

## 1240-I HOME MODIFICATIONS

REVISION DATE: 3/2/2015

EFFECTIVE DATE: June 30, 1994

REFERENCES: A.R.S. §§ 41-1491.19.D.1 and 32-1101.01.

### Overview

Home Modification is the process of adapting the home to promote the independence and functional ability of persons with disabilities. Adaptations may include physically changing portions of the residence to create a living environment that is functional according to the member's specific needs. Terms often associated with this process include barrier removal, architectural access, assistive technology, retrofitting, home modifications, environmental access, or universal design.

Members who are eligible for the Arizona Long Term Care System (ALTCS) are also eligible for medically necessary home modifications for architectural access to and within his/her natural/private home. The goal of a home modification is to provide the person greater independence and ability with assistance for daily living in their home. Home modifications must be medically necessary, cost-effective, and reduce the risk of an increase in Home Community Based Services (HCBS) or institutionalization.

A Home Assessment will be done to develop an individualized home modifications plan. The plan will ensure that only appropriate diagnosis related modifications be completed in the home. This plan also provides for a cost-effective, predictable, medically beneficial, and measurable rehabilitative service for the member.

The Division must approve or deny requests for home modifications within 14 calendar days from the "identified need date." A request that requires an additional extension for up to 14 days and is in the member's best interest. Requires the member receive written notice including the reason for the extension. The Support Coordinator should request an assessment via the Individual Support Plan/Individualized Family Services Plan/Person Centered Plan process when attempting to identify the most appropriate modification for the member. The Planning Team identifies the need for a home modification assessment only. The assessment must be completed within 30 days. A certified staff person must conduct a home visit to make this assessment. The "identified need date" is determined at the time the team agrees to the recommendations as a result of the assessment.

When a request is for a specific home modification, such as a curbless shower, "handrails," or widen doors, the Support Coordinator via the Planning Document can make a request for that specific modification. The "identified need date" starts at this time and the request for home modifications must be approved or denied within 14 days. A request that requires an additional extension for up to 14 days, and is in the member's best interest, requires the member receive written notice including the reason for the extension. This method may result in a denial of service. The home modification unit would make a broad "contingent" recommendation if sufficient evidence is present to move forward with the request.

### Scope of Home Modifications

The unit of service is one home modification project. Using the member's primary and secondary diagnoses in conjunction with a home evaluation, a project plan to provide home

modification for the person will include, but not be limited to, the following areas of the home:

- A. Member's bedroom;
- B. Most appropriate, cost-effective bathroom;
- C. Most appropriate, cost-effective entrance/exit to the member's home, i.e., a ramp; and,
- D. Most appropriate, cost effective locations of the kitchen area, when determined to be medically necessary when the member lives alone.

The types of permanent installations for architectural barrier removal include:

- A. Widening of doorways – entrance and exit to one bathroom and the member's bedroom;
- B. Accessible routes to one bathroom and the member's bedroom;
- C. One bathroom environment; (roll-in/curb-less) accessible shower, roll-under sink, high rise toilet with handrails, handrails and grab bars in accessible shower, as prescribed;
- D. One wooden or concrete ramp/low inclined walkway; and,
- E. Kitchen modifications; accessible cooking surface, minimum accessible pantry storage, accessible kitchen sink/faucet. Kitchen modifications are considered medically necessary when the member lives alone and cannot independently prepare necessary meals without modifications.

Home Modification recommendations (e.g., curb-less showers) will consider the use of durable medical equipment (e.g., shower chair) to be used; the Health Care Services Office can provide technical assistance on durable medical equipment. The member must request any new Durable Medical Equipment via their Primary Care Provider (PCP) who forwards the need to their contracted health plan.

