

Community Connections

NFOCUS Service Code

TBI Community Connection 2202

Service Definition

Community Connections is a service for adults aged 18 years and older on the Traumatic Brain Injury (TBI) Waiver. It provides individualized support and assistance to enable participants to take part in community or social activities. Services are aimed at helping participants engage or re-engage in preferred community or social activities while fostering greater independence, community networking, and personal choice.

Conditions of Provision

- A. The need for Community Connections must be identified during participant assessment and included in the person-centered plan (PCP).
- B. Providers cannot provide services to more than one participant at a time unless otherwise noted in the participant's PCP.
- C. Service may be provided on an episodic or continuing basis.
- D. Participants are responsible for overseeing and supervising individual providers on an ongoing basis.
- E. At least monthly the Service Coordinator and participant will monitor the participant's PCP. This includes monitoring the use or non-use of waiver services.
- F. Community Connections does not involve hands-on nursing care. When assistance with activities of daily living (ADLs) or health-related tasks is needed, Personal Care should be authorized instead.
- G. This service must not overlap with, replace, or duplicate other comparable services provided through the TBI Waiver such as Personal Care, Companion, Adult Day, Respite, or Non-Medical Transportation.
- H. Community Connections does not include habilitation and does not help the participant acquire, retain, or improve self-help, socialization, or adaptive skills.
- I. The services under the TBI Waiver are limited to additional services not otherwise covered under the Medicaid state plan, but consistent with waiver objectives of avoiding institutionalization.
- J. No more than 360 hours of Community Connections may be authorized within the participant's annual eligibility period.

Provider Requirements

- A. All providers of waiver services must:
 - 1. Be a Medicaid provider;
 - 2. Comply with all applicable Titles of the Nebraska Administrative Code and Nebraska State Statutes;
 - 3. Adhere to standards described in the Division of Medicaid and Long-Term Care Service Provider Agreement;
 - 4. Complete DHHS trainings upon request; and

- 5. Use universal precautions.
- B. TBI Waiver providers must complete DHHS-approved TBI training before providing Community Connections.
- C. Providers of Community Connections must obtain adequate information on the medical and personal needs of each participant and observe and report all changes to the services coordinator.
- D. A provider may be an individual or agency.
- E. Each agency provider must:
 - 1. Employ staff based on their qualifications, experience, and demonstrated abilities;
 - 2. Provide training to ensure staff are qualified to provide the necessary level of care;
 - 3. Agree to make training plans available to DHHS; and
 - 4. Ensure adequate availability and quality of service.

Rates

- A. Rates for Community Connections are established by DHHS and may change annually.
- B. Frequency of service is hourly, with a maximum of 360 per eligibility year.