

(Adult Day Health Care)

- (4) Stairs, ramps, and interior floor have non-slip surfaces or carpet;
- (5) The facility is free of hazards (e.g., exposed electrical cords, improper storage of combustible material);
- (6) All stairs, ramps, and barrier-free bathrooms are equipped with usable handrails; and
- (7) A written plan for emergency care and transportation is documented in the client's file.

Staffing: Each center must be staffed at all times by at least one full-time trained staff person. ~~ADHC staff must be at least 19 years old.~~

The center shall maintain a ratio of direct care staff member to clients sufficient to ensure that client needs are met. The center shall develop written job descriptions and qualifications for each professional, direct care, and non-direct care position.

Provider Skills and Knowledge: Direct care staff members must –

- a. Have training or one or more years' experience in working with adults in a health care/social service setting;
- b. Have knowledge of CPR and first aid;
- c. Be able to recognize distress or signs of illness in clients;
- d. Have knowledge of available medical resources;
- e. Have access to information on each client's address, telephone number, and means of transportation; and
- f. Know reasonable safety precautions to exercise when dealing with clients and their property.

The provider must have a licensed nurse on staff, or contract with a licensed nurse, who will provide the health assessment/nursing service component of ADHC and supervise ADL/personal care and ADL training component.

Counseling must be provided only by a certified social worker, a certified master social worker, or a certified professional counselor.

5. ADHC rates and frequency: The frequency of service is a calendar day of at least four hours. In the event that a waiver client must leave the ADHC facility due to an unplanned need and has been there less than 4 hours, this is considered a full day for reimbursement purposes. DHHS Central Office establishes a statewide rate for ADHC. ~~This established statewide rate may change annually.~~
6. ADHC record keeping

The provider shall maintain the following in each client's file:

- a. Adult Day Health Care plan; and
- b. Phone numbers of persons to contact in case of emergency.

#### D. CHILD CARE FOR CHILDREN WITH DISABILITIES

1. Description: Child Care for Children with Disabilities (CCCD) is child care provided to children from birth through age 18 on the average of less than 12 hours per day, but more than two hours per week on a regular basis, in lieu of caregiver supervision. Care is provided in a child's home by an approved provider or in a setting approved or licensed by the Department of Health and Human Services.

The need for this service must be reflected in one or more assessment areas of the child's plan of services and supports.

2. CCCD conditions of provision: The services coordinator shall include Child Care for Children with Disabilities in the plan of services and supports only to allow the usual caregiver(s) to:

- a. Accept or maintain employment; ~~or CCCD expenditures must be cost effective in comparison to employment wages and benefits received by the usual caregiver(s). Goods or services received in place of wages are not considered in comparison of costs. Verification of the hours/schedule of employment is required. Persons who are self-employed shall provide a statement of hours worked.~~
- b. Seek employment. To meet this need, CCCD may be authorized up to 12 hours per week for two consecutive months within any 12-month period. Each time a parent or usual caregiver loses employment, s/he is entitled to two months of child care to allow him/her to seek employment.
- ~~b.c.~~ Enroll in and regularly attend vocational or educational training to attain a high school or equivalent diploma or an undergraduate degree or certificate which enables the caregiver(s) to increase future or maintain current earning power. Note: This excludes students pursuing second undergraduate degrees, second certificates, ~~or any post-graduate schooling, degree, or classes to maintain a professional license or certificate. Verification of class schedule is required.~~

School System Services: No service which is the responsibility of the school system may be provided under the waiver. The services coordinator shall not authorize Child Care for Children with Disabilities for the hours the child is attending school.

3. CCCD standards: Waiver providers of CCCD must be approved or licensed through DHHS. Waiver providers of CCCD shall obtain adequate information on the medical and personal needs of each child, if applicable; and observe and report all changes to the services coordinator.

~~Each provider of Child Care for Children with Disabilities must be at least age 19. If no provider age 19 or older is available and acceptable to the family, and the family requests a younger provider, the services coordinator may authorize a provider age 16, 17, or 18 (see 474 NAC 3-002.03A3). A provider age 18 or younger (unless s/he is an emancipated minor) shall obtain the signature of his/her parent or legal guardian on the Services Provider Agreement.~~

(Chore Services)

3. Home care/chore standards

A home care/chore provider may be an individual or agency. HHS annually contracts with providers of home care/chore to ensure that all applicable federal, state, and local laws and regulations are met.

