# Division of Developmental Disabilities AD & TBI Waivers: Service Handbook



January 2024

# **Supported Residential Living and Assisted Living**

### **Service Definitions**

**Assisted Living** is offered on the HCBS Waiver for Aged and Adults and Children with Disabilities (AD) and **Supported Residential Living** is offered on the Traumatic Brain Injury (TBI) Waiver.

These services both provide an array of supports for participants living in an assisted living facility.

Services promote participant self-direction and participation in decisions that incorporate respect, independence, individuality, privacy, and dignity in a homelike, non-institutional residential setting environment. They include assistance with or provision of personal care activities, activities of daily living (ADLs), instrumental activities of daily living (IADLs), health maintenance, and 24-hour response capability to meet scheduled or unpredictable participant needs. Services provide supervision, safety, and security.

#### **Conditions of Provision**

- A. The need for these services must be identified during participant assessment and included in the person-centered plan (PCP).
- B. There must be a Resident Service Agreement (RSA) on file for each participant.
  - 1. It must be reviewed and revised by the participant, Service Coordinator, and provider as needed, but at least annually.
  - 2. The original and revisions must be accessible to the Service Coordinator.
  - 3. At a minimum, the RSA must include:
    - a. Participant's current medications and treatments.
    - b. Any special dietary requirements.
    - c. A description of any limitations to participate in activities.
    - d. A Lease Agreement which must incorporate at least the following requirements:
      - i. Consent of the individual and the assisted living provider.
      - ii. Comply with assisted living facility licensure requirements in 175 NAC 4, including eviction protections.
      - iii. A statement that the individual has a right to:
        - (1) Select their roommate if a roommate is desired;
        - Privacy and security including a means to access to their own living unit;
        - (3) Decorate their living unit;
        - (4) Have visitors of their choosing at any time;
        - (5) The freedom and support to control their own schedule and activities; and
        - (6) Access food at any time.
      - iv. Each provider-owned and operated setting must be physically accessible to the participant.

- Any modifications of a participant's rights or lease agreement conditions ٧. must be substantiated by a specific assessed need and documented in their PCP including:
  - Identification of the individual's specific assessed need; (1)
  - Documentation of positive interventions and supports used prior to (2) any modifications:
  - Documentation of less intrusive methods of meeting the need (3) already tried but not successful;
  - (4) Clear description of the rights or lease agreement modification needed and how it addresses the specific assessed need;
  - Regular collection and review of data to measure the ongoing (5) effectiveness of the modification:
  - Established time limits for periodic reviews to determine if the (6)modification is still necessary or can be terminated; and
  - (7) Informed consent of the individual.
- C. When a service provider or Service Coordinator determines a participant's needs are beyond the provider's abilities or capacities, the provider, Service Coordinator, and participant will initiate alternative arrangements.
- D. Supported Residential Living and Assisted Living include the following required service components, which the provider must offer each participant regardless of whether it is included in their PCP:
  - 1. Socialization: Structured social, recreational, and health activities geared toward the needs of the participants. The residential living provider must provide socialization activities in the living setting and provide information on activities available in the community.
  - 2. Housekeeping: Cleaning of public areas as well as a participant's private residence. such as dusting, vacuuming, cleaning floors, cleaning the bathroom, and making and changing the bed.
    - Bed linens must be changed when soiled, but at least weekly. a.
    - Clean bath linens must be made available daily. b.
    - A participant must be provided the opportunity to participate in or perform C. housekeeping activities as permitted by their mental or physical ability when desired.
  - 3. Laundry: Washing, drying, folding, and returning participant's clothing to their room.
    - a. Dry cleaning is the responsibility of the participant, but the facility will assist them in arranging for this service when needed.
    - A participant must be provided the opportunity to participate in or perform laundry b. services as permitted by their mental or physical ability when desired.
  - 4. Meals: Three meals per day, seven days per week.
    - a. Meals must:
      - i. Consist of a variety of properly prepared foods containing at least onethird of the minimum daily nutritional requirements for adults; and
      - ii. Consider cultural and personal preference for foods served at specific times of day.
    - b. There must be additional options for individuals when only one mealtime menu is offered.
    - Menus must: C.

- i. Reflect the food preferences of the resident population to the extent
- Be accessible to participants in a timely manner. ii.
- d. Snacks must be available upon request in between meals.
- 5. Medication Assistance: Assistance with the administration of prescription and nonprescription medications provided at the participant's requested location.
  - The appropriate level of medication assistance is determined on an individual basis as described in 175 NAC 4.
  - The provider's level of involvement with the participant's medication must be b. strictly limited to those items and services identified in their PCP.
  - When the participant can self-administer medication, the participant may choose C. their pharmacy provider.
    - i. When the participant cannot self-administer medication, the residential living provider must provide written notice to the participant identifying the recommended pharmacy used by the provider.
    - ii. In compliance with State licensure requirements, when the provider has notified the participant prior to admission, or within 30 days in advance of a change that the facility contracts with a specific pharmacy provider, the participant's choice of pharmacy requirement is considered met.
  - d. Provider qualifications for persons administering medications in an assisted living facility are referenced in the assisted living facility licensing regulations.
- 6. Transportation Services: The residential living provider must provide transportation services based on the needs of each participant.
  - Each month the provider must directly provide a minimum of five round trips to a. medical appointments when needed.
    - i Additional reimbursement may be approved for medical transportation when round trips are more than 50 miles or there are more than five per month.
  - The provider must make reasonable arrangements for round-trip transportation b. for activities and resources identified in the participant's PCP.
  - The provider must make a realistic attempt to assist with arranging any C. transportation that exceeds the minimum requirements.
- E. Supported Residential Living and Assisted Living include the following service components which the provider must offer to each participant when it is identified as an assessed need in the participant's PCP:
  - 1. Escort Services: Accompanying or personally assisting a participant who is unable to travel or wait alone, unless the participant has made their own arrangements. May include:
    - Assistance to and from a vehicle and place of local destination. a.
    - Providing or arranging supervision and support for the participant while away b. from the living setting.
      - i. The provider of supervision and support will remain with the participant until the participant returns to their living setting.
  - 2. Essential Shopping: Obtaining clothing and personal care items for the participant when the participant is unable to do so. This does not include financing the participant's purchases.

