

## **CABINET FOR HEALTH AND FAMILY SERVICES**

### **Department for Medicaid Services**

**(Amended at ARRS Committee)**

#### **907 KAR 16:010. 1915(i) RISE Initiative Home and Community-Based Services (HCBS); Participant Eligibility.**

RELATES TO: KRS 205.520

STATUTORY AUTHORITY: KRS 194A.030(2), 194A.050(1), 205.520(3)

CERTIFICATION STATEMENT:

NECESSITY, FUNCTION, AND CONFORMITY: The Cabinet for Health and Family Services, Department for Medicaid Services, has the responsibility to administer the Medicaid program. KRS 205.520(3) authorizes the cabinet, by administrative regulation, to comply with any requirement that may be imposed, or opportunity presented, by federal law to qualify for federal Medicaid funds. This administrative regulation establishes the policies and operational requirements to provide expanded services to individuals who have a primary diagnosis of serious mental illness or substance use disorder.

##### Section 1. 1915(i) RISE Initiative HCBS Participant Eligibility.

(1) To be eligible to receive a service in the 1915(i) RISE Initiative HCBS, an individual or an individual's representative shall:

- (a) Apply for 1915(i) RISE Initiative home and community-based services via the department approved system;
- (b) Complete application in the department approved system;
- (c) Meet Medicaid eligibility requirements established in 907 KAR 20:010; and
- (d) Meet participant eligibility requirements:
  1. Be eighteen (18) years of age or older;
  2. Have a primary diagnosis of Severe Mental Illness (SMI) or co-occurring SMI and Substance Use Disorder (SUD); and
  3. Meet criteria per the InterRAI CMH functional assessment tool.

(2) To maintain eligibility as a participant, the participant shall:

- (a) Maintain Medicaid eligibility requirements established in 907 KAR 20:010; and
- (b) Be reassessed and meet criteria annually utilizing the InterRAI CMH functional assessment tool.

(3) 1915(i) HCBS services shall not be provided to an individual who is:

- (a) Receiving a service in a 1915(c) Home and Community-Based program;
- (b) Receiving a duplicate service provided through another funding source; or
- (c) An inpatient of a hospital or other facility.

(4) Involuntary termination and loss of a 1915(i) RISE Initiative HCBS service shall be:

- (a) Subject to an appeal or hearing in accordance with 907 KAR 1:563; and
- (b)
  1. Initiated when an applicant moves to a residence outside of the Commonwealth of Kentucky; or
  2. If initiated by a 1915(i) RISE Initiative provider:
    - a. The 1915(i) Rise Initiative provider shall simultaneously notify electronically or in writing the participant or the participant's guardian, the participant's case manager, the department, and DBHDID at least thirty (30) days prior to the effective date of the termination;
    - b. The participant's case manager, in conjunction with the 1915(i) RISE Initiative provider, shall immediately act to:
      - (i) Provide the participant or participant's guardian with the name, address, and telephone number of each current 1915(i) RISE Initiative provider in Kentucky;

- (ii) Provide assistance to the participant or participant's guardian in making contact with another 1915(i) RISE Initiative provider;
  - (iii) Arrange or provide transportation for a requested visit to a 1915(i) RISE Initiative provider site;
  - (iv) Provide a copy of pertinent information to the participant or participant's guardian;
  - (v) Ensure the health, safety, and welfare of the participant until an appropriate placement is secured;
  - (vi) Continue to provide supports until alternative services or another placement is secured; and
  - (vii) Provide assistance to ensure a safe and effective service transition; and
- c. The notice referenced in subparagraph 2.a. of this paragraph shall include:
- (i) A statement of the intended action;
  - (ii) The basis for the intended action;
  - (iii) The authority by which the intended action is taken; and
  - (iv) The participant's right to appeal the intended action through the provider's appeal or grievance process.

(5) In the instance of a voluntary termination and loss of a 1915(i) RISE Initiative HCBS service:

(a) DBHDID shall initiate an intent to discontinue a participant's participation in the 1915(i) RISE Initiative HBCS services if the participant or participant's guardian submits a written notice of intent to discontinue services to:

1. The 1915(i) RISE Initiative HCBS provider; and
2. DBHDID.

(b) An action to terminate 1915(i) RISE Initiative HCBS participation shall not be initiated until thirty (30) calendar days from the date of the notice referenced in paragraph (a) of this subsection.

(c) A participant or guardian may reconsider and revoke the notice referenced in paragraph (a) of this subsection in writing during the thirty (30) calendar day period.

#### Section 2. 1915(i) RISE Initiative HCBS Participant Appeal Rights.

(1) An appeal of a department decision regarding a Medicaid beneficiary made pursuant to this administrative regulation shall be in accordance with 907 KAR 1:563.

(2) An appeal of a department decision regarding Medicaid eligibility of an individual made pursuant to this administrative regulation shall be in accordance with 907 KAR 1:560.

Section 3. Federal Approval and Federal Financial Participation. The department's reimbursement for services pursuant to this administrative regulation shall be contingent upon:

- (1) Receipt of federal financial participation for the reimbursement; and
- (2) Centers for Medicare and Medicaid Services' approval for the reimbursement.

(907 KAR 016:010. 51 Ky.R. 1717, 52 Ky.R. 63; eff. 7-30-2025.)

FILED WITH LRC: June 10, 2025

CONTACT PERSON: Krista Quarles, Policy Analyst, Office of Legislative and Regulatory Affairs, 275 East Main Street 5 W-A, Frankfort, Kentucky 40621; phone 502-564-7476; fax 502-564-7091; email CHFSregs@ky.gov.