The provider shall have had training and/or experience in carrying out home care/chore services comparable to those which will be authorized.

The home care/chore provider shall obtain adequate information on the medical and personal needs of each client, if applicable, and observe and report all changes to the services coordinator.

Each home care/chore provider must be at least 19 years old and shall –

- a. Have knowledge of basic first aid skills and of available emergency medical resources, if providing supervision or full-time, live-in housekeeping, personal care, and escort services; and
- b. Exercise reasonable caution and care in the use and storage of clients' equipment, appliances, tools, and supplies.

~~If no provider age 19 or older is available and acceptable to the client/family and the client/family requests a younger provider, the services coordinator shall consider the following before authorizing a younger provider:~~

- ~~a. The functioning level of the client;~~
- ~~b. The client's ability to self-direct the activities of the provider;~~
- ~~c. The availability of back-up assistance;~~
- ~~d. The capacity of the provider to meet the client's needs in the case of an emergency;~~  
~~and~~
- ~~e. Which of the home care activities will be authorized.~~

~~Staff may request reference statements from two responsible adults (not relatives) attesting to the potential provider's reliability and responsibility to provide waiver services. A provider age 18 or younger (unless s/he is an emancipated minor) shall obtain the signature of his/her parent or legal guardian on the Services Provider Agreement.~~

Each agency provider shall –

- a. Employ home care/chore staff based upon their qualifications, experience, and demonstrated abilities;
- b. Provide training to ensure that home care/chore staff are qualified to provide the necessary level of care. Agree to make training plans available to the Department; and
- c. Ensure adequate availability and quality of service.

#### 4. Home care/chore rates

Home care/chore rates shall be established by HHS central office. These established rates may change annually.

Services may be authorized in frequencies of hourly, daily, or by the job.

(Respite Care)

Respite Care for a Live-in Housekeeper: Respite care may be used to relieve a live-in housekeeper. However, if respite care is provided for a full day, no live-in housekeeper payment may be approved for that day. Respite care paid for a portion of a day will not change that day's live-in housekeeper rate.

4. Respite Care standards

A provider may be an individual or agency. HHS annually contracts with providers of respite care to ensure that all applicable federal, state, and local laws and regulations are met.

Respite providers must be age 19 or older. ~~If no provider age 19 or older is available and acceptable to the client/family, and the client/family requests a younger provider, the services coordinator shall consider the following before authorizing a younger provider:~~

- ~~a. The functioning level of the client;~~
- ~~b. The client's ability to self-direct the activities of the provider;~~
- ~~c. The availability of back-up assistance; and~~
- ~~d. The capacity of the provider to meet the client's needs in the case of an emergency.~~

~~Staff may request reference statements from two responsible adults (not relatives) attesting to the potential provider's reliability and responsibility to provide waiver services. A provider age 18 or younger (unless s/he is an emancipated minor) shall obtain the signature of his/her parent or legal guardian on the Services Provider Agreement.~~

Respite providers must agree never to leave the client alone while providing the service.

Respite providers shall obtain adequate information on the medical and personal needs of each client. The provider shall observe and report all changes to the services coordinator.

Agency provider standards

Each agency provider shall –

- a. Employ respite care staff based upon their qualifications, experience, and demonstrated abilities;
- b. Provide training to ensure that respite staff are qualified to provide the necessary level of care. Agree to make training plans available to the Department; and
- c. Ensure adequate availability and quality of service.

