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**E. SIGNATURES**

By signing below I attest my qualifications for this service meet all CLTS Waivers standards at this time.

✗ Signature of Employee	Date
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By signing below, I attest the above named person meets all necessary provider standards for this service at this time.

✗ Signature of Employing Entity Representative	Title <i>Guardian</i>	Date
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**Daily Living Skills/Mentoring Training Plan**

**Client Name:** \_\_\_\_\_ **Month:** \_\_\_\_\_ **Provider Name:** \_\_\_\_\_  
(printed)

**Measurable Goal**

**Method of Achieving Goal**


Daily Living Skills Training Report

Client Name: \_\_\_\_\_ Month: \_\_\_\_\_ Provider Name: \_\_\_\_\_  
(printed)

Date	Activities Involved In and Progress Towards Goals

Please submit on a monthly basis to CLTS case manager.

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Medicaid Home and Community-Based Services (HCBS) Waiver Manual for the CLTS Waiver Program (10/2022): <https://www.dhs.wisconsin.gov/publications/p02256.pdf>

#### **4.6.20 Mentoring**

##### **4.6.20.1 Definition**

Mentoring services improve the participant's ability to interact in their community in socially advantageous ways.

The mentor provides the participant with experiences in peer interaction, social and/or recreational activities, and employability skill-building opportunities during spontaneous and real-life situations, rather than in a segregated or classroom-type environment. The mentor implements learning opportunities by guiding and shadowing the participant in the community while practicing and modeling interaction skills.

Mentors are paraprofessionals, including but not limited to individuals who are in the participant's peer group. The peer group includes a wide range of individuals who have something in common with the participant, including similar life experiences, interests, backgrounds, perspectives, and so on, and who are not necessarily in the same age group.

This service may fund expenses related to participation in community activities that address the objectives and identified outcomes in the participant's individual service plan. Costs for meals and admission fees for the mentor and child or youth may be included.

Mentoring services may be delivered by remote services (refer to Chapter 4.3.2 Remote Services), as applicable and agreed upon by the child or youth and their family. Refer to the CLTS Waiver Program Benefit Code Crosswalk (P-02283) for the specific components of mentoring services that may be delivered remotely.

Payment for the provision of mentoring services is subject to statewide uniform rates. Refer to the Children's Long-Term Support (CLTS) Waiver Program Service Rates webpage for additional information.

##### **4.6.20.2 Service Requirements**

Providers must ensure staff support to the participant is adequate to meet the participant's individual goals.

At a minimum, team review meetings are held quarterly. Team reviews are required to include the participant (unless deemed inappropriate), the participant's parent or responsible person, the relevant service provider agency staff or supervisor (when applicable), and the support and service coordinator (SSC).

All providers of mentoring services are required to communicate with designated county staff and other providers about any events or situations that meet the definition of an incident in Chapter 9 — Health and Safety, and in accordance with Children's Incident Reporting for Providers (P-02613). Any communication must follow federal confidentiality laws. Refer to Chapter 9 for additional information about incidents and incident reporting requirements.

#### **4.6.20.3 Service Limitations**

The cost for transporting a participant youth during the provision of mentoring services may be funded through transportation services in addition to the mentoring services rate. These transportation costs can be funded only as a mileage claim, and not as a per trip cost. (Refer to the transportation service description.)

The components of mentoring services that may be delivered by remote services are limited to those outlined in the CLTS Waiver Program Benefit Code Crosswalk (P-02283).

This service may not duplicate any service that is provided under another waiver service category.

The CLTS Waiver Program is the payer of last resort and is not a source of funding for any service that would otherwise be responsibility of another public or private entity. The following programs and services must be considered prior to using waiver funding and, where applicable, be incorporated into a comprehensive plan for participants:

- Public benefits, energy assistance, or other poverty-related services.
- Court-ordered, juvenile justice, or child protective services, including protective placement and guardianship or legal services.
- Any goods or services covered by a third party, including private insurance or Medicaid, such as:
  - Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit (known in Wisconsin as HealthCheck Other Services), which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid or the Medicaid state plan services.
  - Mental health services that are otherwise available.
- Educational or other services funded by the Department of Public Instruction or Individuals with Disabilities Education Act.
- Prevocational or other services offered through the Department of Workforce Development, Division of Vocational Rehabilitation.

#### **4.6.20.4 Service Exclusions**

This service excludes activities for which the primary function is recreation.

#### **4.6.20.5 Provider Standards and Documentation**

##### **General Provider Standards**

Providers are subject to required licensing and credentialing verification, caregiver background checks, and hiring prohibitions described in Chapter 4. DHS collects and verifies required certification, license, education, experience, or other documentation during the provider registration process to initially qualify providers.

