Community Transition or Sustainability Services/Washington Roads

The purpose of this chapter is to educate staff about the state-only funded service packages of Community Transition or Sustainability Services (CTSS) and Washington Roads (WA Roads), the benefits these transition and sustainability services may offer to participants, and to provide instruction on how to utilize these state funded services in coordination with Medicaid State Plan or Waiver Programs.

Ask an Expert

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BACKGROUND

In 2007, DSHS was awarded the "Money Follows the Person" (MFP) grant from the federal Centers for Medicare and Medicaid Services (CMS) for the "Roads to Community Living" (RCL) demonstration project. The purpose of the RCL project is to examine how best to successfully help people with complex long-term care needs transition from institutional to community settings.

The lessons learned and cost savings seen through the first year of the RCL project helped convince the 2009 Washington State legislature to approve additional funds for individuals who may not be eligible for RCL. The funding was for a package of services named Washington Roads.

WA Roads services were previously available only to individuals transitioning from an institution to a community setting. These services are also available as a resource for challenging or complex cases involving individuals who are currently living in the community, but who are at risk of losing their community living setting.

WA Roads services have proven to be an integral part of successful community living and, as a result, many services are now available through other funding sources and waivers. For those individuals whose eligibility allows them to access transitional or sustainability services through the State Plan or Waiver programs, those programs are priority. For those individuals who do not meet transition or stabilization eligibility criteria for the State Plan or Waiver programs, they may access State Funded Community Transition and Sustainability Services (CTSS) or WA Roads transitional and sustainability supports.

WHO IS ELIGIBLE FOR CTSS/WA ROADS SERVICES?

These state funded services are intended to fill specific gaps to provide transitional or stabilizing supports for HCS clients to sustain community living. Not all participants will meet the eligibility requirements for these state funded transition or sustainability services. Case managers should utilize existing resources for these individuals.

*See text box on next page:

HCLA clients are eligible for state funded Community Transition or Sustainability Services through CTSS or WA Roads when **one or more of three eligibility criteria** are met and the service and/or supports aren't available under their state plan or waiver. Eligibility includes individuals who are in the N05 Medicaid coverage group in ACES, and those who meet the Non-Citizens eligibility criteria as outlined by Chapter 7g with HQ approval. **Individuals are eligible when:**

1. **Transitioning from an institution to a community setting, and are:**
   - aged 18 and older in a hospital or nursing facility;
   - Medicaid recipients in the hospital or nursing facility for at least one day, or Fast Track eligible;
   - functionally and financially eligible (or Fast Tracked) for State Plan or Waiver home and community-based services (HCBS) which currently include MPC, ABP-MPC, CFC, COPES, RSW, and New Freedom.
   - Clients enrolled in programs for State Funded long term care for non-citizens. These eligibility groups will require HQ approval from Emily Watts or delegate. See Chapter 7g for additional information on these programs.

   NOTE: After hospital or nursing facility discharge, these individuals are not required to receive ongoing home and community based services (HCBS). Please note that for Medicaid clients that do **not** meet functional or financial eligibility for HCBS**, *Community Transition or Sustainability Services (CTSS)*** continues to be a resource.

2. **Residing in the community, are functionally and financially eligible for State Plan or Waiver HCBS, AND are experiencing of one or more of the following:**
   - Unstable residential or in-home settings (e.g. homeless, frequent transfers, etc.)
   - At immediate risk of becoming homeless or unstable in current setting.
   - Frequent institutional contacts (ER visits, SNF stays, hospital admits, etc.)
   - Frequent turnover of caregivers
   - Multiple systems involvement (Dept. of Corrections (DOC), psychiatric institutions, etc.)

3. **Residing in subsidized housing (e.g. NED and 811 vouchers, HCS Subsidies, etc.) that was coordinated through HCLA.** This eligibility criteria is regardless of whether the client is

Individuals that are not eligible for CTSS or WA Roads include:

- Clients residing in Intermediate Care Facilities for the Intellectually Disabled (ICF/IDs) or Residential Habilitation Centers (RHCs)
- Clients enrolled in managed long-term care programs such as PACE. If using WA Roads for a client's transition or stabilization and client elects PACE, ensure that all goods and services are concluded before PACE start date.

