

HAWAII ADMINISTRATIVE RULES

TITLE 17

DEPARTMENT OF HUMAN SERVICES

SUBTITLE 9 COMMUNITY LONG-TERM CARE PROGRAMS

CHAPTER 1440

HOME AND COMMUNITY-BASED SERVICES FOR
ELDERLY FOSTER FAMILY COMMUNITY CARE PROGRAM

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Historical Note: Chapter 17-1440 is based substantially upon subchapter 8 of chapter 17-749, subtitle 8, Hawaii Administrative Rules. [Eff 5/18/84; am 12/21/84; am 6/23/86; R JUN 29 1992]

§17-1440-1 Goal. Foster family community care program services provided under this chapter shall be directed at providing home and community-based services which assist elderly persons with chronic illnesses and disabilities to remain in a family home as an alternative to institutionalization. [Eff JUN 29 1992] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§17-1440-2 Definitions. For the purpose of this chapter:

"Acuity level A" means a nursing facility level of medical care (formerly ICF) whereby clients require services to maintain, improve/safeguard health, or to minimize disability or pain, and is a lower level of services than those provided for clients at the acuity level C.

"Acuity level C" means a nursing facility level of medical care (formerly SNF) whereby the clients require skilled services that are either directly provided by, or under the supervision of skilled technical or professional personnel who meet certain qualifications: registered nurse (RN), occupational therapist (OT), physical therapist (PT), speech pathologist, audiologist.

"Applicant" means an individual who has applied for foster family community care program services but who has not received final action on their application.

"Case management services" means the assessment of the client's needs, and planning, locating, coordinating, and monitoring of the comprehensive group of services in the client's plan of care.

"Client" means an individual who meets the eligibility criteria defined in section 17-1440-3, voluntarily selects and is admitted to the foster family community care program.

"Community care program" means elderly foster family community care which provides a therapeutic, twenty-four hour care arrangement within a private family residence given to nursing home eligible elderly persons by program foster families, with case management by the community care program registered nurse and social worker. In addition to the client's room and board, the foster family provides homemaker services and personal care services as dictated in a written plan of care and supervised through case management services.

"Contractor" means an agency or individual that has entered into a written agreement with the department to provide foster family community care program services.

"Department" means the department of human services (DHS).

"Family care training" means a course taught by registered nurses, social workers, and physical therapists to foster family caregivers on home care, including roles and responsibilities of caregivers, personal hygiene, exercise, body mechanics and

positioning, bedmaking, digestion and elimination, home hazards and accident prevention, emergency assistance, medication, medical follow-up, infection control, illness, vital signs, adaptive equipment in bedrooms and bathrooms, assistance in use of crutches, canes, walkers, braces, transfers, and wheelchairs, range of motion exercises, special diets, mental confusion, losses in chronic illness, stresses in caregiving, death and dying, depression, and use of foster family reporting forms.

"Foster family caregiver" means the primary person and relief person(s) entered into a written agreement with the department to provide care at home to one or two clients, after successfully completing the following:

- (1) Foster family application, taken by the community care program case managers, on family arrangement, education, and work experience, any physical or medical problems and housing arrangement. The foster family shall have a secure income, excluding welfare payments and must give references, which are collected by the case managers;
- (2) Home study, done by the contractor's case managers, to evaluate the physical facilities, the family lifestyle, and the proximity to community services. All families shall provide the client with his or her own room which is equipped with a U.L. approved smoke detector, and has a door or stairway providing a means of unobstructed travel to the outside of the dwelling at street or ground level. This room, as well as the entire house, is checked for cleanliness, ventilation, lighting, safety, space, noise, and organization. Included in the study are architectural barriers, bathroom facilities, and furniture; and
- (3) Family care training, as herein described.

"HCFA" means the United States Department of Health and Human Services, Health Care Financing Administration.

"Homemaker services" means those tasks performed by the foster family that healthy elderly persons would do for themselves including laundry, shopping, meal preparation, and keeping the client's room safe and

sanitary. Housekeeping activities that do not directly pertain to the client, such as household maintenance and overall house cleaning, shall not be included.

"Personal care" means assistance in the home with daily living activities such as bathing, grooming, dressing, nutritional and dietary care, bowel and bladder control and care, ambulation/mobility, transfers and lifting, positioning and turning, exercising and range of motion, and assisting with medications that are normally self-administered. Personal care shall also include assistance with instrumental activities of daily living which are related to the well-being of the client such as maintaining a safe and sanitary environment (bedmaking, linen changing, cleaning and maintaining the client's immediate vicinity and frequently used areas), and escorting the client outside the home for errands and appointments. Also included in personal care are provision of emotional support and encouragement, taking vital signs, reporting observations and maintaining health records.

