Residential Habilitation and Support - Hourly

(currently under CIHW only)

SERVICE DEFINITION

RHS Hourly services mean individually tailored supports that are specified in the PCISP that assist with the acquisition, retention or improvement in skills related to living in the community. These supports include adaptive skill development, assistance with activities of daily living, community inclusion, transportation, adult educational supports, and social and leisure skill development that support the individual to live successfully in their own home. HCBS provided during an acute care hospitalization assists the individual to maintain current levels of functioning and support, provides ongoing coordination of care, and provides assurance that new or additional needs are identified and addressed by the person-centered planning team as the individual prepares to return to the community. The HCBS provided in an acute care hospital must not be duplicative of services available in the acute care hospital setting. A relative of the individual may be a provider of RHS services. The decision that a relative is the best choice of persons to provide these services is a part of the person-centered planning process and is documented in the PCISP. When the provider is a relative, there is an annual review by the IST to determine whether the individual's relative should continue to be the provider of RHS services. RHS Hourly Level 1 and Level 2 services provide up to a full day (24-hour basis) of services and/or supports for individuals assigned an Algo score of 0, 1 or 2, or individuals assigned any Algo level not meeting criteria for RHS Daily rate.

The service is billable as either of the following:

- RH1O – Level 1, for intermittent use of RHS Level 1 at 35 or fewer hours per week
- RH2O – Level 2, for greater than 35 hours per week of RHS

The nationally recognized Inventory for Client and Agency Planning or ICAP was selected to be the primary tool for individual assessment.

The ICAP assessment determines an individual's level of functioning for broad independence and general maladaptive factors.

The ICAP addendum, commonly referred to as the behavior and health factors, determines an individual's level of functioning on behavior and health factors.

These two assessments determine an individual's overall Algo level, which can range from 0-6. Algos 0 and 6 are considered outliers representing those who are the lowest and the highest on both ends of the functioning spectrum. On review, the State may manually adjust the designation of an individual from an Algo 5 to an Algo 6. Although this individual continues receiving the Algo 5 budget, the Algo 6 designation indicates a need for additional oversight of the individual.

The stakeholder group designed a grid to build the allocations. The grid was developed with the following tenets playing key roles:

- Focus on daytime programming
- Employment
- Community integration
- Housemates

The OBA is then determined by combining the overall Algo (determined by the ICAP and ICAP addendum), age, employment, and living arrangement.

Reimbursable Activities: RHS-Hourly includes the following reimbursable activities:

- Direct support, monitoring and training to implement the PCISP outcomes for the individual through the following:
  - ➢ Assistance with personal care, meals, shopping, errands, chore and leisure activities, and transportation (excluding transportation that is covered under the Indiana Medicaid State Plan)
  - ➢ Assurance that direct service staff are aware and active individuals in the development and implementation of PCISP, behavioral support plans and risk plans
  - ➢ Coordination and facilitation of medical and nonmedical services to meet healthcare needs, including physician consults, medications, development and oversight of a health plan, utilization of available supports in a cost-effective manner, and maintenance of each individual's health record when the individual receiving RHS does not also use wellness coordination Services. Collaboration and coordination with the wellness coordinator when the individual receiving RHS also uses wellness coordination services.

ALGO LEVEL DESCRIPTORS/ICAP/OBA

The following descriptors appear in 460 IAC 13-5-1 Algo levels

Level: 0 (low), Descriptor: Algo level zero (0):

- High level of independence with few supports needed
- No significant behavioral issues
- Requires minimal residential habilitation services

Level: 1 (Basic), Descriptor: Algo level one (1):

- Moderately high level of independence with few supports needed
- Behavioral needs, if any, can be met with medication or informal direction by caregivers through the Medicaid state plan services
- Likely a need for day programming and light residential habilitation services to assist with certain tasks, but the individual can be unsupervised for much of the day and night

Level: 2 (Regular), Descriptor: Algo level two (2):

- Moderate level of independence with frequent supports needed
- Behavioral needs, if any, can be met with medication or light therapy, or both, every one (1) to two (2) weeks
- Does not require twenty-four (24) hours a day supervision
- Generally able to sleep unsupervised, but needs structure and routine throughout the day

Level: 3 (Moderate), Descriptor: Algo level three (3):

- Requires access to full-time supervision for medical or behavioral, or both, needs
- Twenty-four (24) hours a day, seven (7) days a week staff availability
- Behavioral and medical supports are not generally intense
- Behavioral and medical supports can be provided in a shared staff setting

Level: 4 (High), Descriptor: Algo level four (4):

- Requires access to full-time supervision for medical or behavioral, or both, needs:

1. Twenty-four (24) hours a day, seven (7) days a week frequent staff interaction
2. Requires line of sight support

- Has moderately intense needs that can generally be provided in a shared staff setting

Level: 5 (Intensive), Descriptor: Algo level five (5):

- Requires access to full-time supervision with twenty-four (24) hours a day, seven (7) days a week absolute line of sight support
- Needs are intense
- Needs require the full attention of a caregiver with a one-to-one staff to individual ratio
- Typically only needed by those with intense behavioral needs, not medical needs alone