May a DDCS client receive CTSS/WA Roads services?
A DDCS client that is transitioning out of a nursing facility or acute care hospital, meets all other eligibility criteria, and will exit either a NF or hospital on an HCS waiver is eligible for CTSS or WA Roads. DDCS clients that are already residing in the community are not eligible for CTSS or WA Roads.
May a client on the Residential Support Waiver (RSW) receive CTSS or WA Roads services?
A client in an RSW setting may utilize state funded Community Transition or Sustainability services available through CTSS or WA Roads when they meet eligibility criteria, as listed above. A contracted Community Choice Guide (CCG) may be employed to assist with transitional tasks, such as coordinating a move, on a very limited basis. An example of this is when a CCG is obtaining community transition goods or services to support the community stabilization. Utilizing state funding for these transitional tasks is a last-resort option and may be used only when all other resources have been exhausted. CCG Services are available under the Residential Support Waiver, so authorizing under state funded WA Roads or CTSS RACs should be rarely used.

- For Expanded Community Services (ECS): It is the responsibility of the caseworker along with the ECS Coordinator or designee to determine the appropriate ECS setting; setting determination may not be assigned to a CCG, though after the setting is chosen the CCG can support the client's move to that new community setting. In addition to staffing the case with a supervisor prior to authorizing state funded CCG services, the ECS Coordinator must review and approve of the request. The approval must be documented in a SER.

- For Specialized Behavior Supports (SBS) and Enhanced Residential Services at an Enhanced Services Facility (ESF): In addition to staffing the case with a supervisor prior to authorizing state funded CCG services, the HCS Field Services Administrator (FSA) must review and document approval of the request. The approval must be documented in a SER.

- For more information on the Residential Support Waiver please review the RSW Chapter in the LTC Manual.

State Funded CTSS/WA Roads services should only be used when:

1. Community Transition Services (CTS), available through Community First Choice (CFC), does not cover all the services or items necessary for an individual to relocate to the community from an approved institutional setting: a skilled nursing facility (SNF), an institution for mental disease (IMD) or an intermediate care facility for individuals with intellectual disabilities (ICF/IID); and the client is not eligible for RCL. Recall that a HQ-approved ETR through CFC CTS may be requested. When necessary, CFC CTS may be used in combination with state funded CTSS or WA Roads.

2. All other options have been tried and the client is at risk of losing their community setting. All CTSS and WA Roads services are provided through state-only funding and should be authorized only when no other services are available to stabilize the community setting. **CTSS or WA Roads services should not be used to supplant services that could be available through COPES or other waivers.**
3. For those individuals eligible for LTSS and are approved for a Non-citizen's eligibility group as outlined in Chapter 7g, State Funded Services available through WA Roads could be approved to assist a client with returning to a community setting. This requires HQ Program Management approval by Emily Watts at emily.watts1@dshs.wa.gov or HQ delegate and may take the place of the Supervisory approval SER required for WA Roads authorization.

To ensure client well-being and cost effectiveness, you must document in CARE:

- How the services or supports are of direct benefit to the participant's successful transition and community living.
- How the authorizations are necessary for the client's health, welfare, safety, and well-being. Ensure services authorized are consistent with needs identified in the CARE assessment.
- If authorizing multiple contracted service providers, documentation is required to ensure that these consultants are not duplicating services.
- When purchasing Goods or Items: the process you followed demonstrates that the Goods/Items are in addition to those supplied by Medicare/Medicaid, and does not replace covered equipment, goods or items.
- If necessary, authorizations for a service/item exceed the maximum amount allowable, you must complete a local ETR prior to authorization.
- For those accessing state funded CTSS or WA Roads services and who are on the Address Confidentiality Program, see Chapter 3: Assessment and Care Planning for additional information.

Individuals may receive CTSS/WA Roads services in the following settings:

- Any hospital setting or nursing home (to facilitate return to the community)
- The individual's owned or leased home or apartment
- The individual's temporary community living setting, such as a shelter or hotel
- A community-based residential setting (adult family home, assisted living, an RSW setting etc.)

SERVICES AVAILABLE UNDER WA ROADS INCLUDE:

Behavior Support Services H2019

Behavior Support services are for participants transitioning from institutional to community settings or requiring stabilization while residing in the community in those instances where the authorized Medicaid benefit amount, duration or scope of service does not meet the individual's needs. (Client Training: Behavior Support is available through COPES and RCL. Client Training: Behavior Support should be accessed through those programs for all COPES or RCL eligible individuals; only individuals ineligible for COPES or RCL should receive this service through WA Roads.)

