

Waiver Rule & Policy/Procedure Updates

Office of Aging and Adult Services

OAAS-TNG-24-007

Issued September 17, 2024

Agenda

- Who can be the DSW?
 - LRI Policy
- Medically Tailored Meals

Who can be the Direct Service Worker (DSW)?

Who can be the DSW?

- Effective 7/1/24, OAAS announced a change in the Community Choices Waiver (CCW) program regarding who is allowed to be the DSW for Personal Assistance Services (PAS).
- The CCW PAS DSW can be:
 - Spouse (must meet extraordinary care criteria);
 - Tutor;
 - Curator;
 - Power of Attorney; or
 - Legal Guardian

Who can **NOT** be the DSW?

- The CCW DSW **CANNOT** be the Responsible Representative.
- The LT-PCS DSW **CANNOT** be the Responsible Representative, Spouse, Tutor, Curator, Power of Attorney or the Legal Guardian.
 - No changes were made to the LT-PCS Rule.

DSW/Participant Relationship

**SPOUSE
CURATOR
TUTOR
POWER OF
ATTORNEY
LEGAL GUARDIAN**



YES! The individuals listed above **are allowed** to be the PAS DSW.

NOTE: Spouses are only allowed to be the DSW if they are determined to meet the extraordinary care criteria.

RESPONSIBLE REPRESENTATIVE (RR)



NO! RRs are not allowed to be the PAS DSW.

**CHILDREN,
CHILDREN-IN-LAW
OTHER RELATIVES**



YES! Children, children-in-law, and/or other relatives **are allowed** to be the PAS DSW.

**FRIENDS OR
OTHER NON-RELATIVES THAT
DO NOT LIVE WITH
THE PARTICIPANT**



YES! Friends or other non-relatives that **do not live** with the participant **are allowed** to be the PAS DSW.

Legally Responsible Individual (LRI)

- Per Centers for Medicare & Medicaid Services (CMS) definition, the LRI is a spouse who is obligated to care for another person.
- An LRI's legal (unpaid) obligation to care for the participant includes routine care; such as, cooking/cleaning, regular family interactions, and any legally indicated activities (medical/financial decisions).
- The LRI/Spouse can be the CCW participant's DSW for Personal Assistance Services (PAS), if extraordinary care criteria is met.

What is Extraordinary Care?

- Extraordinary care is defined as:
 - Activities which require an LRI/spouse to exceed the range of activities that would ordinarily be performed for an individual the same age without a disability/chronic illness;
 - AND**
 - The care is necessary to assure the health and welfare of the participant to avoid institutionalization.

LRI Request

- OAAS Service Review Panel (SRP) will review each request via the LRI/Spouse Request Form to determine if the extraordinary care criteria is met.
- SRP is looking for the following:
 1. The participant has extraordinary health care needs;
 2. The spouse is qualified to provide extraordinary care (outside of the norm); AND
 3. It is in the best interest of the participant.

Extraordinary Health Care Needs

- Participant's behavioral, dementia related or nursing care needs as identified in the iHC assessment and/or Plan of Care (POC); such as, but not limited to the following:
 - Oxygen;
 - Tube feeding;
 - Suctioning;
 - Physical therapy/occupational therapy;
 - Incontinence (with the use of a urinary collection device or ostomy);
 - Stage 4 or non-codeable pressure ulcers;
 - Dialysis; and/or
 - Hospice.

Extraordinary Care Criteria

- Participant's lack of qualified support staff confirmed by:
 - The inability to locate or hire staff;
 - Staff that apply are not able to provide the needed supports; and/or
 - The LRI/spouse has a unique ability to meet the needs of the participant (i.e. special skills, training, license that is tied to the support needed);
- AND**
- It is in the best interest of the participant.

LRI/Spouse Request Form

- LRI/Spouse Request form is to be completed by the Direct Service Provider (DSP) or Self-Direction (SD) employer.
- DSP or SD Employer must identify the following:

Extraordinary
Health Care Needs



Extraordinary Care



LRI/Spouse Request Form

- DSP or SD Employer must provide:

Justifying documentation.

A detailed explanation of the extraordinary health care needs & the extraordinary care.

LRI and Extraordinary Care Procedure

The DSP emails requests to the OAAS Regional Offices (ROs).



RO reviews the request and requests additional information/clarification if needed.



RO submits the referral to SRP including the RO recommendation.



SRP reviews, obtains additional info from RO if needed, and makes a determination.



SRP notifies RO of the decision.



RO notifies the DSP and SC of the decision.

OAAS Approval of LRI/spouse

- If SRP approves the LRI/Spouse to be the DSW, the SC will include the following statement in the participant's POC or on the Support Coordination Contact Documentation (SCD) form:

“OAAS has determined that extraordinary care is met and [Participant's Spouse's Name], LRI/spouse of [Participant's Name] is authorized to serve as the DSW effective [enter date approved] .”

OAAS Approval of LRI/spouse (cont'd)

- If SRP approves the LRI/Spouse to be the DSW:
 - The DSP will proceed with hiring the LRI/spouse as the DSW, per their usual hiring processes as outlined in their licensing regulations.
 - The FEA/SD employer will proceed with hiring the LRI/spouse as the DSW, per their usual hiring processes as outlined in the OAAS Community Choices Waiver Self-Direction Employer Handbook, and licensing regulations.

OAAS Denial of LRI/spouse

- If SRP does NOT approve the LRI/Spouse to be the DSW:
 - The SC will contact the DSP or SD employer to ensure their understanding that the spouse CANNOT be the DSW.
 - The DSP or SD employer will locate another DSW that can meet the participant's needs.

Medically Tailored Meals (MTM)

Medically Tailored Meals

- The MTM service provides 2 nutritionally balanced meals per day following a hospital and/or nursing facility stay for participants with certain chronic conditions.
- OAAS has updated the policy on MTMs to expand the chronic conditions list.

MTM Chronic Conditions

- Below is the full list of chronic conditions eligible for MTM (*new conditions are highlighted*):
 - Congestive heart failure;
 - Diabetes;
 - Renal disease;
 - Oral dysphagia;
 - Gluten intolerance;
 - **Stroke;**
 - **Chronic Obstructive Pulmonary Disease (COPD);**
 - **Cancer; and/or**
 - **Hypertension.**

MTM Services Procedure Codes/Rates

Waiver Service Descriptions	HIPAA/HCPC/Other Service Descriptions	Procedure Codes	Modifiers	Units/Rates
HOME DELIVERED MEALS				
Medically Tailored Meals	Home Delivered Meals by Registered Dietician	S5170	AE	Maximum of \$7.49 per service/meal – Maximum of 2 meals per day
Medically Tailored Meals (Gluten-free, renal and pureed)	Home Delivered Meals by Registered Dietician	S5170	AE, U1	Maximum of \$8.49 per service/meal – Maximum of 2 meals per day

- Do NOT forget to add the procedure code modifiers to the budget!

Resources

- Memo 6/27/2024
- Legally Responsible Individual (LRI)/Spouse & Extraordinary Care Policy and Procedures document (OAAS-ADM-24-005)
- LRI/Spouse Request Form (OAAS-PF-24-002)
- CCW PAS DSW/Participant Relationship and Living Arrangements Guidance (OAAS-PC-16-001)
- <https://www.doa.la.gov/media/dvsdffgp/2406.pdf>
- Section R-CCW (OAAS-MAN-13-007)
- OAAS Community Choices Waiver Self-Direction Employer Handbook (OAAS-MAN-13-002)

THANK YOU

