

## **Addendum 104            Supportive Home Care**

The provision of contracted, authorized, and provided Supportive Home Care services shall be in compliance with the provisions of this agreement, the service description and requirements of this section. The Rates and Service Codes chart in the Lakeland Care District (LCD) Service Contract will specify which supportive home care services LCD is contracting **with** your organization.

### **Definition**

**Supportive home care (SHC) services** are services that provide necessary assistance for eligible persons in order to meet their daily living needs and to insure adequate functioning at home, in small integrated alternate care settings and in the community. Supportive home care services differ from the state plan services in that they are monitored by care managers and provide services as indicated in a plan of care. Services include four categories of services: personal care, routine home care, supervision, and chore services.

The provision of SHC services within substitute care (nursing home, community based residential facility, residential care apartment complex, or adult family home) shall be provided under the provision and license of that setting and shall not be billable under Provider SHC service addendum.

### **SHC: Personal Care**

Supportive Home Care Personal Care is the provision of hands-on assistance with activities of daily living such as eating, feeding, bathing, grooming, personal hygiene, dressing/undressing, toileting, exercising, transferring, and ambulating (including the use of a walker, cane, etc.) care of hair and care of teeth or dentures. Supportive Home Care Personal Care can also include preparation and cleaning of areas used during personal care activities such as the bathroom and kitchen, the provision of assistance with the use of adaptive equipment and monitoring of administration of medications that are ordinarily self-administered.

### **SHC: Routine Home Care**

Supportive Home Care Routine Home Care is the provision of routine housecleaning and housekeeping activities performed for a member that are not associated with the provision of personal care services. Routine home care consists of household tasks that take place on a daily, weekly or other regular basis, and home maintenance activities including: washing dishes, laundry, dusting, vacuuming, meal preparation and shopping for food (where no feeding of the member is involved); other shopping and similar activities that do not involve hands-on care of the member.

### **SHC: Supervision**

Supportive Home Care Supervision is the provision of supervision to a member for the purpose of assisting him or her in safely accessing their surroundings—including home and community.

Services may consist of observation of the member for oversight direction to complete activities of daily living, instrumental activities of daily living, or companionship for the participant (does not include hands-on care as provided under personal care). Providers may be members of the individual's family. Family members must meet the same standards as other supportive home care providers

### **SHC: Chore Services**

Supportive Home Care Chore Services is the provision of intermittent major household tasks in and around a member's home to ensure safe and secure access. They must be performed seasonally or in response to some natural or other periodic event. They include: outdoor activities such as snow removal, lawn and yard care; indoor activities such as window washing, cleaning of attics and basements, cleaning of carpets, rugs and drapery, refrigerator/freezer defrosting; air conditioning installation and removal, assistance with moving from one location to another and the necessary cleaning of vehicles, wheelchairs and other adaptive equipment and home modifications such as ramps.

### **Service Requirements**

LCD members receiving Supportive Home Care services shall have an identified outcome that necessitates the provision of supportive home care.

### **Standards, Training and Competency**

#### **Standards**

Supportive Home Care Providers must meet the standards of this agreement.

#### **Training**

##### **SHC Personal Care, Routine Home Care, and Supervision Training**

Providers shall ensure staff providing SHC Personal Care, Routine Home Care, and Supervision receive training in the following areas:

- 1.) Provider agency's recording and reporting requirements for documentation of services, critical incident and emergency protocol, handling of complaints, and other procedures and information from the Provider deemed necessary to ensure the safe and appropriate provision of service.
- 2.) Training on the population being served.
- 3.) Training on the provision of the services being provided.
- 4.) Training on the needs, strengths, and preferences of the individual(s) being served.
- 5.) Training of rights and confidentiality of individuals supported.
- 6.) Information and Provider procedure for adherence to the following LCD policies:
  - a. Critical Incident Reporting
  - b. Restraint and Seclusion Policy and Procedure
  - c. Communication Reporting

### **SHC Chore Services Training**

Provider shall ensure staff providing SHC Chore Services have training in the following areas:

- 1.) Provider agency's recording and reporting requirements for documentation of the services.
- 2.) Training on the provision of services being provided.
- 3.) Information and Provider procedure for adherence to the following LCD policies:
  - a. Critical Incident Reporting
  - b. Restraint and Seclusion Policy and Procedure
  - c. Communication Reporting

### **Competency**

Provider shall ensure competency of individual staff performing supportive home care services to LCD members. Competency shall include assurance of the general skills and abilities necessary to perform assigned tasks.