CARE Assessment Documentation for Client Training-Behavior Support:

- On the Treatments screen in CARE: Select Client Training/Waiver under the Rehab Restorative Training header.
- On the Pre-Transition and Sustainability screen found below the Client Details section in CARE, select the Sustainability Goals tab. From the drop down, select the goal description, and describe the goal of behavior support in the comments. This section helps the provider understand the specific reasons for the development of a behavior support plan.
- On the Care Plan Supports screen, assign Client Training to the behavior support provider.
- Send the chosen behavior support provider a copy of the Assessment Details, Service Plan, and Sustainability Goals.

The behavior support provider will **develop a behavior support plan** within 30 days of the client's assessment and provide this to the case manager. The behavior support plan will address things such as:

- Factors that are associated with an individual's documented or identified behaviors
- Written strategy of behaviorally specific interventions designed to address those behaviors and promote optimal functioning with recommendations for improving the client's overall quality of life, teaching methods and environmental changes designed to decrease the behaviors that may be impacting the client remaining or transitioning to a community setting
- Direct interventions with the client to decrease the behavior that compromises their ability to remain in the community. This could include demonstrating and practicing new interventions and skills with formal and informal supports and significant others to support the individual in their community setting.
- Case Consultation regarding escalating situations.
- Make recommendations for treatment and assisting with making referrals for community behavioral health services

Environmental Modifications in a residential setting

Environmental Adaptations for Residential (S5165-UB) assists the client in meeting their needs to stay safely in a residential setting and is specified in their care plan. This service allows the client to live in

the least restrictive setting. This service is most frequently used to support a client's relocation of an EWC lift system from one residential setting to another.

Note: All items and services must be identified in the client's plan of care. Document the client's approval for WA Roads in a CARE SER.

SERVICES AVAILABLE UNDER CTSS AND WA ROADS INCLUDE:

Community Choice Guiding (CCG): SA263

Payment for specialty services which provide assistance and support to ensure the eligible client's successful transition to the community and/or maintenance of independent housing as authorized by HCS and/or AAA staff. Please be sure to confirm that the client is unable to access this service through COPES or Roads to Community Living eligibility before offering it using a State Funded Services RAC. CCG services may include, but are not limited to the following:

- Locating and arranging appropriate, accessible housing; including working with local housing authorities and other community resource providers. Assisting with subsidy applications, move-in logistics, and coordinating with other providers to promote housing stability.
- Supporting clients in setting housing goals, identifying preferences, and addressing barriers.
- Set up client's new home such as arranging lease documentation, arranging utility hook-ups or acquiring furnishings and household goods.
- Assist a client with touring Adult Family Homes (AFH) and Assist Living Facilities (ALF) to determine whether this setting is preferred by the client.
- Supporting the establishment of a network of relevant client partners: nursing or institutional facility staff, case managers, community providers (including AFH and ALF providers), medical personnel, legal representatives, paid caregivers, family members, housing agencies and landlords, informal supports and any other involved parties.
- Assisting with filling out forms and obtaining needed documentation to aid in the client's successful transition from an institutional setting or stabilization within the community (forms may be related to Public Benefits, housing subsidy, lease agreements, etc.).
- Providing emergent assistance to avoid utility shut-off and/or eviction.
- Coordinating and linking the client to resources which will establish or stabilize their community setting, including arrangements with pharmacies, primary care physicians, financial institutions, utility companies, housing providers, social networks, local transportation, housing budgeting, Durable Medical Equipment providers and other needs identified in the Plan of Care.