"Plan of care" means a written plan based on the case management assessment that addresses identified client problems, and indicates goals or desired outcomes, and the specific type, frequency and provider(s) of services. The plan of care is regularly reviewed and updated; agreed upon by the client and their physician; and is subject to approval by the medicaid agency's representative.

"Respite care" means two weeks temporary care in the home of another foster family after the permanent foster family caregivers have completed one year of caring for the client. [Eff JUN 29 1992] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§17-1440-3 Eligibility requirements. (a) Elderly foster family care services through the community care program shall be available to individuals who are:

- (1) At least fifty-five years of age at the time services are rendered;
- (2) Eligible for federally-funded medical assistance;
- (3) Authorized at acuity level A or acuity level C by the department's medical consultant or appointed agent;

- (4) Able to receive care under the foster family community care program at an annual cost not to exceed limits established by statutory authority; and
 - (5) Provided with a written plan developed by the community care program case managers and authorized by the client's personal physician.
- (b) Continued eligibility for foster family care by the community care program shall be redetermined according to the following schedule:
- (1) Eligibility for federally-funded medical assistance shall be verified monthly;
 - (2) Acuity level of care shall be redetermined and reauthorized annually or as changes in level of acuity occur, using the department's designated form;
 - (3) Cost of care shall be itemized and determined monthly; and
 - (4) Physician approval of the medicaid client's plan of care shall be renewed annually or as significant changes occur in the medical condition of the client. [Eff
JUN 29 1992] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§17-1440-4 Provision of community care program services.

- (a) Services shall include any services:
- (1) Approved in the home and community-based waiver for the foster family community care program, such as: case management, homemaker, personal care, and respite services; and
 - (2) Included in the client's written plan of care.
- (b) Services shall be provided by contractors.
- (1) Contractors include case management agencies and foster families.
 - (2) All contractors shall meet applicable state and federal licensing and certification requirements.
- (c) Provision of services shall be available to the qualified individuals based on the conditions of the:
- (1) Waiver of statewideness;
 - (2) Waiver of comparability of services; and

- (3) Level of funding established by the legislature. [Eff JUN 29 1992] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§17-1440-5 Exclusions of the community care program services. Community care program services shall not include:

- (1) Charges for room and board of the client;
(2) Services rendered by a licensed care or boarding home;
(3) Services provided during periods of time when the client has been admitted on an inpatient basis to either an acute care hospital or a long-term care facility. [Eff JUN 29 1992] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§17-1440-6 Payment for community care program services. (a) The maximum payment for foster family community care program services shall not exceed limits established by statutory authority.

(b) The department shall pay for only those services identified in section 17-1440-4 and specified in a written plan of care made between the client and the department or its agent.

(c) Medicaid expenditures for periods of inpatient care in an acute care hospital or long-term facility shall not be computed into the annual cost of care under the program for the client.

(d) Foster family payments for eligible clients shall not be decreased when the client's condition improves. [Eff JUN 29 1992] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§§17-1440-7 to 17-1440-11 Reserved

§17-1440-12 Termination of services. Services to clients of the community care program shall be terminated when:

- (1) The estimated or actual annual cost of care of the client exceeds the cost of

institutional care as determined by the department;

- (2) The case management staff determines that a regime of care which shall assure the safety and well-being of the client in foster family home cannot be provided by the program;
- (3) The client's personal physician does not recommend services under the community care program for the client;
- (4) The client or foster family or both terminate the service of the program; or
- (5) The client is admitted to an acute care hospital or long-term care facility as an inpatient for more than one month. [Eff **JUN 29 1992**] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§17-1440-13 Hearings and appeals. The procedures and provisions of the departmental rules on the appeals process and fair hearing, shall apply to applicants and clients of the foster family community care program when the department denies, suspends, or terminates services for any reason except for a change in state or federal law or a lack of state of federal funding. [Eff **JUN 29 1992**] (Auth: HRS §346-14) (Imp: 42 C.F.R. §§435.232, 440.180)

§17-1440-14 Authorization of services. The community care program is authorized by the Health Care Financing Administration under a home and community-based services waiver (section 1915C) of the Social Security Act and by the Hawaii Revised Statutes. [Eff **JUN 29 1992**] (Auth: HRS §346-14) (Imp: Pub. L. No. 97-35, §2176 (1981); 42 C.F.R. §§435.232, 440.180)

