

Aging AND PEOPLE WITH DISABILITIES

In-Home Services: Eligibility, Authorization, and Payments

IN-HOME SERVICES

Definition:

Services that provide assistance with activities of daily living (ADL) and instrumental activities of daily living (IADL; also known as self-management tasks) and 24-hour availability hours to assist individuals to remain in their own home.

Note: 24-hour availability hours are not part of an hourly plan. To receive 24-hour availability hours the individual must qualify based on OAR 411-030-0070(4) criteria.

In-home services include hours for: 24-hour Availability and the ADLs & IADLs listed below	
ADLs	IADLs
Mobility: - Ambulation & Transfers	Housekeeping/Laundry
Eating	Meal Preparation: - Breakfast, Lunch & Dinner/Supper
Elimination: - Bladder, Bowel & Toileting	Medication/Oxygen Management
Cognition/Behavior: - Adaptation, Awareness, Judgment, Memory, Orientation, Danger to Self or Others, Demands on Others & Wandering	Shopping
Bathing/Personal Hygiene	Transportation
Dressing/Grooming	

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Eligibility for in-home services - An individual must meet:

- ▶ Medicaid service eligibility based on age, blindness or disability;
- ▶ Service priority level (SPL) eligibility criteria of 1-13;
- ▶ All other financial and non-financial Medicaid eligibility criteria, such as income must be under 300 percent of the SSI income standard.

Provider:

The provider must be a Homecare Worker (HCW) or a Contracted In-Home Care Agency.

Procedure:

- ▶ Service eligibility is determined by conducting a CAPS Title XIX assessment in Oregon ACCESS. To be eligible, the individual must have an assessment result of SPL 1-13.
- ▶ Case managers create a 546 In-home Service Plan form after approving the OACCESS CAPS in-home service benefit and plan.
- ▶ The case manager must sign the 546 form to authorize hours. The form is then used to authorize CEP voucher hours for a HCW or in-home agency through the CEP voucher system. This is used for both HCWs or contracted in-home agencies. **Note:** A few in-home agencies may not be using the voucher system for authorizing and paying hours yet. These agencies still use the 599 Agency Provider Invoice.
- ▶ A CMS case for each client is required. This should be done by integrating the OACCESS case to the CMS mainframe.
- ▶ Client pay-in is entered on the SFMU screens. A guide for pay-in is located on the [SPD Staff Tools](http://www.spd.state.or.us/spd/tools/cm/pay_in/index.htm) website. The direct link is: http://www.dhs.state.or.us/spd/tools/cm/pay_in/index.htm
- ▶ Payment for HCWs and most in-home agencies is made through the mainframe screens (see last page of this document for screen titles).

Applied Rules:

- ▶ 411-015-0000 through 411-015-0100
Long-Term Care Service Priorities for Individuals Served
- ▶ 411-030-0001 through 411-030-0100
In-Home Services
- ▶ 411-031-0020 through 411-031-0050
Homecare Workers Enrolled in the Client-Employed Provider Program

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Forms and Systems: In-Home Services Program

Eligibility

CAPS Assessment:

- ▶ Determines service eligibility
- ▶ SPL Result and Needs Summary screen has each need level and SPL results
- ▶ Full Benefit Results screen displays the provider rates for the ALF, RCF, AFH and RAFH levels and the maximum assessed hours and spousal pay results

CAPS Service Planning:

- ▶ Benefits – approving the benefit sends a service eligibility record to the SELG mainframe record
- ▶ Hours Segment – hours can be approved based on Tier 1, 2 or 3 security rights. Case managers have Tier 1 rights and can approve the Hour Segment as long as the hours for each need do not exceed the maximum allowed hours. Detailed information on these 3 tiers of security is located on the [SPD Case Management Tools](#) website in the [Assessment, Service Planning and CAPS](#) section. The direct link to the document is: http://www.dhs.state.or.us/spd/tools/cm/new_caps/mgr_asmt_override.pdf
- ▶ Plan and services within the plan – this section has providers, needs provided, assignment of hours to providers, 546 Details and Task List

SELG Mainframe and the CAPS Service Category/Benefit:

- ▶ The Service Category/Benefit (Svc Cat) on SELG is created by approving the CAPS Benefit section in OACCESS
- ▶ SELG displays information such as the CAPS assessment results, provider payment levels and service eligibility information, including the service category/benefit begin and end dates

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Authorization

- | | |
|-------------------|--|
| ▶ SDS 914 | Service Options * |
| ▶ UCMS, PCMS | Financial |
| ▶ SDS 514 | Exceptional Rate Request * |
| ▶ SDS 546N | In-home Service Plan – must be signed by case manager to authorize hours |
| ▶ SDS 598N or 598 | Task List |
| ▶ SDS 598B | CEP voucher/invoice |
| ▶ SDS 599A | Agency Provider Invoice In-home Service |
| ▶ SDS 541 | Notice of Eligibility and Responsibility |

* Note: these are links to info on the SPD Case Management Tools website

Authorization and Payment

Mainframe:

- ▶ Homecare Worker: HATH, HPAY
- ▶ In-home Agency, Home Delivered Meals and Adult Day Service: AATH, APAY

Provider Information

- | | |
|-----------------------|--|
| ▶ OACCESS Prov Search | Oregon ACCESS is used to search for provider information |
| ▶ HINQ,p,provider # | Displays voucher information for specific provider |
| ▶ HINQ,r,prime # | Displays voucher information for specific client |
| ▶ HINQ,v,voucher # | Displays voucher information for specific voucher |

Program Codes

_1, A1, _3, B3, _4, D4, _5

Case Descriptors

In-home: APD, IHC
Spousal Pay: SPH
Specialized Living Services: SAM
Independent Choices: ICP

Need/Resource Codes

HK