Describe the training needed for workers when providing shared services.

The customary wage for direct care staff providing shared care is:

- Shared care services 1:2: \$25.50-\$30.50
 - Shared care services 1:3: \$38-\$42
- **Support Staff – Spouse of Person:** Is fundable and is limited to 60 hours per week. Payment must be for tasks above and beyond typical spousal responsibility. The person must have at least one dependency (as identified in the MnCHOICES Assessment). Spouse must meet the staff qualifications described in the CSP. The CSP must include a work schedule and work tasks. The maximum hourly rate paid to a spouse is set by DHS.

Treatment and Training

This expense category includes services that promote the person’s ability to live in and participate in the community. This includes assistance in learning a new skill, improving a skill, or relearning a skill. ***People using the DD waiver must have at least one skill acquisition service or activity clearly detailed in their plan.***

- **Adapted Community Activities:** Activities that are specifically for people with disabilities (such as Special Olympics, Miracle League, adaptive sports, project power, etc.) are fundable when outcomes are detailed in the CSP. Adaptive equipment is fundable along with related staff time and mileage. Other equipment that is not adapted is not fundable (e.g. helmets, basketballs, non-adaptive equipment).
- **Adaptive Swim Lessons:** Swim lessons that are adapted to meet the person’s specific needs related to their disability. Swim lessons listed as adaptive are allowed and 1:1 instead of group lessons are considered adaptive and allowable.
- **Alternative Therapy:** Is non-experimental therapy (see Unallowable Category for definition of experimental) that is not covered by straight Medical Assistance (MA). It may be allowed with a prescription by a Minnesota MA enrolled *physician*. In addition, the physician will be asked to complete the “Alternative Treatment Tool for MHCP-Enrolled Physicians” form. The prescription and the alternative treatment form must be attached to the CSP. Related equipment and supplies do not require a separate physician’s prescription. (Prescriptions will need to be renewed annually). Examples include: music therapy, hippotherapy, aromatherapy, therapeutic listening program, massage therapy, behavioral therapy, feeding therapy, biofeedback, etc. The alternative therapy must be related to the disability.

- **Camps:** Camps offer a variety of experiences and are also often used as respite and may be fundable. The camp must be related to the disability and may be specialized to enhance or build skills. Camps that are not skill building or specialized would be in the personal support category.
- **Community Activities:** Related staff time and mileage is fundable. Community activities specifically for people with disabilities (Special Olympics, Project Explore) are fundable. See “Community Activities” in the Unallowable Category for what is not fundable. Activities NOT related to the disability that are typically paid by parents of non-disabled children are not allowed.
- **Community Education Classes:** For skill development; may be fundable when part of an approved plan. For people with Intellectual or Developmental Disabilities the classes should be related to their disability and associated with a skill acquisition or goal. Exception: Classes related to fitness and exercise for minors are not allowed.
- **Day and Employment Services and Activities:** Formal and informal adult day care options or vocational/employment related services. Licensed agencies must bill the FMS and the rate should be determined by utilizing the rate management system. The rate will be provided by your case manager. Creative vocational options are welcomed and approvable.
- **Driver’s Education:** Driver’s education assessment (Courage Center, certified agency) for vision testing, reaction time, memory/problem solving, strength and coordination, cognitive processing skills, and assessment for adaptive driving equipment. Driving lessons are allowed above and beyond what’s typical and must be an approved outcome in the CSP.
- **Extended Therapy:** Extended therapies beyond what insurance will cover (e.g. physical, pool, occupational, chiropractic, speech) can be covered with doctor order.
- **Fitness and Exercise Programs for Adults:** Are fundable when necessary and appropriate to treat a physical condition or improve or maintain the person’s physical conditions as identified in the CSP and monitored by a MHCP-enrolled physician. A prescription will be required to document care by a physician. The CSP must delineate how the person will use the program and how the usage will be documented. This documentation may be requested by the case manager.
- **Formal Licensed Waiver Services:** (NON-HOME CARE) Are fundable. All costs must be billed through the FMS and come out of the budget. Rates for licensed services must be determined by utilizing the rate management system. People will need to work with their case manager to obtain the provider’s rate for services and supports. Staff must meet the requirements in state law and the qualifications described in the CSP.
- **Person-Centered Thinking and Planning:** A facilitated discovery process to help people and family members gain clarity in what is possible for the future and to express what they desire for their lives over their lifetime. Ask you case manager for a list of facilitators.

