



Ray County Senior Services Board In Home Care Guidelines

SECTION 1: REQUIREMENTS FOR CONTRACTORS (WHERE APPLICABLE)

A. Service Provider Requirements

1. The service provider shall meet all applicable state and local licensure and safety requirements for the provision of those particular services.
2. Service providers shall maintain any licensure, certification or registration mandated by any state or local government body or Board.
3. Service providers shall allow only employees or volunteers holding a current licensure, certification, or registration to perform those tasks, duties, or functions for which licensure, certification, or registration is required by any state or local agency, body, or board.
4. Verification of insurance covering provider, its employees and agents in the form of general liability, personal injury liability and broad form contractual liability coverage in the amount of not less than \$500,000.00 per occurrence and not less than \$1,000,000.00 annual aggregate limit.
5. Recipients must be age 60 and older.
6. Recipients must be a resident of Ray County.

B. Abuse & Neglect Policy:

1. Service provider staff and volunteers shall be familiar with and shall be able to recognize situations of possible abuse, neglect, exploitation, or likelihood of serious physical harm involving older persons.
2. Conditions or circumstance which place the older person or household in the likelihood of serious physical harm shall be immediately reported to the State Elder Abuse Hotline (1-800-392-0210).

C. Training of staff (paid and volunteer)

1. Service providers who use volunteers shall develop a written plan for recruiting, orienting, training, supervising, and terminating volunteers. Training of staff and volunteers shall include comprehensive and refresher training for staff and volunteers on safety responsibilities and actions to be taken if an emergency situation occurs. Service providers should coordinate with other agencies to assure comprehensive delivery of services and reduce duplication.

D. Coordinated Community Based Care System.

1. Project Manager or other staff working with clients should be aware of other services provided by Ray County Senior Service Board as well as other community based resources for referral to other services.
2. If Contractor is unable to service a new referral for any reason including limitations of grant funding, Ray County Senior Service Board should be notified immediately for client re-assignment.
3. If Contractor is providing service delivery on a day of severe weather and service delivery cannot occur, contractor should make phone contact with the individual to check status and safety and reschedule.

E. Each Contractor agrees to comply with the requirements of the Drug-Free workplace Act.

F. Background Checks:

1. The RCSSB strongly encourages all agencies to register employees and volunteers having direct contact with vulnerable older persons with The Family Care Safety Registry. This registry checks the Employer Disqualification List (EDL), history of abuse or neglect, that the employee's CNA/PCA certification is in good standing, background check, and state highway patrol clearance.
2. At a minimum, all agency employees must clear the EDL list.

G. Non-discriminatory policy.

No client should be discriminated against for reason of age, gender, race, physical or mental disability, and financial, religious or cultural preferences.

H. Confidentiality:

1. All records that identify individual recipients of services shall be confidential and may be released, for administrative and program monitoring purposes only between Ray County Senior Services and Contractor.
2. Confidentiality of client records must be maintained at all times and should be maintained in a secured data base, locked file, or room with only authorized personnel accessing for purpose of providing services and shall not be distributed, released, sold or used for any other reason.
3. Releasing confidential information for the purpose of referral to another agency must be authorized by the client or his or her representative in writing.

I. Quality Assurance & Grievance:

1. At least once a year, if possible, Contractors should conduct satisfaction surveys to the clients who are receiving service. This may be done by evaluation questionnaires or surveys. The format may be provided by Ray County Senior Services or the Contractor or developed collaboratively to best measure client satisfaction and feedback.
2. Contractors shall establish written procedures which provide a system through which service recipients may present grievances concerning the operation of the service program. This process may be developed by individual contractors or in collaboration with Ray County Senior Service Board as the program continues to develop. Service recipients shall be provided with written information regarding the availability of the grievance procedures.
3. Client Incidence Reporting: All contractors should complete a Client Incidence report form for instances such as theft, reported abuse or neglect, or severe fall or injury while receiving one of RCSS services, including transportation, attending adult day health, or receiving in-home services.
4. A copy of any Client Incidence Report completed by an agency on a client whose service is funded by RCSSB must be provided to RCSSB in a timely manner.

J. Reporting/Invoicing:

1. Contractors will provide a monthly status report of active/inactive clients and the reason they have become inactive. A monthly invoice is required by the 10th of the following month. The invoice should have agency's name and address and other contact information including the name of the person completing the report, client's name, service category with contracted rate, hours, RCSSB responsibility, Client co-pay, if any, and total amount.
2. Any report not received by the 10th of a reporting month will result in that agency being required to absorb twenty percent (20%) of the expenditures shown on the late month's report. If necessary, that amount will be deducted from the agency's next grant award.
3. Contractors are required to have on file an **Assessment/Care Plan** for each new admit and for current clients per state regulations and provide a copy of same to RCSSB when requested.
4. Tracking: A couple receiving services should be considered as two separate clients and where applicable, hours designated to each person should be reported as such. For example, a couple receiving only basic homemaking should be counted as two clients, however, basic homemaking hours would only be listed under one name.
5. Co-Pays, Income Verification & Documentation: The Contractor will handle client signature of all contracts/ agreements and authorizations required by the agency providing the service.
 - a. The Contractor is responsible for all billing and collecting co-pays. Co-pays only apply to direct in-home services (homemaker, personal care, respite) and do not apply to case management.
 - b. Grantee staff will obtain general income and medical expenses at the time of intake.
 - c. Contracted Providers are required to view income documentation from income tax return, bank statement, or award letter to determine monthly income received from: Social Security, Pension, Rental Property, Taxable Interest, and Dividend Earnings to complete the **Income Verification Form**. The form should be available to RCSSB upon request after the initial assessment is completed.