### **Staff to Member Ratio**

Supportive Home Care services to LCD members will be provided in 1:1 ratio of provider staff to LCD member, unless the description in the *Rates and Service Codes* chart of the contract includes rates and services for ratios different from this level.

### **Documentation—Personal Care, Supervision and Routine Home Care**

Providers shall prepare and send a written report to LCD at least every six months. **LCD CM/RN may request a written report monthly. All reports must be attached with the invoice that is sent to LCD. If the report is not sent at least every six months, LCD will not pay the Provider until the report is submitted.**

The report shall contain the following elements:

1. List of Supportive Home Care Services being provided
2. Progress or deficits
3. Statement or recommendation for continuation with services

### **Documentation--Chore Services**

Providers of Supportive Home Care Chore Services shall provide documentation per the billing requirements of this agreement.

### **Staffing Assignment and Turnover**

#### **Personal Care**

The provision of SHC personal care encompasses direct hands-on care to members. The intimate and personal nature of SHC personal care necessitates a trusting and respectful relationship

between the care provider and the individual. In order to establish and preserve this relationship, providers of SHC personal care must take specific precautions to establish and monitor SHC personal care services. Providers of SHC personal care must have a process in place for members to provide feedback on their experience with the staff performing personal care task. This process shall allow for members to express concerns to individuals other than the individual who performs the tasks. SHC personal care provider agrees to make reasonable accommodations for members to request and retain specific personal care staff. Under this agreement, the provider retains authority to assign and change staff assignments while accepting consideration of member preference and the need for trust and consistency in the provision of personal care services.

### **Supervision & Routine Home Care**

The provision of SHC Supervision and Routine Home Care encompasses services that typically include staff coming into a member's home at regular intervals. Provider and LCD agree that to ensure the satisfaction of members in this service, the provider agrees to assess member satisfaction by monitoring the assignment and turnover of its direct care staff. Provider agrees to have a process in place to gather member feedback on service satisfaction and respond when appropriate. Provider retains authority to assign and reassign staff under this agreement while accepting responsibility for considering member preference in that responsibility.

### **Billable Units**

Provider rate for provision of supportive home care services will incorporate all administrative and business functions related to the provision of service. Contracted rates expect the provision of administrative functions necessary for services and are not billable beyond units provided to each authorized member.

- 1.) Only units of services directly related to the authorized member may be billed under this service. The following services constitute directly related services:
  - a. Face-to-face contact with member by direct care staff
  - b. Travel to a member for direct contact
    - i. Travel from the member is not billable to that member.
      1. This travel event may be billable to the next member if provider staff is traveling to another member for *travel to* billable service
    - ii. Transporting a member while providing Supportive Home Care services is not billable above contracted rate. Provider rates include travel during the provision of service(s).
  - c. Up to two hours every six months for the purpose of initiating services, attending staffing as requested by LCD, and preparing reporting documentation for LCD.
  - d. Exceptions to the billable units criteria for Supportive Home Care services will be considered for provision of service(s) to specific members when coordination and follow up necessary for the performance of services to a particular member require extensive coordinating and collaboration. Requests for exceptions to billable units criteria shall be requested in writing to the LCD staff requesting the provision of service(s). Written requests will be reviewed with LCD care coordination staff and

- administration for consideration. Providers may not bill for exceptions prior to written response from LCD.
- 2.) Only one Provider agency employee is billable for the same service at the same time.
  - 3.) Provider administrative time related to business operations of services is not billable to LCD. Provider agency staffing, training, orientation and supervision are not billable units of service to authorized members. Performance of these and related business functions must be factored into Provider's rates.
  - 4.) Provider services must be authorized **and** provided under the requirements of this agreement to be billable to LCD.
  - 5.) Services are billable at contracted rates. Increments of 15 minutes are used to bill LCD up to the authorized number of units for the member. Fifteen-minute increments are determined by 7.5-minute timeframes. Increments of less than 7.5 minutes are not billable; increments of 7.5 to 15 minutes are billable at 15 minutes.
  - 6.) Providers of Supportive Home Care Services are required to provide for all identified care needs during the provision of Supportive Home Care Services and are specifically prohibited from billing fraudulently for additional services during the provision of these services.