- **Support Staff – Habilitation Activities (Skill Building):** Are fundable.
 - Activities must be directed toward increasing and maintaining physical, intellectual, emotional, and/or social functioning.
 - May include therapeutic activities assistance, training, supervision, and monitoring in the areas of self-care, sensory and motor development, interpersonal skills, communication, reduction or elimination of maladaptive behavior, community living and integration, mobility, healthcare, money management, and household chores.
 - Things that are “unallowed” such as tickets, food, and going to restaurants may not be purchased even if they are used for habilitation purposes.
 - This can be done by paid or unpaid staff for persons with Intellectual or Developmental Disabilities.
- **Support Staff – Informal:** Same guidelines apply as under personal assistance staffing.
- **Training for Caregiver:** The registration fees for conferences, classes, and workshops are fundable. Expenses for travel, lodging, or meals related to training are not fundable.
- **Tutoring/Post High School Programs:** Tutoring is fundable when it is above and beyond what school is required to provide based on the Individual Education Plan (IEP). Can utilize agencies or independent contractors. Post high school programs such as: Bethel Build Program or Minnesota Life College are partially fundable. Classes that focus on skill building and independent living skills can be funded. Discuss this option with your case manager for additional breakdown of approved services and supports.

Environmental Modifications and Equipment Guidelines

Environmental modifications and provisions include supports, services, and goods provided to the person to maintain a physical environment that assists them to live in and participate in the community or are needed to support health and safety.

The modification/adaptation or equipment items:

1. Are necessary for the health, welfare, and safety of the person.
2. Support the person to be more independent.
3. Are of direct and specific benefit to support the person as it relates to their disability.
4. Are the most cost-effective solution.

The waiver is able to reimburse the purchase, installation, maintenance, and repairs of environmental modifications and equipment provided that the repairs are cost efficient compared to the replacement of the item(s). Before equipment or supplies are approved the case manager may request a recommendation, assessment, or denial from other funding sources before a decision can be made.

People using CDCS through the CAC, Community Access for Disability Inclusion (CADI), Brain Injury (BI), or DD waivers must utilize their individual CDCS budget to cover up to \$5,000 worth of modifications/adaptations or equipment in their budget year. For modifications or equipment costing more than \$5,000, the person may request that Washington County consider further expenditures outside of their individual budget.

The county will review requests based on the current status of total waiver expenditures, total numbers of paid staff hours per week, prior history of unspent money yearly, and amount of natural family support.

Modifications over \$10,000 need at least two comparison itemized bids. Labor reimbursement to a family member is an unallowable expense. If a home construction project is likely going to be over \$10,000, an assessment by a physical therapist and/or an occupational therapist will be requested. The current state set maximum per year for modifications for each individual consumer is \$40,000.

The only time a person can add square footage to a home is for a bathroom if a person is in a wheelchair and it is the only way to make it accessible. The project has to be cost neutral so all services including the modification are required to be paid out of the annual CDCS budget. An occupational therapist's recommendation is required and DHS has to approve the project before payment is made. See the DHS Disability Services Program Manual for [adding additional square footage guidelines](#).

Refer to Washington County's Environmental Accessibility Adaptations (EAA) policy for additional guidelines.

- **Adapted Play Items:** Adapted toys/play items may be funded when recommended by a physician or therapist. Suggested limit of \$350 per year. Age-appropriate items and items that are the responsibility of the parent or spouse to provide are not allowable.
- **Adaptive Chairs/Lift Chairs:** Are fundable if not covered by MA or other insurance.
- **Adaptive Personal Care Supplies that are Disability Related:** That are above and beyond typical personal care supplies are fundable as described in the CSP and are not funded by MA or another payer source. Examples include: adaptive utensils, clothing protectors, electric toothbrushes, and incontinence supplies, etc.
- **Alarm Systems:** Approved if it is the most cost-effective means to notify the person is leaving. Suggested limit is \$2,000 for installation and monitoring. Monthly monitoring fees can be paid but not in advance.
- **Alternative Therapy Supplies:** Is a non-experimental therapy not covered by MA. An "Alternative Treatment form" should be used to prescribe the therapy by an MA-enrolled physician. Related equipment and supplies are allowed with a letter of recommendation from a therapist or medical doctor.
- **Assistive Technology:** Technology that allows people to communicate or do daily activities. This includes vision and reading aids, speech and communication aids, writing

and typing aids, accessible software, adaptive keyboards, adaptive utensils, switches, and dressing aids. Any one item over \$300 will require a letter of recommendation from a doctor or therapist.

