

List of DD/MR HCBS Waiver (#0013) Services and Definitions

1915 (c) waiver services	DD/MR Waiver Service Description
1. Adult Day Health (ADH)	<p>ADH is a service offered to participants to provide opportunities for meaningful participation in community activities, developing associations with community members, discovering ways for participants to make contributions, and establishing roles of leadership and partnership within one’s community. Services generally furnished six (6) or more hours per day on a regularly scheduled basis for one (1) or more days per week, or as specified in the service plan, in a non-institutional, community-based setting, encompassing both health and social services needed to ensure the optimal functioning of the participant. Meals provided as part of these services shall not constitute a “full nutritional regimen” (three (3) meals per day).</p> <p>Activities shall include training in Activities of Day Living (ADL)¹, Instrumental Activities of Daily Living (IADL)², communication,</p>
	<p>ADH 1: The target population for ADH Level 1 may include participants who may benefit from group training and/or activities;</p>
	<p>ADH 2: The target population for ADH Level 2 may include participants with, but not limited to, the following:</p> <ul style="list-style-type: none"> a) Behavioral needs requiring a Behavioral Support Plan or participants with Inventory for Client and Agency Planning (ICAP)³ scores of -34 to-70; b) Health concerns that require monitoring, intervention and supervision such as specialized skin care positioning, uncontrolled seizures, diabetes, etc.; c) Need for specialized therapies incorporated within the IP; <p>Inability to self-preserve.</p>
	<p>ADH 3: The target population for ADH Level 3 may include participants with, but not limited to, the following medical needs:</p> <ul style="list-style-type: none"> a) Unstable respiratory status requiring continuous nursing assessment and care skills. This includes oxygen, suctioning, updraft treatments, chest P.T., and proper positioning. The participant may have a tracheotomy and a history of respiratory failure; b) Need for frequent monitoring and assessment of vital signs, i.e., administration of multiple medications

¹ Activity for Daily Living (ADL) are activities related to personal care including, but not limited to, bathing, dressing, toileting, transferring, and eating.

² Instrumental Activities of Daily Living (IADL) are more complex life activities such as light housework, laundry, meal preparation, transportation, grocery shopping, using the telephone, managing one’s medication, and money management)

³ ICAP is used to as an assessment tool to rate how well a participant performs tasks or could do tasks.

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	<p>and respective assessment of response status;</p> <p>c) Insulin-dependent diabetes and/or with fragile diabetics with unstable blood sugars;</p> <p>d) Congestive heart failure, arrhythmia or a history of cardiac failure;</p> <p>e) Nasogastric (NG) and gastrostomy tube feedings with history of aspiration and complicating factors such as tube medication administration, stoma site assessment, or frequent dressing.</p>
<p>2. CHORE</p>	<p>CHORE services are needed to maintain the home in a clean, sanitary and safe environment. This service includes heavy household chores such as washing floors, windows and walls, tacking down loose rugs and tiles, moving heavy items of furniture in order to provide safe access and egress. Services also consist of the performance of general household tasks (e.g., meal preparation and routine household care). These services are provided only when the participant or anyone else in the household, or other relatives, caregiver, landlord, community/volunteer agency, or third party payor is not capable or responsible for performing or financially providing for them. In the case of rental property, the responsibility of the landlord, pursuant to the lease agreement, is examined prior to any authorization of service.</p>
<p>3. Personal Assistance/ Habilitation (PAB)</p>	<p>PAB services is a range of assistance or training to enable program participants to accomplish tasks that they would normally do for themselves if they did not have a disability. Such assistance shall include active supervision (readiness to intervene as necessary) and interaction with participants. This may take the form of hands-on assistance (actually performing a task for the person) or training or multi-step instructional cuing as a part of a plan to prompt the participant to perform a task. Personal care services may be provided on an episodic or on a continuing basis. Health-related services that are provided may include skilled or nursing care to the extent permitted by State law. Such assistance may include assistance or training in the performance of ADL and IADL activities.</p> <p>Services may include personal assistance or training in the performance of ADL or IADL, to meet outcomes/goals of increasing independence, developing natural supports, learning, developing relationships, contributing through employment/volunteering/ participation and their associated costs. Services may be provided in or outside the participant’s home.</p> <p>There are three levels of PAB services: PAB Level 1 and PAB Level 2 and PAB Level 3. The PAB level shall be determined by the Department of Health (DOH)-DDD Case Manager (CM) based on an ICAP behavioral score and health assessment.</p> <p><u>PAB Level 1:</u> Participants receiving PAB Level 1 do not require any special tasks of nursing care, i.e., nurse delegated tasks.</p> <p><u>PAB Level 2:</u> ICAP scores for participants receiving PAB Level 2 shall fall within –34 to –70 range; and include participants requiring special tasks of nursing (tasks that have been delegated by a RN as specified in HAR Title 16, Chapter 89, Subchapter 15, (“Delegation of Nursing Tasks to Unlicensed Assistive</p>