#### Home Repairs, Home Improvement

General home repairs and maintenance are the responsibility of the homeowner. Home Modifications are for medically necessary environmental access and do not intend to include remodeling for home improvement or home safety. Although home safety is an outcome from architectural barrier removal when home modifications have been completed, it is the responsibility of the homeowner to ensure the home is safe; and to maintain important safe entrances from the home in case of emergency, for all inhabitants. Requests for home modifications that are determined to be for home repairs, home improvement, or home safety will be denied.

Repairs will be carried out to existing structures only when the approved modifications have begun and cannot be completed because of unforeseen circumstances. These repairs must

necessary for building code correction, thereby granting the building contractor the ability to achieve completion of approved medical environmental modifications.

### New Construction

The service covers only modifications to existing structures of a member/family owned home where the person resides. Members/families that are planning for a new home are responsible for all the architectural access design/construction of a new home. The service does not cover the construction of additional rooms to the existing structure or provide for an additional bathroom. Technical assistance may be available to help with environmental access.

### Homes Not Owned by the Member (Rental/Lease)

The owner of the residence must approve the modifications. When the home being considered for home modifications is not owned but is rented or leased by the family/member, documentation providing permission to allow for renovations on behalf of the member is required from the landlord/owner. Written confirmation must include agreement of participation, signature of the landlord/owner with indication of ownership, and address of residence requested for environmental access.

The Division will incur the cost to restore the home to the original condition prior to the renovation when the landlord/owner requires such after the member has vacated the property.

No Title XIX funds may be used to return a home to its pre-modification state as outlined in Arizona Health Care Cost Containment System (AHCCCS) policy ([www.azahcccs.gov/Regulations](http://www.azahcccs.gov/Regulations)).

It will be the responsibility of the landlord/owner to demonstrate that the removal of architectural barriers in the rented unit will result in the inability to negotiate a new rental agreement with another member or family. The landlord/owner must also demonstrate that it is a financial disadvantage to maintain environmental access to the rented unit. Additionally, the landlord/owner must demonstrate that the unit will not retain the retail value of a single family dwelling because of the removal of architectural barriers.

### Requirements for Medically Necessary Environmental Modifications

Requests for the environmental access to the person's home must include all of the following:

- A. The need for environmental access documented in the member's Individual Support Plan/Individualized Family Services Plan/Person Centered Plan;
- B. ALTCS Primary Care Provider order;
- C. An assessment by a qualified professional, e.g., Occupational Therapist, Physical Therapist, or Certified Environmental Access Consultant. The Division's Medical Director must be contacted to review the request if an assessment by a qualified professional cannot be obtained;

- D. An authorization by the Home Modifications Manager; and,
- E. The evidence that the member resides in a private residence. Members residing in alternative residential settings are not eligible to receive Home Modifications.

If the request is denied due to lack of medical necessity, it may be authorized, approved or paid by Assistance to Families funds. Medically contraindicated requests shall not be authorized.

### Procedures

When a member has recognized a need for home modifications, a request for a home modification begins by contacting the member's Support Coordinator.

The Support Coordinator will forward the request to the Home Modifications Office using the "Initial Request for Home Visit" fax form upon receipt of a member's request for a home modification. This request must be made via the Individual Support Plan/Person Centered Plan process. A written order by a Primary Care Provider (PCP) is another way to make this request. Requests for a home modification may also be made using a home assessment from a Physical/Occupational Therapist. At the time of request for home modifications the Support Coordinator shall enter into the case file via the "Individual Support Plan" or the "Change of Individual Support Plan" form, the need for an assessment to determine specific modifications.

The date recorded in the member's Individual Support Plan/Individualized Family Services Plan/Person Centered Plan (Planning Documents) becomes the date for the request for an assessment. This request date determines the beginning of the required 30 days to complete a home visit and assessment. Once the assessment is completed, the team can request the specific modifications and the date of this request becomes the "need identified" date.

The Division must approve or deny requests for home modification within 14 days of the identification of need date. A request that requires an additional extension for up to 14 days and is in the member's best interest, requires the member receive written notice including the reason for the extension. Projects should be completed as soon as possible following approval, not to exceed 90 days. Extenuating circumstances that prevent project completion within 90 days of approval will be documented in the member's case record.