- Shopping for necessary household goods/items or paying for rental deposits (to include first month rent), utility hookup fees, or rent/emergency rental assistance service. This service assists clients transitioning out of institutions or when needed to stabilize a client's community setting.
  NOTE: The provider is also reimbursed for the authorized purchases after it is verified the client received the goods or service. Authorization for the item/service is under a separate service code and case managers will process the reimbursement(s) for these one-time goods or services supports to the CCG as timely as possible. This reimbursement should not exceed 30 days after the CCG has provided an invoice/receipt as proof of the purchase.
- Assisting with locating and arranging transportation resources to effectively connect with community and community resources. An example would be a one-time purchase and reimbursement of a bus pass.
  NOTE: Transportation for medical appointments should be provided by existing non-emergency medical transportation benefits if the client is eligible.
- Assisting to find a qualified caregiver. See additional information in Chapter 7d: COPES

Detailed instructions on how to make a CCG referral, including how to document this service in the CARE Assessment and complete Sustainability Goals and Tasks using Service Codes SA263 and SA266 can be found in the Chapter 7d: COPES of the LTC Manual. The updated CCG Activity Tracking Form can be found in the resources section of this chapter and in Chapter 29: Roads to Community Living.

Ensure a CCG Tracking Form is available within DMS for the span of the authorization that CCG services are provided.

NOTE: Services such as pest eradication, janitorial services and packing/moving services must be performed by a contracted provider who holds the Community transition and Sustainability Services (CTSS) contract and paid directly via ProviderOne. A CCG cannot be authorized these services.

Community Choice Guiding-Issuing Payment for AT Good: SA266

AT Goods can be purchased from an AT contracted provider with the AT Goods subcode, or if needed, a third-party purchaser such as a Community Choice Guide (CCG) for HCS/AAA clients.

Based on a client's eligibility:

- The case manager will supply the detailed information for the covered assistive technology good, which retailer it is to be purchased from, the amount it should cost, and where it should be delivered.
- The provider is also reimbursed for the authorized purchase of assistive technology after it is verified the client received the good. Authorization for the good is under a separate service code and case managers will process the reimbursement(s) for assistive technology to the CCG as

timely as possible. This reimbursement should not exceed 30 days after the CCG has provided an invoice/receipt as proof of the purchase.

Detailed instructions on how to make a CCG referral including how to document this service in the CARE Assessment and complete Sustainability Goals and Tasks using Service Codes SA263 and SA266 can be found in the Chapter 7d: COPES of the LTC Manual and on the CCG Services SharePoint. The updated CCG Activity Tracking Form can be found in the resources section of this chapter and in Chapter 29: Roads to Community Living.

Community Transition or Sustainability Goods SA290

One-time purchase of necessary essential goods to provide basic living for a client who is discharging to the community from a hospital or nursing facility and/or needs CTSS or WA Roads stabilization services to maintain community living. Purchasing of items should only be authorized under this code when the authorized Medicaid benefit amount, duration or scope of coverage does not meet the individual's needs. Goods obtained with these funds shall be in addition to any medical equipment and supplies furnished under the State Plan, Medicare, or other insurance. Items may include, but are not limited to:

- Goods necessary to establish a residence such as essential household furnishings.
- Items needed to help stabilize community living for a client.
- To capture this in CARE, select "Community Transition Goods or Items" on the treatments screen and select the appropriate provider type and frequency from the Provider List. (It is recommended that the service goods also be listed in the comments.) Assign to the contracted provider in the Supports table.
- Goods may include:
  Furniture, essential furnishings, and basic items essential for basic living outside the institution. For AFH Settings reference WAC 388-76-10685, and for Assisted Living Settings reference WAC 388-78A-3011 which outline resident unit furnishings in these settings. In the event a residential setting indicates they are unable to provide the required furnishings as outlined in WAC, proceed with authorizing the essential furnishings necessary to facilitate the transition, notify the provider of their requirements as outlined in WAC, and also submit a referral to RCS to document the provider's inability to meet residential unit furnishings per WAC.

See *Which Program to Use: Transition and Sustainability Goods and Services* in the Appendix as a reference guide.

Community Transition or Sustainability Services: SA291

Payment of necessary one-time services to provide basic living for a CTSS or WA Roads eligible client who is discharging to the community from a hospital or nursing facility or needs state funded stabilization services to maintain community living and payment is made directly to the provider through the DSHS payment system. Services include but are not limited to:

- Packing assistance

- Moving assistance
- Utility set up fees or deposits
- Non-recurring health and safety assurances such as pest eradication, allergen control and/or extreme cleaning
- Rental deposits: all pre-tenancy payment requirement, including first month's rent, can be bundled as one deposit and reimbursed to a Community Choice Guide or a DSHS contracted Supportive Housing provider.
- Trial visits to a prospective licensed residential setting.
- To capture this in CARE, select "Community Transition Services" in the Treatments screen and select the appropriate provider type and frequency from the Provider List. (It is recommended that the service type, such as Moving Assistance, be listed in the comments). Assign to the contracted provider in the Supports table.

