

Each individual who is deaf is unique. Providers completing an ESP request should review previous documents indicating expressive and receptive communication skills and accommodation needs. A person's environment greatly influences their access to accommodations and use of different communication modes over time. Reviewing past services and supports may provide a blueprint for service planning. If the individual is transition age, helpful documentation may include the most recent IEP and the last three-year evaluation. Potential agencies that may have information on services provided prior to age 18 include the Office for Children with Special Healthcare Needs or the Kentucky School for the Deaf.

Special attention should be paid if the reports indicate higher levels of functioning than the team is currently observing. This may indicate that the environment does not provide the appropriate communication access. It is also important to keep in mind that hearing may fluctuate and/or decompensate. Individuals who are in non-signing environments may lose previous skills then rediscover them when in supportive environments.

If the team is concerned about the communication skills of the individual and there is indication that sign language has been used in the past:

1. An American Sign Language (ASL) interpreter should be hired.
2. If the communication goes well with a qualified interpreter present, focus ESP requests around use of interpreters and building supports using sign language and visual communication.
3. If the communication does not go well, the team should consider requesting a Communication Skills Assessment from the KY Division of Behavioral Health's Deaf and Hard of Hearing Services program. Call (502) 782-6181 or call your QA.
4. The Communication Skills Assessment will provide recommendations to consider when writing an ESP request. An individual who is deaf and uses sign language or gestures generally does best in a highly visually oriented environment. Use that lens and the guiding questions below to complete the ESP.

Providing full access to SCL services for an individual who is deaf and uses sign language will likely require ongoing ESP Requests as well as a commitment from the team to budget for and provide language access. Both equipment and individualized 1:1 services can be employed to match a person's best communication level. The team must also monitor for changes in hearing that may necessitate teaching new skills to both the individual and staff. An effective communication toolkit is individualized, person-centered and takes into account changing environments and differing communication needs in various settings.

Use the following information to create a thorough ESP request. Before writing, consider these questions in relationship to the billable services under SCL.

The team will decide what services would need the additional support and work together to establish the plan. Each individual service may not be able to be approved but combined in one service rate that the designated provider will use to ensure the exceptional support is available across environments. Maximum exceptional support rate is two times the traditional rate for the service. If the individual needs supports that are not fully covered

**TIP SHEET FOR USING THE EXCEPTIONAL SUPPORTS PROCESS FOR INDIVIDUALS WHO ARE DEAF AND USE SIGN LANGUAGE**

through this additional funding, contact your QA or the DHHS Program Administrator. Interpreter reimbursement funds are available for services provided in CMHCs. Businesses may also apply for tax incentives for ADA accommodations provided. See <https://www.ada.gov/archive/taxpack.htm>.

<b>SCL Billable Service Eligible for ESP</b>	<b>Questions to Consider When Writing ESP</b>
Day Training that is Not Provided in an Adult Day Health Center	<ul style="list-style-type: none"> <li>• Can the individual fully participate in active treatment without language access?</li> <li>• What behaviors may be driven by a need to communicate? When could the presence of an interpreter help alleviate that?</li> <li>• Does the individual understand the rules, structure, and routine of the day program? If not, could an interpreter help?</li> <li>• Could this person be more independent in medication administration if provided instruction in sign language or through an interpreter?</li> <li>• Where could deaf or signing staff be used to model language and provide direct support?</li> <li>• What visual strategies can the day training provider implement to increase communication access?</li> </ul>
Community Access Services	<ul style="list-style-type: none"> <li>• How can individuals who sign or communicate the same way as the individual be used for community access?</li> <li>• Is the team aware of the individual's identity and affinity with the Deaf community? Has the individual been given the opportunity to be exposed to and interact with the Deaf community?</li> <li>• If current team members are not aware of Deaf community activities, who can be hired who does?</li> </ul>
Consultative Clinical and Therapeutic Services	<ul style="list-style-type: none"> <li>• Have professionals with experience serving individuals been consulted? Can they be brought into the team?</li> </ul>
Person Centered Coaching	<ul style="list-style-type: none"> <li>• Are all possible modes of communication being tried? Has this individual been given every opportunity to fully participate?</li> </ul>
Personal Assistance Services	<ul style="list-style-type: none"> <li>• For individuals who are deaf and use sign language, have direct service providers who sign been recruited? Is direct communication an option?</li> <li>• Could this individual be more independent in self care if taught skills in his/her language?</li> <li>• Have visuals been implemented to maximize independence in self-care?</li> </ul>

