

Par. 1. **Material Transmitted and Purpose** – Transmitted with this Manual Letter are changes to Service Chapter **Medicaid State Plan - Personal Care Service 535-05**. New language is in red and underlined and old language is in red and has been struck through.

Par. 2. **Effective Date** – 4/1/2025

Purpose 535-05-05

(~~NEW Revised 7/1/07~~ 04/01/2025 ML #~~3088~~3911)

Personal care services assist an individual with activities of daily living (ADLs) and instrumental activities of daily living (IADLs), so that the individual is able to live at home. Personal care services are provided so as to assist the eligible individual with as many activities of daily living and instrumental activities of daily living as needed and as permitted in order to maintain independence and self-reliance to the greatest degree possible. Personal care services are appropriate when service activities are essential either on an intermittent or ongoing basis and the need for personal care services is expected to continue for an extended period of time in excess of ~~30~~ 90 days.

Personal care services must be the primary need of the individual and are not intended to bring about improvement of an acute medical condition nor are they primarily intended to provide homemaker services to the individual. Personal care services are not appropriate for individuals whose needs fall within normal stages of development.

The individual should direct the care provided, if and when possible, and should be involved in training and monitoring the personal care service provider as much as possible and when appropriate.

Personal care services are generally provided in an individual's residence, however, services may also be delivered in other settings, such as a place of employment, if providing personal care services assists the individual in remaining as independent as possible and avoiding institutionalization. Personal care services may not be provided to an individual who is in a hospital, nursing facility, intermediate care facility for the mentally retarded, or institution for mental disease.

The informal network, especially family members, should be explored as potential informal providers of care before formal care is provided under the provisions of this chapter. ~~Care provided by the informal network should not be replaced by formal/paid care unless this is necessary for the individual to receive such care.~~

Definitions 535-05-10**(Revised ~~10/01/2024~~ 04/1/2025 ML #~~38713911~~)**Activities of Daily Living (ADLs)

Tasks of a personal nature that are performed daily which involves such activities as bathing, dressing, toileting, transferring from bed or chair, continence, eating/feeding, and mobility inside the home.

Agency - Qualified Service Provider (QSP)

An agency that enrolls with the department as a Qualified Service Provider, which allows that agency to bill the department for services rendered. Agency providers can include Department of Health and Human Services, Human Service Centers, and County Social Service Boards.

Aging Services Section

A Section within the Department of Health and Human Services (DHHS) within the Program and Policy's organizational structure with administrative and programmatic responsibility for Home and Community Based Services (HCBS).

Applicant

An individual making application for services. An applicant may have a legal representative seeking services on behalf of the individual.

Basic Care Assistance Provider (BCAP)

An entity that is licensed as a basic care facility; is not owned or administered by state government; does not specifically provide services for individuals with traumatic brain injury or Alzheimer's disease or related dementia; and is enrolled with the Department as such.

Comprehensive Assessment

Instrument used to record basic demographic and medical information about an individual, including age, date of birth, spoken language, marital status, household members, emergency contacts, medical resources, health care coverage, and source and reason for referral, and to secure measurable information regarding: physical health, cognitive and emotional functioning, activities of daily living, instrumental activities of daily living, informal supports, need for twenty-four hour supervision, social participation, physical environment, financial resources, and other information not recorded elsewhere.

Critical Incident Report (CIR)

A critical incident is any actual or alleged event or situation that creates a significant risk of substantial or serious harm to the physical or mental health, safety or well-being of any client receiving HCBS.

Department

The North Dakota Department of Health and Human Services (DHHS).

Dependent

Any individual who the applicant/client is legally responsible to provide support and care: minor child, spouse, anyone placed in the care of the applicant/client by court order.

Endorsements

A task that requires special skills and approval.

Developmental Disabilities Section

A Section within the Department of Health and Human Services (DHHS) within the Program and Policy's organizational structure with administrative and programmatic responsibility for Home and Community Based Services (HCBS) for Individuals with Intellectual Disabilities and Developmental Disabilities (IID/DD).

Developmental Disabilities Program Manager (DDPM)

Employee of the Department of Health & Human Services (state Medicaid agency) responsible to provide coordination and monitoring of Medicaid and general fund services provided to individuals with intellectual and/or developmental disabilities. The DDPM is a case manager.

Exploitation

The act or process of an individual using the income, assets, or person of another individual for monetary or personal benefit, profit, gain, or gratification.

Family Member

Defined as spouse or by one of the following relatives, or the current or former spouse of one of the following relatives, of the elderly or disabled person: parent, grandparent, adult child, adult sibling, adult grandchild, adult niece, or adult nephew. Current or former spouse refers to in-law relationships.

Functional Assessment

An instrument used to record basic demographic and medical information about an individual, including age, date of birth, spoken language, marital status, individuals residing with, emergency contacts, medical resources, health care coverage, and source and reason for referral; and to secure measurable information regarding

- a. Physical health;
- b. Cognitive and emotional functioning;
- c. Activities of daily living (ADLs);
- d. Instrumental activities of daily living (IADLs);
- e. Informal supports;
- f. Need for twenty-four-hour (24) supervision;
- g. Social participation;
- h. Physical environment.
- i. Financial resources;
- j. Adaptive equipment;
- k. Environmental modification; and
- l. Other information about the individual's condition not recorded elsewhere.

Functional Impairment

The inability to perform, either by oneself or with adaptive aids or with human help, specific activities of daily living or instrumental activities of daily living.