See *Which Program to Use: Transition and Sustainability Goods and Services* in the Appendix as a reference guide.

NOTE: Community Transition Services – Items (SA290) does not permit payment of tips. With online orders/pickups, some companies have added an automatic tip to the overall total of the transaction. This cannot be reimbursed using Community Transition Services-Items. If the automatic tip cannot be removed from the transaction total, shopping at these companies should be avoided altogether.

Paying a money order/cashier's check fee as part of a move-in cost (payment of first month's rent/deposit) is allowable.

NOTE: A contract is not required if another payment mechanism is utilized.
Options include:

1. Using a client services HCS P-Card (state issued credit card available to HCS HQ staff); or
2. Authorizing a contracted provider to pay for rental deposits and community living set-up fees directly and be reimbursed (such as a CCG or a DSHS contracted Supportive Housing Provider).

Unit compensation to the contracted provider for issuing payment (such as SA266) does not count towards the funding limits associated with service codes SA290 & SA291.

More information regarding the HCS P-Card can be found in the Resources section of this chapter.

Other services available under CTSS and WA Roads:

These codes should only be used when the client is not eligible for the service or item through the medical benefit or another Long-Term Services and Supports (LTSS) program:

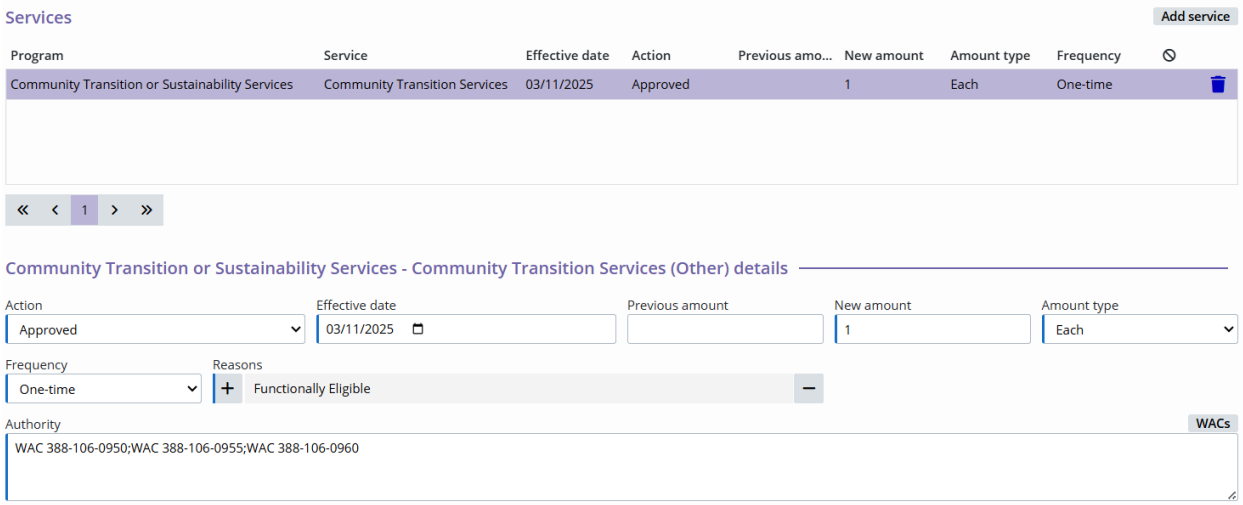
- Durable Medical Equipment (See Blanket code lists)
- Spec. Medical Equipment Service/Repair: K0739
- Non-Medical Equipment and Supplies: SA421
- Assistive Technology (Non-CFC): SA075 U2
- Non-Medical Transportation: T2003

How long may state funded CTSS/WA Roads services be authorized?

Some services, such as Client Training: Behavior Support and Community Choice Guiding, may be authorized for up to three months depending on the client situation. Upon completion of the first three months, an additional three months may be authorized with documented supervisory approval when the client would continue to benefit from the service, and the service is proving effective with progress being demonstrated. Some services are identified as a non-recurring or one time service. Review the service code data sheets for specific information. Once a client's situation has stabilized, it is anticipated that services will discontinue.