d. Current (2014) co-pay is 25% of services provided if the client's income versus expenses is more than 200% of the current poverty level for size of household. When current poverty level data is not available, last available data will be used.

6. Allowed Medical Deductions: Prescription and over the counter medications; Medical Supplies & Equipment (Briefs, Supplements, walkers); Insurance premiums, out of pocket medical expenses for hospitalization, Physician's co-pay, and nursing home expense.
7. Providers should make phone contact with the client/family within three (3) business days from the time the referral is received by the provider. The assessment appointment should be arranged in a mutually agreeable time frame, preferably within five (5) business days from the initial contact. The time frame could vary depending on the individual situation, client cancellation, or illness.

K. Allowable Client Services include assessment, care management, homemaker, personal care, and respite services. Medication management may be obtained by Ray County Seniors from the Ray County Health Department and is not approved for reimbursement under terms of this grant or these guidelines.

L. Operational service definition:

1. **Care Management:** Care Management should be performed by an LPN, R.N., or Social Worker. Care Management should be provided for the purpose of reassessment, in-depth consultation, follow-up phone calls, coordination and referral of additional resources on client's behalf. Care Management should be limited for medical and or psychosocial interventions. Nursing care that can be obtained from the Ray County Health Department will not be reimbursable under these guidelines.
2. **Initial Assessment:** In-home evaluation and assessment of needs by R.N. or licensed Social worker is required to enroll clients and to determine home care hours and co-pay responsibilities. The evaluation should be comprehensive to include other resources, information, or referrals to other community programs from which the client and/or family caregivers may benefit
 - a. Assessment fees on client referrals made by RCSSB to in-home care agencies serving Ray County seniors under an RCSSB grant award, may be billed to RCSSB (current rate \$40.85 per visit) whether or not a client qualifies for services, even if the client qualifies and chooses no services.
 - b. Assessment fees on client referrals made by a source other than RCSSB to in-home care agencies serving Ray County seniors under an RCSSB grant award, may be billed to RCSSB (current rate (\$40.85 per visit) only when a client qualifies for services under RCSSB guidelines and another funding source is not available to fund such services (VA, MARC, Private Pay for example) and services will be delivered utilizing RCSSB grant funds.
 - c. Assessment fees on client referrals made by a source other than RCSSB to in-home care agencies serving Ray County seniors under an RCSSB grant award, may **not** be billed to RCSSB if that client does not qualify for and will not receive services utilizing RCSSB grant funds.
3. **Re-assessments:** Are to be done according to state regulations. The agency should **inquire** with the client/family if there has been a change in income or benefits such as Medicaid eligibility.
 - a. *RCSSB Income Verification Form* does not need to be completed again at the re-assessment unless there has been a change in income.
 - b. An updated **Assessment/Care Plan** should be on file and available upon request to RCSSB each time according to state regulations with a brief care manager summary.
 - c. A Re-Assessment fee may be billed to RCSSB only when in-home care agencies serving Ray County seniors under an RCSSB grant award observe changes in a client's situation sufficient to reasonably expect client has improved; and therefore, services can be reduced or eliminated or Client reasonable be expected to require a significant increase in services, either provided by RCSSB or another provider.
4. **Homemaker Definition:**
 - a. Light housekeeping, laundry, errand running, grocery shopping, light meal preparation.
 - b. In the event that a client's home requires heavy chore or cleaning before basic homemaking services

can start, it should be arranged and paid for by the client.

- c. Prohibited Activities by homemaker: Performing therapeutic/health-related activities that should be performed by a R.N., LPN, or home health aide; the administration of any over-the-counter or prescription medications; performing household services that aren't essential to the client's needs, moving of furniture, or heavy chore.
- d. Homemaker average hours:
 - i. Homebound clients- 2 hours 1 time weekly. Maximum 8 hours per month.
 - ii. Non-Homebound client: 2 hours 1-2 times per month. Maximum 4 hours per month.

5. Personal Care Definition:

- a. Assistance with bathing, oral hygiene, toileting, shampooing, shaving, dressing, and linen change by a certified nurse aide or personal care attendant.
- b. Personal Care Average hours: 2 hours, 1-2 times per week. Maximum 8-16 hours per month.
- c. Bath Visit: A bath visit is allowed in place of a regular personal care visit if appropriate to the plan of care.
- d. Bath Average: 1-2 visits per week as recommended on the initial care plan form by the care manager.