- 3. Health Maintenance Activities: The provider will include non-complex interventions that:
  - Can be safely performed according to exact directions. a.
  - Do not require alterations of standard procedure. b.
  - Have predictable results and participant responses, including but not limited to: C.
    - i. Recording height and weight;
    - Monitoring blood pressure: ii.
    - iii. Monitoring blood sugar and providing insulin injections when the participant is stable and predictable; and
    - Nursing and skilled therapy services which are incidental rather than iv. integral to the provision of this service.
      - (1) Payment is not made for 24-hour skilled care.
      - (2) No skilled therapies are included in the service.
- 4. Personal Care Services: Personal care will be provided to the participant in a way they maintain as much independence and privacy as possible.
  - The provider must provide any needed assistance in the following activities of a. daily living (ADLs):
    - i. Eating: Assistance with eating includes opening packages, cutting food, adding condiments, and other activities that the participant is unable to perform independently.
      - When the participant is unable to eat without help, the provider will (1) feed the participant or ensure other arrangements are made for this care.
    - ii. Bathing: Participant preferences with respect to the bathing schedule must be taken into consideration. The provider may not charge fees for additional baths needed when they exceed the number stated in the RSA.
    - iii. Mobility: Assistance moving from place to place indoors or outside.
    - iv. Dressing/Grooming: Assistance putting on and removing clothing as needed from upper and lower body. Assistance with routine daily personal hygiene.
    - Toileting: Assistance getting to and from the toilet, including transfer to ٧. and from the toilet, management of clothing, and cleansing.
    - vi. Transferring: Assistance moving from one place to another including bed to chair and back, and into and out of a vehicle.
    - Continence: Assistance changing incontinence briefs or pads, cleansing, vii. and disposing of soiled articles.
  - b. These services include the provision of personal care services and additional billing for personal care services is not allowed.

## **Provider Requirements**

- A. All providers of waiver services must:
  - 1. Be a Medicaid provider;
  - Comply with all applicable Titles of the Nebraska Administrative Code and Nebraska 2. State Statues:
  - Adhere to standards described in the Division of Medicaid and Long-Term Care Service 3. Provider Agreement;
  - 4. Complete DHHS trainings upon request; and
  - 5. Use universal precautions.

- B. TBI Waiver providers must complete DHHS-approved TBI training before providing Supported Residential Living.
- C. Assisted Living and Supported Residential Living can only be provided by an agency licensed as an assisted living provider.
- DHHS initially enrolls assisted living providers and performs an annual in-person site visit to D. ensure all applicable federal, state, and local laws and regulations are met.
- E. Each assisted living provider must at the minimum meet the following standards in addition to the standards required by DHHS's licensure unit:
  - 1. Licensed and certified as an assisted living (AL) provider of HCBS Waiver services.
  - 2. Provide a private room with a bathroom consisting of a toilet and sink for each waiver participant.
    - Semi-private rooms will be considered on a case-by-case basis and require prior a. approval by DHHS.
  - Separately licensed and in accordance with the requirements in 175 NAC 4 when 3. adjacent to a mutually owned nursing facility.
  - 4. Have policies, procedures, activities, dining, and common areas specifically for individuals residing in the assisted living facility.
  - 5. Ensure direct care staff do not include administrative, laundry, housekeeping, dietary, or maintenance staff.
  - 6. Provide essential furniture, at a minimum a bed, dresser, nightstand or table, and chair, when the participant does not have those items.
  - 7. Provide normal, daily personal hygiene items including, at a minimum, soap, shampoo. toilet paper, facial tissue, laundry soap, and dental hygiene products. Other personal products or brand choices are the responsibility of the participant.
  - 8. Provide privacy in the unit, including lockable doors, and access by the participant to the facility and to their individual apartment.
  - 9. Provide a grievance process for review of denials of individualized participant requests. Denials of individualized participant requests must be documented in the PCP, including the outcome of any grievances filed.
- F. Relatives or guardians must be either employees or owners of a licensed assisted living facility to provide these services.
- G. Each provider must:
  - 1. Employ staff based on their qualifications, experience, and demonstrated abilities;
  - 2. Provide training to ensure staff are qualified to provide the necessary level of care;
  - 3. Agree to make training plans available to DHHS; and
  - Ensure adequate availability and quality of service.
- Η. Each facility must meet all applicable federal, state, and local fire, health, and other standards prescribed in law or regulation. All locations for care must meet standards established by the Final Settings Rule for provider-owned and operated settings and have it documented by their Resource Developer (RD) at least annually.

#### Rates

- Α. Payment is calculated to cover the total of all residential service costs.
- Payment does not cover the cost of housing, food, items of comfort or convenience, or costs of B. facility maintenance, upkeep, and improvement. These are covered by the room and board fee paid to the facility by or on behalf of the participant.
- C. Rates are set by DHHS and may change annually or as directed by state legislature.
- D. Providers are notified of rate changes through Nebraska Medicaid and Long-Term Care (MLTC) Provider Bulletins. The fee schedule page is referenced in the Provider Bulletin on the Nebraska DHHS website and by subscribing to the "MLTC Provider Bulletins" page.