HOW DO I AUTHORIZE COMMUNITY TRANSITION OR SUSTAINABILITY SERVICES (CTSS)?

1. Use the CTSS eligibility criteria listed above to verify eligibility for these state funded services.
2. Prior to any CTSS utilization, you will ensure the need for this state only services are captured in the CARE assessment.
    a. For state funded goods or services, such as essential household goods or furnishings or pest eradication, select "Community Transition Services" and/or "Community Transition Goods or Items" on the treatments screen and select the appropriate provider type and frequency from the Provider List. (It is recommended that the service type/goods also be listed in the comments.)
3. Add the CTSS RAC (3105) to the client's RAC Eligibility list in CARE.
4. Complete a SER outlining the service you are authorizing and/or the items you are purchasing and how they are necessary for the client's service plan.
5. A client can have both the state funded CTSS RAC and a federally matched program RAC such as CFC, COPES or RSW assigned.
6. Receipts for all purchases must be included in the participant's electronic case record (ECR). Attach all receipts/bids to the Packet Cover Sheet: Social Services Invoice/Receipt Packet Cover (DSHS Form 02-615)
7. Create a PAN outlining one-time CTSS are approved.



HOW DO I AUTHORIZE WA ROADS SERVICES?

Prior to any WA Roads service utilization, you will want to SER Supervisory approval to use these state only funds.

For a resident transitioning from an institution:

1. Use the WA Roads eligibility criteria listed above to verify eligibility.
2. Note in the Service Episode Record (SER) that the client is eligible for WA Roads transition services and that you have Supervisory approval to authorize state only funds.
3. Have the client or their representative review and sign the DSHS (14-012) Consent form.
4. Add the WA Roads RAC (3120) to the client's RAC Eligibility list in CARE.
5. Complete a SER outlining the service you are authorizing and/or the items you are purchasing and how they are necessary for the client's service plan.
   a) Authorization for emergency rental assistance (SA298) must be approved by both the supervisor and an HCS HQ Housing Specialist prior to utilization.
   b) The WA Roads Emergency Rental Form must be submitted (see Chapter 6b: Interim Housing Resources (Motel Interim Stay for Transitions & Emergency Rental Assistance) to access form)
   c) Document both approvals in the SER in CARE.
6. For WA Roads services such as Community Choice Guide, choose "Community Integration" on the Treatments screen in CARE and select the appropriate provider type and frequency from the Provider List. (It is recommended that the Sustainability Goals are completed in CARE and incorporated as part of the WA Roads service referral to the provider.)
7. Receipts for all purchases must be included in the participant's electronic case record (ECR). Attach all receipts/bids to the Packet Cover Sheet: Social Services Invoice/Receipt Packet Cover (DSHS Form 02-615)

8. Upon discharge, and with the client's consent, follow the procedures outlined in Chapter 7 of the Long-term Care Manual to enroll the client in the core LTC program for which they are functionally and financially eligible.
    a) If a client declines waiver/state plan HCBS, follow all procedures in the Long-Term Care Manual to document their decision.
9. Enter the discharge date on the Nursing Facility Case Management screen or the State Hospital screen in CARE. For Acute Care Hospitals, you may enter the Medical Hospital end date under the Short Term Stay screen in CARE.
10. Make a note in the "Additional Information" section on the Case Transfer Form that WA Roads services were used as part of discharge planning.
11. Following all instructions in the Social Services Authorization Manual (SSAM), select the appropriate RAC and authorize on-going services such as personal care for the client.
12. An individual transitioning from an institution using WA Roads is eligible to receive up to six months of WA Roads services post discharge to provide stabilization as necessary, without reevaluating eligibility for WA Roads services.
    a) A client can have both the WA Roads RAC (which is not an assessment-based RAC) and an assessment-based RAC such as CFC or MPC assigned.
    b) After six months, an individual who has transitioned to the community from an institution may have access to WA Roads services when they meet other WA Roads eligibility criteria for clients living in the community or living in HCS coordinated subsidized housing.

For HCS clients residing in community settings who are eligible for WA Roads services:

Ensure that CARE clearly documents that all care planning and service resources available through HCBS waiver/state plan have been examined and utilized.