HCBS Program Administration

A unit within Adult and Aging Services. HCBS Program Administration includes the programs of Targeted Case Management, Medicaid Waiver Home and Community Based Services, Medicaid State Plan Personal Care, Service Payments for the Elderly and Disabled, and Expanded Service Payments for the Elderly and Disabled.

Home and Community-Based Services (HCBS)

The array of services under the SPED program and Medicaid Waiver defined in the comprehensive human service plan and the other services the department determines to be essential and appropriate to sustain individuals in their homes and in their communities, and to delay or prevent institutional care.

Homemaker

An individual who meets the standards and performs tasks/activities under the provisions of this service chapter.

Homemaker Service (HMK)

Provision of non-personal (environmental) care tasks such as light duty housekeeping, laundry, meal planning and preparation, and shopping that enables the individual to maintain independence.

Individual – Qualified Service Provider (QSP)

An individual who enrolls with the department as a Qualified Service Provider, which allows that individual to bill the department for services rendered. Institution

Institution

means an establishment that makes available some treatment or services beyond food or shelter to five or more persons who are not related to the proprietor. N.D.C.C. 50-24.05-01(8).

Instrumental Activities of Daily Living (IADLs)

Includes complex life activities routinely performed by an individual such as housework, laundry, meal preparation, taking medication, shopping, outside mobility, transportation, management of money, and use of a telephone.

Legally Responsible Person

Legal spouse or parent of a minor child.

Legal Representative

Someone who has been given power by law to represent another person.

Level A Personal Care Services

The level of care for an individual meeting the minimum eligibility criteria for personal care services.

Level B Personal Care Services

The level of care for an individual meeting the nursing facility or ICF/MR level of care criteria in addition to the minimum eligibility criteria for personal care services.

Level C Personal Care Services

The level of care for an individual meeting the nursing facility or ICF/MR level of care criteria in addition to having an impairment in 5 ADLS.

Level-of-Care (LOC) Determination

A medical screening requested to determine eligibility for the Medicaid Waivers, Medicaid State Plan Levels B & C, or to screen children for the SPED program. The Department contracts with a utilization control management team to establish medical need.

Long Term Care Need

A need for the services available under the SPED Program, ExSPED Program, Medicaid Waiver Program, or the Medicaid State Plan Personal Care Option that is be anticipated to exceed ~~30~~ 90 days.

Medical Services Division

A Division within the department with administrative responsibility to enroll Qualified Services Providers, conduct Qualified Service Provider audits, and set rates for HCBS services.

Medicaid State Plan Personal Care Program (MSP-PC)

Personal care services assist an individual with activities of daily living (ADLs) and instrumental activities of daily living (IADLs), so that the individual is able to live at home. See MSP-PC Policy Manual (535-05).

Monitoring

Overseeing and periodically reviewing the individual's progress, condition, and the quality and quantity of services provided.

Most Integrated Setting

A setting that enables an individual with a disability to interact with non-disabled persons to the fullest extent. The most integrated setting for an individual will usually be a private residence owned or rented by the individual or their family member.

Natural Supports

An informal, unpaid caregiver that provides care to an applicant or client.

Neglect

The failure of an individual to provide the goods or services necessary to avoid physical harm, mental anguish, or mental illness.

Nursing Facility (Long Term Care Facility)

A facility licensed by the North Dakota Department of Health and Human Services and Consolidated Laboratories to provide residential nursing and medical care.

Parent

A child's adoptive or biological mother, or father, or stepparent who has legal responsibility for a child.

Personal Care Service Provider

A qualified service provider or a basic care assistance provider.

Personal Care Services

Services consisting of a range of human assistance, provided to an individual with disabilities or conditions, that will allow the individual to live as independently as possible while delaying or preventing the need for institutionalization. Assistance may be in the form of hands-on assistance or cuing so that the individual can perform a task without direct assistance.

Qualified Service Provider (QSP)

An individual or agency that has met all of the standards/requirements and has been designated by the department as a provider.

Qualified Service Provider (QSP) Handbook

A handbook outlining the standards and procedures required for agencies and individuals to qualify as a Qualified Service Provider.

Service Payment

The payment issued by the Department to the caregiver/qualified service provider.

Settings Rule

Centers for Medicare & Medicaid Services (CMS) issued a final rule that requires states to review and evaluate HCBS settings. States are required to ensure all HCBS settings comply with the new federal requirements to ensure that all individuals receiving HCBS are integrated in and have full access to their communities.

Sexual Abuse

Conduct directed against an individual which constitutes any of those sex offenses defined in N.D.C.C. 12.1-20-02, 12.1-20-03, 12.1-20-04, 12.1-20-05, 12.1-20-06.

Social History

Components of Social History include: Demographics, Who lives in the Home, Health History, Family Structure, Coping Mechanisms, Support System, Educational

and Employment History, Behavior/Psychological/Social Information, Financial Resources, Identification of Service Need, and Outcome of Services Provision.

Supervision

Up to 24 hours of supervision may be provided to eligible individuals who because of their disability need monitoring to assure their continued health and safety.

Vulnerable Adult

An adult who has substantial mental or functional impairment.

Vulnerable Adult Protective Services (VAPS)

Addresses the safety of vulnerable adults who are at-risk of harm due to the presence or threat of abuse, neglect, or exploitation.

Unit

Either a 15-minute increment or a day.

Vulnerable Adult Protective Services (VAPS) Report

Any person who reasonably believes that a vulnerable adult has been subjected to abuse or neglect or observes conditions or circumstances that reasonably would result in abuse or neglect must report the information to the department or to an appropriate law enforcement agency.