For more information related to CLTS Waiver Program service providers, refer to the *What is a CLTS Provider?* webpage.

##### **Provider Types and Qualifications**

Any agency appropriately qualified as approved by the county waiver agency (CWA) and as related to the unique service being provided (agency provider)

Providers are paraprofessionals, including but not limited to individuals who are in the participant's peer group. The peer group includes a wide range of individuals who have something in common with the participant, including similar interests, backgrounds, perspectives, and so on, and who are not necessarily in the same age group.

The CWA is required to ensure the provider receives child-specific training and training on the roles and responsibilities of the mentor. This training may be provided by any combination of the provider agency, CWA, parent and/or guardian, and/or other relevant professional who is knowledgeable of the participant's daily needs. Documentation of this training is required to be maintained in the participant's record. Providers must be involved in frequent and ongoing communication with the SSC, agency, and family, regarding child-specific updates, information, and concerns.

Mentors (individual provider)

Providers are paraprofessionals, including but not limited to individuals who are in the participant's peer group. The peer group includes a wide range of individuals who have something in common with the participant, including similar interests, backgrounds, perspectives, and so on, and who are not necessarily in the same age group.

The CWA is required to ensure the provider receives child-specific training and training on the roles and responsibilities of the mentor. This training may be provided by any combination of the CWA, parent and/or guardian, and/or other relevant professional who is knowledgeable of the participant's daily needs. Documentation of this training is required to be maintained in the participant's record. Providers must be involved in frequent and ongoing communication with the SSC, agency, and family, regarding child-specific updates, information, and concerns.

#### ***4.6.20.6 Service Documentation***

Providers must develop a written plan documenting the objectives for the participant and the objectives for the mentor. A written summary of the progress toward and changes to the objectives for the participant and their mentor is required every three months and may be developed during the team review (refer to Service Requirements). If indicated, recommendations for changes to the plan may be included. Provider reports are used to evaluate the need for modification or continuation of mentoring services. The plan and summary must be provided to the CWA (the participant's SSC). Summaries must be maintained by the CWA and reviewed at the time of other quarterly activities.

The CWA is required to maintain documentation to demonstrate this service does not supplant or duplicate supports or services that are otherwise available through one of the funding sources listed above. (Refer to Service Limitations.)

**ROCK COUNTY HUMAN SERVICES DEPARTMENT  
2024 PAYROLL SCHEDULE**

**Please Note:** *In 2024, timesheets are pre-printed and will be sent once the Provider is approved*

	<b>Paycheck Date</b>	<b>Pay Period</b>	<b>Timesheets Due Date</b>	<b>Payment cannot be guaranteed if Timesheets Received After:</b>
Tuesday	January 30	January 1 – 15, 2024	January 20	March 5
Thursday	February 15	January 16 - 31, 2024	February 5	March 20
Thursday	February 29	February 1 – 15, 2024	February 20	April 5
Friday	March 15	February 16 – 29, 2024	March 5	April 20
Saturday	March 30	March 1 – 15, 2024	March 20	May 5
Monday	April 15	March 16 – 31, 2024	April 5	May 20
Tuesday	April 30	April 1 – 15, 2024	April 20	June 5
Wednesday	May 15	April 16 – 30, 2024	May 5	June 20
Thursday	May 30	May 1 – 15, 2024	May 20	July 5
Saturday	June 15	May 16 – 31, 2024	June 5	July 20
Sunday	June 30	June 1 – 15, 2024	June 20	August 6
Monday	July 15	June 16 – 30, 2024	July 5	August 20
Tuesday	July 30	July 1 – 15, 2024	July 20	September 5
Thursday	August 15	July 16 – 31, 2024	August 5	September 20
Friday	August 30	August 1 – 15, 2024	August 20	October 5
Sunday	September 15	August 16 – 31, 2024	September 5	October 20
Monday	September 30	September 1 – 15, 2024	September 20	November 5
Tuesday	October 15	September 16 – 30, 2024	October 5	November 20
Wednesday	October 30	October 1 – 15, 2024	October 20	December 5
Friday	November 15	October 16 – 31, 2024	November 5	December 20
Saturday	November 30	November 1 – 15, 2024	November 20	January 5
Sunday	December 15	November 16 – 30, 2024	December 5	January 20
Monday	December 30	December 1 - 15, 2024	December 20	January 20
Wednesday	January 15	December 16 - 31, 2024	January 5	January 20