1. Conduct staffing between case manager and supervisor to review and ensure that all aspects of CARE clearly indicate the need and approval for WA Roads.
    a) Recommended: have a third party review the documentation in CARE prior to authorization of WA Roads services. (This process is to be determined locally. An example might include requesting a Nursing Care Consultant or JRP to review the assessment and/or care plan.)
2. Complete a SER outlining:
    a) The Supervisor's approval to authorize WA Roads services.
    b) The service you are authorizing and/or the items you are purchasing and how they are necessary for the client's service plan.
    c) The desired outcome of services authorized.
    d) For members of this eligibility group who return for a brief institutional stay, WA Roads services can be authorized while in the institution, as needed, to facilitate a return to the community.

For more information on how to access Emergency Rental Assistance please see Chapter 6b.

3. Add the WA Roads RAC (3120) to the client's RAC Eligibility list in CARE (if there is an authorization, there must be a note in the SER, per instruction above).
    a) A client can have both the WA Roads RAC (which is not an assessment-based RAC) and an assessment-based RAC such as CFC, COPES, or RSW assigned.
4. If there has been no change in the client's cognition, ADLs, mood/behaviors, or medical condition complete an Interim assessment to document the need for the WA Roads program.
    a) For WA Roads services such as Community Choice Guide, choose "Community Integration" on the Treatment Screen in CARE and select the appropriate provider type and frequency from the Provider List. (It is recommended that the Sustainability Goals are completed in CARE and incorporated as part of the WA Roads service referral to the provider.)
    b) For Washington Roads sustainability items or services, such as essential household goods, select "Community Transition Goods or Items" or for furnishings or pest eradication, select "Community Transition Services" in treatments and select the appropriate provider type and frequency from the Provider List. (It is recommended that the service type also be listed in the comments.)
5. All other case management requirements for clients receiving HCLA supports, including quarterly contacts, should be followed.
6. Regarding clients who have received HCS coordinated subsidized housing: The HCS HQ Housing Specialist will send an informational email alerting both the HCS and AAA office when a client in their region/PSA will be moving or has just moved to the community using a housing voucher.
7. Individuals in areas participating in the Steps to Employment (S2E) pilot projects who are interested in receiving employment services will be referred to the HCS Employment Program Manager for service assessment and authorization.

For an individual with a housing voucher/subsidy that has been coordinated through HCS, but who is not currently receiving HCS supports. Please Reference Chapter 6a-d for additional Housing Resource policy information.

ETR Considerations

Each region will utilize a local ETR process for State Funded CTSS and WA Roads services. HQ ETRs are only used for:

- **Personal Care through other programs:** CTSS or WA Roads services should be explored before requesting additional personal care or increased residential rates for individuals meeting CTSS or WA Roads eligibility criteria.
- **Bathroom Equipment through other programs:** Follow all procedures to request bathroom equipment through the ETR process as outlined in the Social Services Authorization Manual when there are no other resources available (e.g. medical benefit, COPES, etc.). Bathroom Equipment is now generally covered by the medical benefit.
- **Emergency Rental Assistance:** Follow all procedures to request Emergency Rental Assistance as outlined in Chapter 6b: Interim Housing Resources (Motel Interim Stay for Transitions & Emergency Rental Assistance).

WA ROADS GRIEVANCE PROCESS:

Washington Roads (WA Roads) services are discretionary; case managers may identify individuals who are eligible and authorize WA Roads services based on their professional judgment. The grievance process outlined below is offered instead of the Office of Administrative Hearings process, which is available for other types of programs. **A Planned Action Notice should not be sent for WA Roads services**.

The grievance process is as follows:

1. If an individual or his or her representative does not agree with a decision that denied or terminated a WA Roads service,
   a) the assigned case manager will send a copy of the grievance process notifying the client in writing that he or she may request a review of the decision by following the steps outlined below (use the form below, printed on local letterhead); and
   b) document in a SER that the client was notified of the denial or termination and was given a copy of the grievance process

2. The individual or their representative may request a review by contacting their social service worker's supervisor. The supervisor will review the decision and respond in writing within ten (10) business days of receipt of the request for review.

3. If the individual or their representative does not agree with the decision of the supervisor, they may request a review by the WA Roads Grievance Workgroup by writing to:

Home and Community Living Administration (HCLA)
Washington Roads Grievance Workgroup
PO Box 45600
Olympia, WA 98504

A review by HCLA's WA Roads Grievance Workgroup will take place within seven business days of receiving the written request for review.