(Non-medical transportation)

3. Transportation conditions of provision

~~Transportation services are available to meet the following needs:~~

- ~~a. Nutrition needs (e.g., grocery shopping and taking advantage of available nutrition programs);~~
- ~~b. Maintenance or budget program needs, such as--
  - ~~(1) Department of Health and Human Services for benefit programs;~~
  - ~~(2) Social Security Administration;~~
  - ~~(3) Veteran's Administration; and~~
  - ~~(4) Financial institutions;~~~~
- ~~c. Legal sources (e.g., attorneys, Legal Aid Societies);~~
- ~~d. Housing location;~~
- ~~e. Non-medical escort (see "Note" below under "Medical Transportation" for rate setting); or~~
- ~~f. Other needs identified during client assessment.~~

Non-medical transportation is covered by this waiver program for the following assessed needs:

1. Apply for Benefits: To allow the client to apply or be recertified for benefits and services from programs when a face-to-face interview is required for:
  - a. Nebraska Department of Health and Human Services;
  - b. Social Security Administration; or
  - c. Veteran's Administration.
2. Shop for Food and Essential Items: To allow a client to shop for food and essential items a maximum of one round trip per calendar week.
3. Obtain Legal Services: To allow the client to receive legal counsel from legal aid societies, private attorneys, county attorneys and other professional legal sources for non-criminal matters a maximum of one round trip per calendar month.
4. Obtain Financial Services: To allow the client to take care of financial matters at a banking institution a maximum of one round trip per calendar month.
5. Access Waiver Services: To allow the client transportation to and from Adult Day Health Services or Independence Skills Building.
6. Secure Housing: To allow a client to tour and secure adequate housing or an independent living arrangement. Authorization is allowed for a maximum of five round trips in any twelve-month period. Additional trips may be authorized if the client's health and safety is jeopardized.

Exclusion: Transportation may not be authorized to obtain educational services for children.

5-006 GENERAL PROVIDER STANDARDS

GENERAL STANDARDS FOR ALL WAIVER PROVIDERS:

All home and community-based services (HCBS) waiver providers are Medicaid providers (see 471 NAC 2-000). All HCBS waiver providers shall meet the following general provider standards:

1. Follow all applicable Nebraska Health and Human Services policies and procedures (Nebraska Administrative Code Titles 465, 471, 473, 474, and 480).
  - a. Bill only for services which are authorized and actually provided.
  - b. Submit billing documents after service is provided and within 90 days.
2. Accept payment as payment in full for the agreed upon service(s) unless the client has been assigned a portion of the cost. Provider will not charge clients any difference between the agreed upon rate and private pay rate.
3. Agrees not to provide services, if s/he is the legally responsible relative (i.e., spouse of client or parent of minor child who is a client).
4. Not discriminate against any employee, applicant for employment, or program participant or applicant because of race, age, color, religion, sex, handicap, or national origin, in accordance with 45 CFR Parts 80, 84, 90; and 41 CFR Part 60.
5. Retain financial and statistical records for four years from date of service provision to support and document all claims.
6. Allow federal, state, or local offices responsible for program administration or audit to review service records, in accordance with 45 CFR 74.20 - 74.24; and 42 CFR 431.107. Inspections, reviews, and audits may be conducted on site.
7. Keep current any state or local license/certification required for service provision.
8. Provide services as an independent contractor, if the provider is an individual, recognizing that s/he is not an employee of the Department or of the State.
9. Agree and assure that any false claims (including claims submitted electronically), statements, documents, or concealment of material fact may be prosecuted under applicable state or federal laws (42 CFR 455.18).
10. Respect every client's right to confidentiality and safeguard confidential information.
11. Understand and accept responsibility for the client's safety and property.
12. Not transfer this agreement to any other entity or person.
13. Operate a drug-free workplace.
14. Not use any federal funds received to influence agency or congressional staff.
15. Not engage in or have an ongoing history of criminal activity that may be harmful or may endanger individuals for whom s/he provides services. This may include a substantiated listing as a perpetrator on the child and/or adult central registries of abuse and neglect.
16. Allow Central Registry checks on himself/herself, family member if appropriate, or if an agency, agree to allow Department of Health and Human Services staff to review agency policies regarding hiring and reporting to ensure that appropriate procedures regarding abuse, neglect, and law violations are in place.
17. Have the knowledge, experience, and/or skills necessary to perform the task(s).
18. Report changes to appropriate Department staff (e.g., no longer able/willing to provide service, changes in client function).
19. Agree and assure that any suspected abuse or neglect will be reported to law enforcement and/or appropriate HHS staff.
20. Be age 19 or older if an individual provider; or assure that agency staff are age 19 or older if serving as director or agency representative or providing in-home client services.