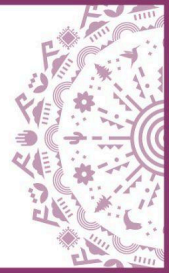




Division of Aging & Adult Services

State Unit on Aging Policy



Subject: Non-Medical Home and Community-Based Services
Policy Chapter: 3100
Effective Date: 07/1/2025
Revision Number: 0

Chapter 3.1 Non-Medical Home and Community-Based Services

I. POLICY STATEMENT

This policy provides an outline of the Division of Aging and Adult Services (DAAS) operational policies, procedures, and reporting requirements for the Non-Medical Home and Community Based Services (NMHCBS) program.

This policy is subject to change as additional information and/or regulations are received from the U.S. Department of Health and Human Services (HHS).

II. APPLICABILITY

- A. DES Employees;
- B. Area Agencies on Aging; and
- C. Subcontractors that provide NMHCBS.

III. AUTHORITY

| | |
|--------------------------------|---|
| Grants for Supportive Services | 42 U.S.C. 3030d |
| Older Americans Act (OAA) | Older Americans Act of 1965 (OAA) |
| Code of Federal Regulations | 45 C.F.R. §1321 and 1322 |
| A.R.S. | Title 46 Chapter 1, Article 8 |

IV. DEFINITIONS

Activities of Daily Living (ADLs): Activities such as bathing, dressing, eating, toileting, transferring, and walking, including proper lifting techniques.

Adaptive Aids and Devices: Assistive technology, durable equipment, and emergency response systems designed to meet the unique needs of older adults, individuals living with a disability (physical, developmental, and/or intellectual), individuals living with chronic disease or chronic conditions, or adult children with disabilities.

Arizona Standardized Client Assessment Plan (ASCAP): An assessment tool designed to highlight the ADLs and IADLs the Client requires assistance with and the degree of need for assistance. The ASCAP captures demographic, social, mental and other health related information on the Client and becomes the primary planning document for the Client and the Case Manager.

Attendant Care: A service in which a trained attendant provides assistance with homemaking/homemaker services, including house cleaning and laundry and Personal Care services.

Case Manager: A professional or social worker with experience in providing Case Management.

Case Managed/Case Management: The assessment and development of an individualized service plan through which the eligibility of individuals is determined, appropriate services or benefits are identified, planned, reported, monitored, or terminated and follow-up is provided if and when appropriate.

Client: An individual who is seeking or receiving NMHCBS services.

Contracted Provider: A professional contracted by the AAA to provide case management services.

Disability: A physical or mental impairment that substantially limits a major life activity, has a record of such an impairment, or is regarded as having such an impairment as defined in section 3 of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102).

Economic Need: Need resulting from an income level at or below the Federal Poverty Level and as further defined by state and area plans based on local and individual factors, including geography and expenses.

Family Caregiver: Adult family members, or other individuals, who provide in-home and community care, without payment or a professional agreement, to Older Adults, or individuals with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction. This includes Older Relative Caregivers.

Functional Limitation: A physical or mental impairment that substantially limits 1 or more major life activities.

Home Care Services: Services provided to a Client who has functional impairments and is unable to perform Activities of Daily Living.

Health Care Practitioner: A Physician, a Physician's Assistant, Nurse Practitioner, or other individual licensed and authorized by law to use and prescribe medications and devices, as defined in A.R.S. §32-1901.

Home Health Aid: A service that provides intermittent health maintenance, continued treatment or monitoring of a health condition and supportive care for activities of daily living within the Client's place of residence.

Home Nursing: Skilled nursing service provided by or supervised by a Registered Nurse in the Client's place of residence in the community. Skilled nursing services may include health maintenance, continued treatment or supervision of a health condition.

Home Repair and Adaptations: Safety and/or structural repairs to the home, including residential repair and renovation projects designed to enable older adults to maintain their homes in conformity with minimal housing standards.

Instrumental Activities of Daily Living (IADLs): Activities such as laundry, shopping, housework, telephone, financial management, transportation, and meal preparation.

Non-Case Managed Services: Supportive services provided to older adults that do not require a case manager overseeing an individual's needs, but rather offer accessible, general services like transportation, congregate meals, health education, and wellness programs.

Older Relative Caregiver: An adult family member, age 55 or older, who lives with and is the primary provider of in-home and community care, without payment or a professional agreement, to a Child or an individual with a Disability.

Personal Care: Services that help someone complete their daily activities, such as food preparation, assistance with showering, transferring, eating, etc.

Pre-Screening: An initial screening conducted by the AAA, or its contracted provider, to determine if a Client may be eligible for NMHCBS services.

Planning and Service Area (PSA): A geographic area designated by the SUA for the purposes of local planning and coordination and awarding of funds.

Respite: Temporary relief or rest to informal caregivers and older relative caregivers from the demands and stressors of providing unpaid care in the home, helping to avoid costly placement of the care recipient in a care facility.

Short Form Intake Document (SFID): A shortened version of the ASCAP assessment tool designed to highlight the ADLs and IADLs the Client requires assistance with and the degree of need for assistance.

Social Need: Need caused by noneconomic factors, including physical and mental disabilities, language barriers, and cultural, social, or geographic isolation, including isolation caused by racial or ethnic status that restricts the ability of a Client to perform normal daily tasks or threatens the capacity of the Client to live independently.

Substantial Human Assistance: Verbal reminding, physical cueing, or supervision needed while completing ADLs or IADLs and is typically completed by a caregiver.

Tribal Members: Clients enrolled with a federally recognized tribe..

