SENIORS AND PEOPLE WITH DISABILITIES

In-Home Services: Eligibility, Authorization and Payments

#### **IN-HOME SERVICES**

### **Definition**

Services to provide assistance with activities of daily living and self-management tasks to persons who reside in their own homes. In-home services include personal care, shopping, housekeeping, meal preparation, assistance with medication and transportation as an alternative to long-term care in a nursing facility. The In-Home Services Program is a waivered community-based care program.

## **Eligibility**

Medicaid Services eligible based on age, blindness or disability and must require personal care assistance from another person without a more structured setting. For waivered services, the income must be under 300 percent of SSI. There are other service and financial eligibility requirements.

## **Provider**

The provider must be a Homecare Worker (provider code HK) or a Contracted In-Home Care Agency.

#### **Procedure**

Service eligibility is determined by conducting a CA/PS assessment in Oregon ACCESS. Service Hours are assigned to providers on CA/PS and authorized through the Service Plan (SDS 546). For HCWs, in-home vouchers (SPD 598B) are issued to and completed by the HCW. For in-home agencies, services are billed on the SDS 599A. A CMS case for each client is required. Client pay-in is entered on the SFMU screen. Payment for Homecare Workers is made through MMIS (HATH, HINQ) screens.

# **Applied Rules**

In-Home Support Services - OAR 411-030-0002 through 411-030-0090 Homecare Workers in CEP Program - OAR 411-031-0020 through 411-031-0050

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### FORMS AND SYSTEMS: IN-HOME SERVICES PROGRAM

## **Eligibility**

CA/PS Assessment determines service eligibility

CA/PS Care Planning tab Shows service priority level

SSEQ, Prime No. Shows service eligibility beginning and end dates

### **Authorization**

914 Client Choice

UCMS, PCMS Financial

514 Exceptional Rate Request

CA 546 Service Plan CA 598 Task List

598B CEP voucher/invoice

599A Contract Agency Care invoice

# **Payment**

MMIS Provider payment (HPAY, HATH, HINQ)

Provider Info

SPVF, last name, first name or prov # Locate HCW (HK code)

SPVF,agency name Locate Contract Agency (IA code)
PRV3 In-Home Agency Contract Rates

PRV8,provider number Provider information

HINQ,p,provider number Shows voucher for provider HINQ,r,prime number Shows vouchers per client

RCIQ,2,provider number Shows payments

**Program Code** \_\_1, A1, \_\_3, B3, \_\_4, D4

Case Descriptor: APD, IHC, consider also SPH if used along with

Spousal Pay, and SAM if used with Specialized Living Services, ICP for Independent Choices

Program

Need/Resource Code: HK