4. The results of this review will be shared with the individual or his or her representative within three (3) business days of the date of the review.

WHAT ABOUT CONTRACTING?

Most client services contracts are executed through the AAA unless other local agreements are in place that state otherwise. All contractors providing CTSS or WA Roads services must have a current contract before providing services.

Services are performed within the scope of practice of the contractor's license and in compliance with professional rules, as defined by law or regulation, and are provided in a manner consistent with protecting and promoting the client's health and welfare, and appropriate to the client's physical and psychological needs.

Note: In addition to specific contracted duties, each provider is responsible for reporting any instances of abuse, neglect, or exploitation of a vulnerable adult or child.

RESOURCES

WA Roads Forms

WA Roads Grievance Process Notice.pdf
02-615 Social Services Packet Coversheet.pdf

Goods and Services Program and Service Package Table:
Which Program to Use-Transition and Sustainability Goods and Services 03.2026.pdf

Client Services Purchasing Card Process (HCS Only)/ Amazon Purchasing (NFCM Only)
HCS Purchasing Card.docx
Desk Aid for Amazon Business.pdf

Community Choice Guide (CCG) Activity Tracking Form

CCG Activity Tracking Form - Instructions and Samples Rev. 10.2025.pdf
CCG Activity Tracking Form MONTHLY 10.2025.xlsx
CCG Activity Tracking Form WEEKLY 10.2025.xlsx

Rules and Policy

WAC 388-106-0950	Community Transition or Sustainability Services
WAC 388-106-0955	Community Transition or Sustainability Eligibility
WAC 388-106-0960	Community Transition or Sustainability Services limits

REVISION HISTORY

DATE	MADE BY	CHANGE(S)	MB #
4.2026	Samantha Dunham	• Clarification regarding PACE participants • Clarification that CCG Tracking Forms are to be sent to DMS for imaging • Updated Community Transition Goods and Services reference guide	
11.2025	Amanda Speck	• Removal of Emergency Rental Assistance instructions as this has been delinked from this funding source. • Clarified process for Non-Citizen recipients who may access state funded service packages to support transition to state funded HCBS. • Updated CCG Service Codes descriptions & Tracking forms to be aligned with contract updates.	
7.2025	Julie Cope	• Updated all ALTSA references to reflect Administration name change to HCLA • Updated all DDA references to reflect new divisional name of Developmental Disabilities Community Supports • Added clarification that CCG Services (SA263) are available under RSW, so should rarely be authorized under these state funded service packages. • Removed Emergency Rental Assistance as this service is no longer available under WA Roads.	H25-039
3.2025	Samantha Dunham	• Updated multiple references to updated Housing Chapter. • Included Amazon Business purchasing for Community Transition Goods (NFCM Only) • Updated the CCG Activity Tracking Forms	H25-010

	Desiree Vallejo	• Updated PAN example	
10.2024	Julie Cope	• Included hyperlink to Housing Resources Chapter for Emergency Rental Assistance • Included hyperlink to Assessment & Care Planning Chapter for Address Confidentiality Program information.	
7.2024	Julie Cope	• Included hyperlink to COPES chapter for CCG authorization steps • Replaced CTSS PAN screen shot to reflect CARE Web. • Added CCG Activity Tracking form to Resources Section. The form includes the option for providers to submit the form directly to the Imaging Unit via fax.	
12.2023	Julie Cope	• Added P-Card Process and Procedure • Updated DMS Packet Cover form 02-615 • Clarification on SA266 use and CCG reimbursement timeliness • Added description of trial visit • Included non-medical transportation services	H23-090
2.2023	Julie Cope	Removed Emergency Rental Form and referenced Chapter 5b for this document. Strengthened language regarding using WA Roads for Non-Citizens programs.	H23-017
11.2022	Julie Cope	Updated Eligibility to include State Funded Non-Citizens Programs Relocated Housing Resource policy and procedure information to Chapter 5b	H22-064
05.2021	Stephanie VanPelt	Updated HQ purchasing protocols and DMS cover packet form (02-615)	H21-050
2.2020	Jonnie Matson	Emergency Rental Assistance Request Form Updated	
12.2019	Julie Cope	Added one time state funded sustainability supports available under CTSS RAC 3105	H19-066