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	<p>Personnel”) (HAR § 16-89-100; HAR § 16-89-111; HAR 16-89-112; HAR § 16-89-113; and HAR § 16-89-114).</p> <p>PAB Level 3: ICAP scores for participants receiving PAB Level 3 shall fall within the 40-69 range and include participants with avoidant or aggressive behaviors that may cause harm to self or others; PAB Level 3 services are time-limited, averaging three (3) months and up to six (6) months; exceptions may be authorized by the DOH-DDD;</p>
<p>4. Residential Habilitation (RES/HAB)</p>	<p>RES/HAB services are used to cover a participant’s physical care and training above and beyond the general care and supervision under the State Supplemental Payment/Level of Care (SSP/LOC)⁴ for certified and licensed residential settings, as Adult Foster Home (AFH), Developmental Disabilities Domiciliary Home (DDDH), and Adult Residential Care Home (ARCH) Extended Adult Residential Care Home (E-ARCH) and defined in HAR Title 11, Chapter 148, Chapter 89, Chapter 100, and Chapter 101, respectively.</p> <p>RES/HAB is used to increase independence with ADL, develop communication, social, recreational, and leisure skills, and/or enhance independent living, self-direction, and choice-making.</p> <p>RES/HAB means individually tailored supports that assist with the acquisition, retention, or improvement in skills related to living in the community. These individually specific supports include adaptive skill development, assistance with ADL, community inclusion, transportation, adult educational supports, social and leisure skill development, that assist the participant to reside in the most integrated setting appropriate to his/her needs.</p> <p>RES/HAB may include activities such as learning skills to become more independent, preparing own meals, doing laundry, ADLs, social skills (fostering interpersonal relationships), learning to be part of a family unit and/or to share a household (roommate), using leisure time, e.g., light gardening, taking care of own pet, practicing and mastering skills in the home before transferring skills to community setting, behavioral intervention/redirection, making choices, using the telephone.</p> <p>RES/HAB does not include general care and protective oversight and supervision which are required under the facility’s license or certification requirements. Recommendations of specialized therapies as indicated could be incorporated within this service.</p>

⁴ State Supplemental Payment is state funded payments to individuals who are current recipients of supplemental security income (SSI), or state funded aid to the aged, blind, and disabled (AABD), or gender assistance payments. These funds are provided by the state legislature through general appropriations to provide for the special care needs of individuals.

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	<p>There are five levels of RES/HAB services: Level 1, Level 2, Level 3 (Behavioral/Medical), Level 4 (Special Treatment Facility/Therapeutic Living Program) and Level 5 (24/7). The level of RES/HAB services shall be determined by the participant's ICAP scores and/or target population characteristics as follows:</p> <p>RES/HAB Level 1 - service score from 40-69; RES/HAB Level 2 - service score from 1-39 or maladaptive score from -23 to -33; RES/HAB Level 2a (Behavioral) - service score from 1-39 or maladaptive score from -23 to -33 as well as exceptional needs such as frequent and significant challenging behaviors, e.g., continuous yelling and screaming at night; RES/HAB Level 2a (Medical) - physical needs that include total care and total dependence on caregiver; RES/HAB Level 3 (Behavioral) - maladaptive scores from -34 to -70 for behavioral needs to include intense and continuous interventions to address significant challenging behaviors that present danger to self, others, and property; RES/HAB Level 3 (Medical) - Medical needs that include nursing observation and assessment of participant secondary to such skilled nursing activities such as aspiration precautions, catheterization, infection control, inhalation treatments, medication management and administration, ostomy care, oxygen therapy and aerosolized treatments, seizure management and precautions, suctioning, tube feeding and management, wound care requiring sterile procedures, IV (intravenous), shots - IM (intramuscular), and SQ (subcutaneous) TPN (total parenteral nutrition) feedings in vein; RES/HAB Level 4 - maladaptive scores from -34 to -70; Special Treatment Facility/Therapeutic Living Program (STF/TLP), certification and licensure in accordance with HAR, Chapter 98; RES/HAB Level 5 - maladaptive scores from -46 to -70; Higher frequency, intensity and duration of challenging behaviors requiring 24-7 intervention (awake staff).</p>
<p>5. Supported Employment (SE)</p>	<p>SE services are to provide long-term on-going support to participants in competitive employment and increase participant independence. SE services consists of intensive, ongoing supports that enable participants, for whom competitive employment at or above the minimum wage is unlikely, and who, because of their disabilities, need supports to perform in a regular work setting.</p> <p>SE is conducted in a variety of settings, particularly work sites where persons without disabilities are employed and includes activities needed to sustain paid work by participants, including job development, placement, supervision and training and retention. When SE services are provided at a work site where</p>