**TIP SHEET FOR USING THE EXCEPTIONAL SUPPORTS PROCESS FOR INDIVIDUALS WHO ARE DEAF AND USE SIGN LANGUAGE**

Residential Support Services Levels 1 and II	<ul style="list-style-type: none"> <li>• Are all staff trained in the person’s individualized communication needs? Technology use and maintenance?</li> <li>• Has the home been modified to be as visually accessible as possible? To have alerting devices and captioning in place?</li> <li>• Does the individual have the choice to live with others who are Deaf, Hard of Hearing, or Deaf-Blind and share a language?</li> </ul>
Respite	<ul style="list-style-type: none"> <li>• Did the team explore respite options with others who are deaf and use sign language?</li> <li>• Does the individual have access to peers who are deaf and use sign language?</li> </ul>

**Service Providers in Kentucky with Experience Working with deaf Individuals who use sign language:**

DBHDID can offer a list of agencies who serve individuals who are deaf and use sign language. Contact your QA or [Michelle.Niehaus@ky.gov](mailto:Michelle.Niehaus@ky.gov) for more information.

**Name and Identifying Information of Individual**

Name of Individual:

Medicaid Number:

Date of Birth:

Name of case manager, agency and contact information:

1. Description of the exceptional supports requested.  
Describe specifically what the exceptional support will be used for
  - ✓ Interpreter or Communication Specialist. Provide the days and times for the support as well as the cost of the support. This can be a statement from the provider of the service, an invoice, and/or the agreement/contact between the residential agency and the service provider.
2. Specific description of challenges and interventions presented by the waiver recipient that have resulted in the request. Dates, times, location of occurrences must be included. Describe the behavior or medical issues that require exceptional support. Provide behavioral and/or medical data.
  - ✓ Connect requests for interpreters or hours with a communication specialist to the Communication Skills Assessment if one has been done.
  - ✓ If a Communication Skills Assessment exists, upload it with each request.
  - ✓ Document any fluctuations in hearing as well as how the presence of an interpreter and/or communication specialist may lessen challenges.
  - ✓ Provide any other supporting information to illustrate the need for the exceptional supports.

TIP SHEET FOR USING THE EXCEPTIONAL SUPPORTS PROCESS FOR INDIVIDUALS WHO ARE DEAF AND USE SIGN LANGUAGE

3. Summary notes of the person centered team meeting held to determine if the request for exceptional supports was appropriate. Notes should include signatures of the team members and date, time and location of the meeting.  
Minutes from the team meeting indicating the team discussed the need for exceptional supports and the consensus was that they are necessary. In MWMA there will need to be a meeting with signature sheet/minutes within one business day of submission of the request.
4. Updated Person Centered Service Plan with exceptional service documented.  
This will be in the system when you submit the plan.
5. If this is an on-going or repeat request, describe any interventions taken by the Person Centered Team to stabilize the challenges. Please describe the results of the interventions. Not applicable for 1<sup>st</sup> time requests-
  - ✓ For ongoing requests this refers to the benefit/progress that has occurred from the exceptional support service and any other interventions that the team is using to assist the individual.
  - ✓ Attach progress notes from the Communication Specialist as appropriate.
6. Detailed cost analysis using the approved Rate Determination Template for residential and day training services. All other requests shall provide detailed cost analysis. The approved Rate Determination Template is as an attachment to provider letter A49.

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