- **Bed:** Adaptive beds/mattresses that are not covered by MA. Must be for health and safety. Must have a letter of recommendation from an appropriate therapist.
- **Bed Linens/Protective Covers:** Only bed linens with an explanation of medical or behavioral need are acceptable fundable expenditures. Suggested limit is \$400.
- **Bikes:** Are fundable when adaptive. Only modifications to non-adaptive bike is fundable. Suggested limit is \$5,000 annually. Electric bikes are not fundable.
- **Books and Subscriptions:** Are allowed when related to the person's disability and are needed to support an outcome in the CSP or is disability related training for a caretaker. Suggested limit is \$250 annually.
- **Carpet/Car Cleaning:** Allowed due to incontinence or bodily fluids. Includes professional cleaning or rental of equipment (including cleaning supplies). Purchase of carpet cleaner will be considered if cost-effective. Limit of 2x per year of carpet cleaning.
- **Chore/Heavy Cleaning:** Such as lawn mowing or snow removal are allowed when it is used to enable the caregiver to support the person or when a person's disability prevents them from completing these tasks. Chore services will be covered only if no one in the household is capable of providing this service. Related supplies such as chemicals, Chemlawn, pest control, etc., are not fundable.
- **Clothing:** Clothing purchased that has adaptations built into the clothes by design is fundable. Replacement clothing due to excessive wear and tear as related to the disability is fundable. Alterations to clothing due to the disability are fundable. Suggested limit is \$600 annually.
- **Computers/Tablets/Software:** Including peripheral equipment/supplies (e.g. printer, scanner, printer ink, paper) are fundable. The need for items must be listed in the CSP and should include: specific reference to the use and relation to the disability, identify if the person is capable of using it, and is it the most cost-effective item to meet the need.
 - **Computers/tablets and the peripheral equipment** suggested limit is \$1,000. Software that is related to the disability is fundable; suggested limit \$1,000 annually.
 - Replacements for computers purchased with CDCS funds will be considered if the computer is no longer able to perform the functions identified in the CDCS plan.
 - **iPads:** \$599 plus tax. If a carrying case/protective cover is recommended, this is fundable. The suggested limit will be \$700 for iPad and accessories.
 - Training for assistive technology is also approved and recommended, if needed.

- Replacement iPADS will be considered only if the current iPad is no longer able to perform the functions identified in the CDCS plan.
 - **CDCS will only provide financial compensation for a computer OR iPad – not both.**
 - **Computer, tablet, or iPad repairs can be funded through the CDCS program.**
 - **Warranties are not allowable under DHS rules.**
- **Fences:** Must be related to the disability and an assessed need to ensure health and safety. Should be the most cost-effective material and height to meet the identified need. Must utilize the MA fence vendor. The age of the person will also be taken into consideration when requesting a fence.
- **Food/Liquid Thickening Agent:** Products such as “thick it” are allowable after insurance has been pursued and denied. Will need a doctor’s statement of need.
- **Global Positioning Device (GPS):** The device and the monthly monitoring fee are allowable for tracking those with elopement issues and/or those who are not able to communicate their whereabouts.
- **Home Delivered Meals (Adults ONLY):** Provided to people not able to prepare their own meals and for whom there is no other person available to do so. The meals must be prepared meals and the cost comparable to the current MA reimbursement rate.
- **Home Modifications:** May include but are not limited to such items as installation and maintenance of ramps, grab bars, widening of doorways, modification of bathrooms and kitchens, installation of electric or plumbing systems to accommodate medical equipment, shatterproof windows, or floor coverings for mobility purposes. All projects over \$10,000 will need two bids from qualified vendors and an assessment by a consultant may be required to determine/evaluate the need and appropriate modifications and/or adaptations.
- **Internet Access:** May be funded if it is the most cost-effective way to meet the person’s assessed outcomes and goals. The internet must be for the direct benefit of the person and related to their disability and included in the person’s CSP. CDCS will not pay for enhanced features or upgrades beyond basic service such as higher speed. The maximum reimbursement allowed for internet services is \$50.00 per month. If the internet services are bundled with other services, an itemized statement that verifies the separated cost of the internet service is needed and potential cost estimates from available providers to ensure cost-effectiveness. CDCS funds may cover:
 - Additional costs for the set-up and equipment if the person moves
 - Equipment maintenance and repair
 - Initial costs for set-up and equipment (e.g. router, installation, modem, equipment lease, etc.) if they are necessary for the internet service’s operation
 - Monthly internet service fee
- **Laundry Costs:** Extra supplies/cost of utilities resulting from the person’s disability are fundable with a suggested limit of \$1,200 annually or \$4.00 per load.