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	persons without disabilities are employed, payment is made only for the adaptations, supervision and training required by participants receiving waiver services as a result of their disabilities but does not include payment for the supervisory activities rendered as a normal part of the business setting.
6. Respite	Respite services are used to support family relationships to sustain participant living in the family home. Respite services are provided to participants unable to care for themselves and are furnished on a short-term basis because of the absence or need for relief of those persons normally providing care for the participant. Short-term basis shall be defined as daily units for thirty (30) consecutive days.
7. Skilled Nursing (SN)	SN services assure that participant’s medical and health needs are met in order to live in the community. Services listed in the service plan that are within the scope of the State's Nurse Practice Act ⁵ and are provided by a registered professional nurse or a licensed practical nurse under the supervision of a registered nurse, licensed to practice in the State of Hawaii. SN activities may include, but are not limited to, the following: aspiration precautions, catheterization, infection control, inhalation treatments, medication management and administration, ostomy care, oxygen therapy and aerosolized treatments, seizure management and precautions, suctioning, tube feeding and management, wound care requiring sterile procedures, IV (intravenous), shots - IM (intramuscular) and SQ (subcutaneous), nursing observation and assessment of client, TPN (total parenteral nutrition) feedings in vein.
8. Training and Consultation	Training and Consultation services for individuals ⁶ who provide support, training, or supervision to participants includes: instruction about treatment regimens and other services included in the Individualized Service Plan (ISP) ⁷ and/or Waiver Action Plan (WAP) ⁸ ; the use of equipment specified in the service plan; and. included updates as necessary to safely maintain the participant at home. All training shall be identified and included in the ISP or WAP.

⁵ Hawaii State Nurse Practice Act, HRS, Chapter 457 (2006).

⁶ For purposes of this service, an individual is defined as any person, family member, neighbor, friend, co-worker who provide care, training, guidance, or support to a waiver participant.

⁷ Individualized Service Plan is the written plan required by HRS 333 F-6 that is developed by the individual, with input of family, friends and other persons identified by the individual as being important to the planning process. The ISP shall be a written description of what is important to the person, how any issue of health or safety shall be addressed, and what needs to happen to support the person in the person’s desired life.

⁸ Waiver Action Plan is the plan developed by the DOH-DDD CM within one (1) week of admission to the DD/MR Medicaid Waiver Program that identifies 1) goals 2) desired outcomes 3) timelines for achieving outcomes 4) services identified to achieve outcomes 5) frequency, duration and service providers. The WAP is approved by the participant and the participant’s legal guardian and authorized by the DOH case manager.

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	<p>Training and Consultation services also includes waiver services to individuals and their circle of support to implement proactive strategies/activities that will reduce challenging behaviors, minimize the need for Emergency Services, and preserve the participant’s current living situation or program.</p>
<p>9. Emergency Services (Outreach, Respite, Shelter)</p>	<p>Emergency Outreach Emergency Outreach services are defined as immediate on-site support for situations in which the participant’s presence in his/her home or program is at risk due to the display of challenging behaviors that occur with intensity, duration, and frequency that endangers his or her safety or the safety of others or results in the destruction of property. The services provided include but, not limited to, the following interventions to de-escalate crisis situations: telephone consultation with the family, caregiver; or program staff for advice on how best to manage the situation; on-site consultation, training, and technical assistance to family, caregivers, or providers to reduce challenging behaviors; direct hands-on staffing support to ensure the participant’s safety and the safety of others; and, short-term, time-limited follow-up monitoring of the participant and situation for stability immediately after the crisis,</p>
	<p>Emergency Respite Emergency Respite services are emergency out-of-home placement for participants over the age of eighteen (18) years with <u>potential</u> for danger to self or others and their significant support systems due to the participant’s challenging behaviors. The goal of Emergency Respite is to provide a stabilizing environment to preserve the participant’s living situation.</p>
	<p>Emergency Shelter Emergency Shelter services are emergency out-of-home placement of participant’s in need of intensive intervention in order to avoid institutionalization or more restrictive placement and for return to the current or a new living situation once stable. Emergency Shelter services shall include discharge planning at the point of admission.</p>
<p>10. Transportation</p>	<p>Transportation services are offered to enable waiver participants to gain access to waiver and other community services, activities and resources, as specified by the ISP. This service is offered in addition to medical transportation required under 42 CFR § 431.53 and transportation services under the State plan, defined at 42 CFR § 440.170(a) (if applicable), and does not replace them.</p>