

Division of Medicaid Development & Administration

Ted Strickland, Governor
John L. Martin, Director

September 27, 2010

To: County Boards of DD, Superintendents County Boards of DD, SSA Directors
Ohio Association of County Boards DD Ohio Provider Resource Association
ARC of Ohio

From: Patrick Stephan, Deputy Director Medicaid Development and Administration

Subject: Homemaker Personal Care and On-Site / On-Call

The purpose of this communication is to clarify the appropriate application of on-site/on-call payment rates for H/PC services. This communication is based on several recent inquiries and in consultation with the Ohio Association of County Boards of DD, and the Ohio Provider Resource Association. It should be used as guidance by individuals and their ISP teams.

Ohio Administrative Code 5123:2-9-06 states the following:

(G) (1) The ISP development process shall be used to determine the frequency, duration, and scope of HPC services to be paid at the on-site/on-call rate.

(G) (2) A provider shall be paid at the on-site/on-call rate for HPC services contained in appendix A to this rule when:

- Based upon assessed and documented need, the ISP indicates the days of the week and the beginning and ending times each day when it is anticipated that an individual will require on-site/on-call services; and
- The individual is asleep and does not require intervention or assistance during this time; and
- The HPC provider is required to be on-site, but is not required to remain awake; and
- On-site/on-call time does not exceed eight hours for the individual in any twenty four hour period.

(G) (3) A provider shall be paid the routine HPC rate when an individual receives interventions/supports during the times the ISP indicates a need for on-site/on-call services. In these instances, the provider shall document the start and stop times and dates during which interventions/supports were provided to the individual.

(G) (4) Neither the behavior support nor the medical assistance rate modification is applicable to the on site/on call payment rates for HPC services.

Guidance for Individuals, Service & Support Administrators & Providers

An assessment must be completed and reviewed as part of the ISP planning process in order to determine if on-site/on-call services are appropriate for the individual. Changes, where appropriate, shall be initiated in collaboration with the ISP Team and as a result of the assessment.

Service need information reflected in an assessment and/or ODDP shall be reviewed and addressed in the ISP. At minimum, the following six life areas shall be examined to help guide the team to make an informed decision about whether or not on-site/on call is appropriate.

1. Does the individual have medical/psychiatric needs which require monitoring throughout the night? *Answers to section D (Q 18-22) of the ODDP and physician orders should be addressed when answering this question.*
2. Does the individual have behavioral needs which require monitoring throughout the night? *Answers to section G (Q 30-32) of the ODDP should be addressed when answering this question.*
3. Does the individual have sensory and/or motor function limitations during sleep hours which require staff interventions? *Answers to section E (Q 23-27) and section D (Q 22) of the ODDP should be addressed when answering this question.*
4. Does the individual have any special dietary needs/restrictions/interventions which require monitoring throughout the night? *Answers to section G (Q 30, eats inedible objects) and section D (Q 22), of the ODDP should be addressed when answering this question.*
5. Does the individual have other safety considerations requiring staff intervention throughout the night? *Answers to section H (Q 33, toileting/bowels, toileting/bladder) of the ODDP should be addressed when answering this question.*
6. In the event of an emergency (e.g. feeling sick, smelling smoke/gas etc.) would the individual be able to alert a staff person for help? *When answering this question, consideration for sufficient evacuation time should be taken into consideration.*

Additional:

- Reduction in service requires the individual to be formally notified of their appeal rights.
- Utilizing on-site/on call while requiring the Provider to remain awake is not appropriate. Staff may remain awake, but that is at the Provider's discretion.
- Homemaker Personal Care should be used when an individual needs routine checks and/or routine intervention during the night.
- On-site/on-call should not be used solely as a means of reducing costs or to avoid prior authorization.
- Utilizing on-site/on-call for an individual because a roommate requires routine H/PC and staff will be awake anyway is not appropriate.

As you know, the use of on-site/on-call versus routine homemaker personal care can be complicated depending on unique circumstances of each case. For technical assistance, please feel free to contact Tracy Cloud, Assistant Deputy Director for Medicaid Development and Administration at Tracy.Cloud@dodd.ohio.gov or 614-752-9177. She or other department staff will be happy to assist.

Thank you very much.