- **Locked Cases:** For specific equipment and medications are fundable.
- **Mileage Reimbursement to Support Staff (Including Other Family Members):**
Is fundable when transporting to non-medical activities identified and approved in the CSP. The rate cannot exceed the Department of Human Services mileage reimbursement rate and it must be documented. Parents of minors or spouses cannot be paid for mileage (the only reimbursable service for parents and spouses is personal assistance).
- **Parking Reimbursement to Support Staff:**
Is fundable when the need is related to the transportation of the person to non-medical activities identified and approved in the CSP.
- **Portable Generators:** Are fundable to maintain life-sustaining medical equipment.
- **Positive Supports (formerly Behavioral Reinforcers):** Positive Supports that look very similar to parental responsibility (such as toys, videos, books, etc.) may be fundable with a structured positive support program written by a therapist/health care provider and described in detail in the Community Support Plan (CSP). (Things that are “unallowed” such as tickets, food, going to restaurants may *not* be purchased as reinforcers). Suggested limit is \$350 annually.
- **Property Damage:** May be funded when directly related to the person’s disability and is replacing the property with adaptive material or equipment to prevent future damage. Replacing property due to normal wear and tear is not funded. Excessive wear and tear related to the disability may be considered. For each challenging behavior that results in property damage, there must be a documented prevention plan in the CSP. Increased parental or staff supervision alone is not an acceptable behavior intervention plan.
- **Ramps:** Are fundable.
- **Safety Equipment:** Such as alarms, monitors, and shatterproof windows are allowable expenditures.
- **Sensory Supplies and Equipment:** Are fundable when there is an assessed need and requires a therapist’s recommendation for any item over \$300. This includes swings, weighted vests/blankets, fidgets, etc.
- **Special Diets:** Must be prescribed by a physician and be related to the disability. We will reimburse up to 25% of the United States Department of Agriculture (USDA) food cost liberal plan amount according to the age and gender of the person. Example: child is age 9 and the monthly liberal budget is \$278.10. We can pay up to \$69.53 per month for specialized diet. For current prices please refer to: www.fns.usda.gov/cnpp/usda-food-plans-cost-food-reports-monthly-reports. Fruits and veggies are naturally gluten-free but not specialized so are not allowable purchases. Vitamins and dietary supplements are not allowable; even with a prescription.
- **Transportation:** Transportation expenses such as Metro Mobility, Lyft, and Uber are fundable. Medical transportation must be used for medical appointments.

- **Vehicle Adaptations:** For the person’s primary means of transportation. Must have two itemized estimates that include the most cost-effective materials. The first \$5,000 must come out of the person’s annual budget. This may cover, but is not limited to, lifts, ramps, tie downs, handrails and grab bars, or repairs to this equipment.
- **Video Monitoring Systems:** There must be a documented need in the CSP related to the disability. Video monitoring in bedrooms cannot be purchased without approval from Minnesota DHS unless a parent of a minor requests for health and safety reasons. The following form will need to be completed: [MN – DHS-6789 Monitoring Technology Authorization form](#). The purchase of video monitors in the bathroom are never allowed.
- **Wheelchairs/Adaptive Strollers/Scooters:** Are fundable if not covered by MA or other insurance and is an assessed need.

MA Home Care Service (PCA, Home Care, or Nursing Service)

This category includes licensed services provided by a homecare agency including Personal Care Attendant (PCA), Skilled Nursing, Home Health Aide, and Private Duty Nursing.

The service must be listed separately and billed directly to DHS (or managed care entity if applicable) by the homecare agency. These services are not billed through the fiscal agency, must be provided by a licensed certified agency, and the state set rate is used and deducted from the CDCS budget.

- **Home Care Nursing:** State plan home care service with a state set rate. Deducted from CDCS budget and provided by a licensed and certified agency. Extended home care nursing comes directly out of the CDCS budget.
- **Home Health Aide (HHA):** State plan home care services are provided by a licensed certified agency. State set rate used and deducted from the CDCS budget. Extended HHA comes directly out of the CDCS budget and filled through the fiscal.
- **Personal Care Assistance (PCA):** PCA staff must meet the state requirements from the identified home care agency and meet qualifications described in the CSP. Rates established by the state, separated into six month amounts, and must have supervision of 96 units per year. Extended PCA comes directly out of CDCS budget and billed through the fiscal.