Level: 6 (High Intensive), Descriptor: Algo level six (6):

- Requires access to full-time supervision: 1. Twenty-four (24) hours a day, seven (7) days a week 2. More than a one-to-one staff to individual ratio
- Needs are exceptional
- Needs require more than one (1) caregiver exclusively devoted to the individual for at least part of each day
- Imminent risk of individual harming self or others, or both, without vigilant supervision

Note: When wellness coordination services are used in addition to RHS hourly services, the wellness coordinator is responsible for the development, oversight and maintenance of a wellness coordination plan and the health-related risk plan, noting that a comprehensive medical risk plan may substitute for the wellness coordination plan or individual risk plans. The registered nurse (RN) or licensed practical nurse (LPN) determines the appropriate mode of training to be used for the direct support professional to ensure implementation of risk plans, noting that training may be by staff trained by the RN or LPN with the exception of nursing delegated tasks or other items the nurse feels that only a licensed nurse should train. Additionally, the RN or LPN ensures completion of training of the direct support professional to ensure implementation of risk plans.

Service Standards The following service standards apply to Residential Habilitation and Support-Hourly services:

- Services must address needs identified in the person-centered planning process and be outlined in the PCISP.
- RHS Hourly services should complement but not duplicate habilitation services being provided in other settings.
- Services provided must be consistent with the individual's service plan.

Documentation Standards RHS-Hourly documentation must include:

- Services must be outlined in the PCISP.
- Data record of staff-to-individual service must document the complete date and time entry (including a.m. or p.m.). All staff members who provide uninterrupted, continuous service in direct supervision or care of the individual must make one entry. If a staff member provides interrupted service (one hour in the morning and one hour in the evening), an entry for each unique encounter must be made. All entries should describe an issue or circumstance concerning the individual. The entry should include complete time and date of entry and at least the last name, first initial of the staff person making the entry.
- If the person providing the service is required to be professionally licensed, the title of that individual must also be included. For example, if a nurse is required, the nurse's title should be documented.
- Any significant issues involving the individual requiring intervention by a healthcare professional, case manager or BDS staff member that involved the individual are also to be documented.
- Quarterly reporting summaries are required.
- Documentation must be in compliance with 460 IAC 6.

Limitations The following limitations apply to Residential Habilitation and Support-Hourly services:

- Reimbursable waiver funded services furnished to an adult waiver individual by a paid relative and/or legal guardian may not exceed a total of 40 hours per week per paid relative and/or legal guardian caregiver. (For a list of individuals defined as relatives, see Section 6.9: Parents, Guardians and Relatives Providing FS and CIH Waiver Services.
- Providers may not bill for RHS Hourly reimbursement for time when staff/paid caregiver is asleep. Only awake, engaged staff can be counted in reimbursement. (A team may decide that a staff or contractor may sleep while with an individual, but this activity is not billable.)
- Providers may only bill for RHS reimbursement during the time when an individual receiving HCBS waiver services is admitted to an acute care hospital setting for inpatient medical care or other related services for surgery, acute medical condition or injuries if all conditions specified in guidance under Section 2.5: Billing and Reimbursement for Waiver Services in this provider reference module are met.
- Providers may not bill for RHS reimbursement during the time when an individual is admitted for an extended stay hospitalization, or when individuals require long-term care in a facility-based setting including but not limited to nursing homes, rehabilitation centers and/or treatment facilities. (As specified under guidance in Section 2.5: Billing and Reimbursement for Waiver Services in this provider reference module, the care and support of an individual who is admitted to a hospital or facility for long-term is a nonbillable RHS activity.)
- RHS Level 1 and RHS Level 2 and remote support services are not billable concurrently/during the same time period.
- Intermittent use of RHS Level 1 may not exceed 35 hours of service per week.

Activities Not Allowed Reimbursement is not available through RHS-Hourly in the following circumstances:

- Services furnished to a minor by the parent(s), stepparent(s), or legal guardian
- Services furnished to a participant by the participant's spouse
- Services to individuals in Structured Family Caregiving (SFC) or Children's Foster Care services
- Services that are available under the Medicaid State Plan
- Reimbursable waiver-funded services furnished to a waiver participant by any combination of relative(s)* and/or legal guardian(s) may not exceed a total of 40 hours per week

*Related/relative implies any of the following natural, adoptive and/or step relationships, whether by blood or by marriage, inclusive of half and/or in-law status:

- Aunt (natural, step, adopted)
- Brother (natural, step, half, adopted, in-law)
- Child (natural, step, adopted)
- First cousin (natural, step, adopted)
- Grandchild (natural, step, adopted)
- Grandparent (natural, step, adopted)
- Nephew (natural, step, adopted)
- Niece (natural, step, adopted)
- Parent (natural, step, adopted, in-law)
- Sister (natural, step, half, adopted, in-law)
- Spouse (husband or wife)
- Uncle (natural, step, adopted)

Additional Informati

Available only under the Community Integration and Habilitation Waiver, Residential Habilitation and Support-Hourly is not available under the Family Supports Waiver.