A scheduled home assessment will be conducted within 30 days after the Home Modification unit in Central Office receives a request. The Support Coordinator must be present during the home environmental assessment.

The purpose of a home modification is to increase a member's independence. The home visit will assess the relationship of the member's ability to function independently in the current environment as a result of the proposed home modifications. The home visit will also coordinate the Home Modification Packet production. The home assessment will include:

- A. Consideration for member's abilities and disabilities based upon aids to daily living;

- B. Consideration of information that is obtained from the member, family or others in the household and members of the Planning Team;
- C. Consideration of hazardous areas of the home based on physical and/or cognitive/intellectual disabilities;
- D. Identification of the Planning Documents needs as they relate to delivering services to the member;
- E. Identification of diagnosis-related modifications;
- F. Provisions for necessary assistive devices and durable medical equipment;
- G. Provisions for necessary architectural barrier removal; and,
- H. Recording architectural measurements of floor plans and specification sheet.

Review the required documents for the Home Modifications Packet with the member's Support Coordinator. This includes:

- A. Reviewing the Professional Assessment for environmental access. An Occupational Therapist, Physical Therapist, or Certified Environmental Access Consultant for the project can provide the professional assessment. A review may be requested from the Division's Medical Director if a professional assessment cannot be obtained at all or obtained in a timely fashion.
- B. Obtaining the PCP order for the project using the prescription form approved by the AHCCCS at 15 days from the "need identified" date. After this 15-day period, the Home Modifications unit will send a second prescription form to the PCP with instructions that services will be denied if the prescription form is not received.
- C. Obtaining the Project Specification Sheet and Floor Plans. The Home Modification Office will be responsible for the development and implementation of the Project Specification Sheet and drafting of floor plans for each Project. A bid request will be forwarded to the appropriate providers. The Home Modifications Unit will review and award the bid to the approved provider upon return of the proposal.
- D. The following authorities will be used as reference for determining accessibility and defining a living environment that provides greater independence and architectural access for the member upon developing the Project Specification Sheet. These include Uniform Building Code Chapter 11 - Accessibility, and guidelines in accordance with the Americans with Disabilities Act. *Note:* The Division will only approve medically beneficial, cost-effective environmental access.

Obtain Home Modification Bids - (at least two (2) bids). The Division will use only a licensed, bonded/insured - B or B3 Contractor/Builder for the accessible renovation of the member's residence.

Complete the *Environmental Modifications Request Form* to track progress of the project. Ensure that member's identification information, Provider/Contractor name, cost of service, the signatures of the Support Coordinator, supervisor, and District Program

Administrator/District Program Manager or designee (cost of service must be indicated prior to submitting to the Lieutenant Program Manager/District Program Manager) are included. The project can be approved and started whether or not the form has been completed but must be completed to ensure everyone has knowledge of the project and the project costs.

Submit the project packet to the Home Modification Office for review/approval.

The packet will include the following:

- A. Environmental Modifications Request;
- B. Member's Planning Documents (Individual Support Plan/Individualized Family Services Plan/Person Centered Plan) indicating need for medical environmental access;
- C. Professional assessment dated within time of request or review with signature from Division's Medical Director;
- D. PCP order dated within time of request;
- E. Project Specification Sheet and Floor plan (before and after, site plan); and,
- F. Contractor bids.

#### Review Procedures

The Home Modifications Manager will ensure the District representative has reviewed costs and signatures are present upon receipt of the Project Packet.

The Home Modifications Manager will review and sign the request only upon verification that all necessary documents have been provided.

A second level of approval will be required if a Home Modification Project Packet has a total project cost greater than \$9000.00. The Home Modifications Manager will forward the project packet to the Assistant Director or designee for review and a final decision. The second level review will be monitored as to avoid delay and maintain Project Packet progress with in required time frames.