Self-Direction Support Activities

- **Employee Health Insurance:** Is fundable for the primary employee only who works at least 20 hours average per week.
- **Employer Costs:** Employer costs such as payroll Federal Insurance Contributions Act (FICA), Federal Unemployment Tax Act (FUTA), State Unemployment Tax Act (SUTA),

Workers' Compensation, wages, employer shares of benefits, and liability insurance are fundable. Processing fees are fundable.

- **Financial Management Service Providers:** Are fundable.
- **Recording Keeping Costs:** Such as postage, copying, print cartridges, printer, scanner, and supplies are fundable. Suggestive limit of \$500 annually.
- **Self-Direction Support Activities:** Including services and expenses incurred for administering or assisting the person or their representative in administering CDCS; such as advertising for staff, PTO for employees, office supplies, or for employee-related expenses.
- **Support Planner:** Is fundable and may be purchased from an individual or agency and must be certified by the state. Parents of adults may be certified by the state and act as the support planner, but if being paid as a support planner, they cannot also be paid as staff. Parents of minors cannot be paid as a support planner.

Other

The following are other important CDCS information and reminders:

- **Admission to Hospital:** CDCS services may not be billed during a time when the person is in the hospital. The waiver must be closed if the hospital stay is over 30 days.
- **Admission to Nursing Home:** CDCS services must be ended immediately once the person is admitted into the nursing home.
- **Amending the Plan:** The approved Community Support Plan (CSP) is considered the plan in effect unless and until any proposed changes are submitted to the case manager and approved. The Community Support revision form must be submitted and approved by the case manager and/or Waiver review team. No changes can be made to the plan the last 30 days of the plan year.

Appendix A: Unallowable Expenses

- **Advocacy Services**
- **Babysitting**
- **Cable Television**
- **Cell Phones:** DHS views this as a utility. Free phones are available for individuals who have a limited income.
- **Community Activities:** Memberships to the zoo, Science Museum, YMCA (for minors), etc. are not fundable. Restaurant food is never allowable. Tickets to sporting events, plays, movies, etc. are not allowable.
- **Compounds:** Are not fundable. Compounds are defined as prescriptions prepared in accordance with Minnesota Rules 6800.3100. Compounded prescriptions are not commercially available.

- **Dietary Supplements:** Are not fundable, even with a prescription. Dietary supplements, including things such as Ensure, are considered over-the-counter medications.
- **Educational Costs:** Anything the school would be financial responsible for; including tuition and home schooling supplies.
- **Exercise Equipment for Adults and Children**
- **Experimental Treatments and Therapy:** Experimental treatment is defined as “drugs, therapies, or treatments that are unproven, have been confined largely to laboratory use, or have progressed to limited human application and trials, and lack wide recognition from the scientific community as a proven and effective measure of treatment.”
- **Guardianship/Conservatorship Costs**
- **Health and Fitness Activities for Minors**
- **Legal Fees**
- **Medical Co-Pays:** Including MA, Public Medical Assistance Program (PMAP), and private insurance.
- **Medical Marijuana**
- **Medical Mileage:** Not funded because it is fundable through straight MA. Requests for medical mileage are through MNET: 1-866-467-1724.
- **Memberships to Non-disability Related Agencies.**
- **Mileage for Spouses and Parents of Minors**
- **Over-the-Counter Medications**
- **Personal Care Supplies NOT Disability Related**
- **Pets/Animals and Related Costs**
- **Pools/Hot Tubs**
- **Prescriptions**
- **Recreational/Leisure Activities that are NOT adaptive**
- **Room and Board**
- **Sibling Care**
- **Socialization**
- **Solutions:** Are not fundable. Solutions are dose forms of prescriptions or over the counter medications available either commercially or compounded individually by a pharmacist. Examples are: irrigating solutions, wound care solutions, solutions made from tablets or capsules for those who can’t swallow a tablet or capsule.
- **Toys/Games/Videos**
- **Training for Caregiver/Related Expenses:** Lodging, meals, and travel related to conferences, classes, and workshops are not fundable.
- **Vacation Expenses**
- **Vehicles**
- **Vitamins/Supplements**
- **Wills and Trusts**