6. Respite Care Services:

- a. Primary caregiver relief provided by a certified nurse aid, personal care attendant, or homemaker/companion level.
- b. Caregiver must be providing 24-7 care for a homebound or bedfast individual.
- c. Respite Care Average hours: 4-6 hours a week. The maximum of six hours is allowed only in extreme cases of need. Clients receiving respite are not eligible for additional homemaker or personal care visits. Clients receiving in-home respite are not eligible to attend Adult Day Health funded through RCSSB or vice versa.

7. Medication Management: Medication management can be obtained by Ray County Seniors from the Ray County Health Department and is not approved for reimbursement under terms of this grant or these guidelines.

8. Client Exception Request: All providers are required to submit in writing an "Exception Request" for additional hours over these guidelines. RCSSB will respond to each request as promptly as possible. Exception requests may be submitted to RCSSB by email or phone. If an exception is approved, additional hours will be for a maximum limit of 30-60 days. Client Care Manager will submit a report at the end of 30 days reporting progress and current status of clients with approved exception at the end of 30 days. If no progress with additional hours, Care Manager is to contact family or responsible party to inform them that at the end of the initial 60 days, additional hours will cease and other care options will be the client/family's responsibility.

9. Service Unit for all levels listed above: One unit of service equals 1 hour of direct service. Units of service may be divided only by 15 minute increments. Thus, 1 hour=1 Unit, 1 hour 15 minutes=1.25 units, 1 hour 30 minutes=1.50 units, etc.

10. Holidays/Weekends: Services should not be delivered on holidays that would increase the unit rate as agreed upon in the Contractor's agreement. The holiday policy should reflect what each organization has deemed as holidays and what would constitute a higher rate to their clientele. Weekend care that would result in higher provider fees should be delivered only in unusual circumstances. I.e. Primary caregiver works weekends.

11. Cancellation: Clients should be informed of the expectation of maintaining their responsibilities to the service agreement in terms of canceling, rescheduling, or not being at home when services have been arranged. Repeated unscheduled cancellations may require discharge of services so that another client may benefit.

12. Termination of services: In the event that the client is not fulfilling their co-pay obligation as

arranged and agreed upon between each Contractor and client at the time of opening a case, contractor reserves the right to terminate services as guided by each contractor's policy regarding "non-payment" of services. RCSSB will not be responsible for non-payments of the co-pays. RCSSB should be notified of the termination due to non-payment. The Care Manager should reassess financial eligibility to determine if co-pay needs to be re-adjusted due to increased medical expenses.

M. Funding Policies

1. Grant Awards are distributed one-half in January and one-half in June unless an agency and RCSSB develop a different funding cycle such as monthly or quarterly billing or one-time grant awards.
2. RCSSB maintains an operating and service contingency fund through which special requests may be funded as approved by RCSSB during any funding cycle.
3. A funded agency having on Dec. 31 of any grant year funds not yet distributed to them forfeits any and all rights to those funds with those monies reverting back to the RCSS Board.
4. An agency holding grant funds not expended (considered carryover in the past) at the end of a fiscal year will forfeit those funds. Unexpended funds will be returned to RCSSB following the submission of December expenditures reported by January 10 of the next year.
5. To allow for unexpected client changes in the last month of any fiscal year, an agency which overspends its grant award by no more than \$1,000 may apply for and receive each year a one-time relief grant to cover that overage if that request is made by January 10 of the new year.
6. No additional monies for the recently completed year will be awarded by RCSSB after the 10th of January in the new grant year.

N. Forms To Be Utilized:

1. Assessment/Care Plan (MO 580-2880; 12-09)
2. Income Verification (RCSSB Form)
3. Client Exception Request
4. Client Incidence Report
5. Monthly Client Status report
6. Provider Financial Report
7. Other forms as approved by RCSSB

Service Criteria:

1. Recipients must be age 60 and older and resident of Ray County.
2. Clients utilizing service can sustain in the home in a safe manner with the amount of services provided. If determined that the client is in danger without increased services, every effort should be made to provide information about options prior to discharge from RCSSB.
3. Every effort by both Contractor and RCSS will be made to insure that no duplication of services being provided to the client by another funding source. This screening process will be a question routinely asked during the assessment and accepted by the interviewer as accurate. If discovered that the client may be eligible for services through the Department of Health and Senior Services, Veterans' Administration, the Ray County Health Department or other agency, information should be supplied to the client on how to apply for those services.
4. All clients should have the ability to sign a contractor's service agreement and service signature verification forms, or another authorized representative should be present for signature.

A copy of these guidelines or another set of guidelines applicable to the grant holder's contact for services must accompany the signing of that contract in duplicate; one signed copy for the grant holder; one signed copy for RCSSB.

Grantee Signature & Date _____

RCSSB Initials & Date: _____