V. STANDARDS

A. Overview

1. NMHCBS is the framework to provide all supportive services under the Older Americans Act (OAA). NMHCBS comprises subprograms of the NMHCBS system:
 - a. Congregate Meals (see DAAS Congregate Meals Policy);
 - b. Home Delivered Meals (see DAAS Home Delivered Meals Policy);
 - c. Family Caregiver Support Program (FCSP) (see DAAS FCSP Policy); and
 - d. Disease Prevention Health Promotion program (DPHP) (see DAAS DPHP Policy).
2. NMHCBS provides Home Care Services to Clients who need assistance with Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) so they may avoid premature institutionalization. The NMHCBS System has the following goals:
 - a. Assist Clients with Functional Impairments to care for themselves in their home and community;
 - b. Prevent or delay less desired and more costly institutional placement; and
 - c. Maintain the dignity, autonomy, and independence of Clients and their families.

3. NMHCBS includes, but is not limited to, the following services:
 - a. Adaptive Aids and Devices;
 - b. Adult Day Care;
 - c. Attendant Care;
 - d. Case Management;
 - e. Home Health Aid;
 - f. Home Nursing;
 - g. Respite;
 - h. Transportation;
 - i. Home Repair and Renovation needed to support the independence and health of Clients and that is not readily available under another program; and
 - j. Other services as defined by Federal and State requirements.
4. The State Unit on Aging (SUA) administers the NMHCBS program by providing funding and direction to the state's Area Agencies on Aging (AAAs).
6. The NMHCBS System consists of Case Managed and Non-Case Managed services.
 - a. Case Managers use a strength-based approach and integrate Client preferences and goals to determine eligibility and need, authorize services, arrange for the provision of services, and monitor the services.
7. The NMHCBS program prioritizes Clients with the greatest Economic Need and Social Need.
8. Services provided under NMHCBS are subject to availability of funding.

B. Eligibility Requirements

1. The following individuals are eligible to receive NMHCBS:
 - a. Clients aged 60 years of age or older;
 - b. Clients under age 60 with a Disability; or

- c. Family Caregivers as defined in the DAAS FCSP Policy.
- 2. Clients must have a Functional Limitation as assessed using the ASCAP and the [Service Eligibility Matrix](#).
 - a. The ASCAP must be administered during an in-home visit by a Case Manager.

C. Process to Obtain Services

- 1. AAAs will be available for Clients seeking NMHCBS services, at a minimum, in the following ways:
 - a. By phone, in-person, or via web-based means of communication. The AAA must ensure their up-to-date phone number, address, and website are posted in the following places to find out about available resources:
 - i. Area Agency on Aging Locations landing page on the [ADES website](#);
 - ii. Attending or viewing Community Education and Outreach activities that provide information regarding CNG.
- 2. AAAs will conduct a Pre-Screening to determine if the Client appears to meet the eligibility criteria listed in V.B. The AAA will support Clients by completing the Pre-Screening in the most convenient way, which may include in-person, over the phone, or virtually.
- 3. If, through the Pre-Screening, the AAA determines that the Client may be eligible for NMHCBS, a Case Manager will assess the Client's eligibility within 7 business days of receiving the case assignment by completing either:
 - a. An Arizona Standardized Client Assessment Plan (ASCAP) (AG-095); or
 - i. A Short Form Intake Document (SFID) (AAA-1247A) for Tribal AAAs.
- 4. The assessment must include the following documentation:
 - a. Proof that the Client is not receiving duplicative services through other programs, including but not limited to:
 - i. Case Managers must verify that the Client is not receiving duplicative services through the Arizona Long Term Care

System (ALTCS) by completing a system check.

- b. Documentation of medical need from a Health Care Practitioner is required for the following services:
 - i. Insulin set-up;
 - ii. Medication set-up;
 - iii. Vital monitoring;
 - iv. Nursing assessment;
 - v. Teaching by nurse;
 - vi. Medication management / monitoring;
 - vii. Wound care; or
 - viii. Catheter/colostomy care.
- c. Documentation that the Client does not have any family or friends willing or able to provide the necessary care or has the financial means to obtain the needed care.

5. Based on the availability of services, Clients may be placed on a waitlist.

D. Redetermination of Eligibility

- 1. AAAs must reassess Client eligibility every 12 months or any time a change occurs that may impact eligibility or the need for services the Client is receiving.

E. Roles and Responsibilities

- 1. The SUA will:
 - a. Contract with AAAs to provide NMHCBS;
 - b. Define Greatest Social Need and Economic Need to be used as a prioritization by the AAAs;
 - c. Provide advice, training, and technical assistance to AAAs and subcontractors;
 - d. Oversee and carry out reporting requirements for NMHCBS as required by HHS;
 - e. Monitor AAAs to ensure compliance with:

- i. SUA program policies and procedures;
- ii. Federal regulations;
- iii. State laws;
- iv. Fingerprinting/background clearance check policies;
- v. Data collection and reporting requirements;
- vi. Coordination with Tribal organizations and Title VI programs;
- vii. Quality and effectiveness in program activities and service delivery;
- viii. Staff training and licensing requirements;
- ix. Contract requirements; and
- x. Any additional guidance provided by the SUA and/or HHS.

2. AAAs will:

- a. Use Title III funds, as designated by the State, for the purpose of providing NMHCBS services.
- b. Comply with DAAS policies and procedures, ADES scopes of work (SOW), contracts, guidance, and technical assistance.
- c. Not violate or conflict with state, county, tribal, and local laws and/or ordinances.
- d. Provide services to Clients in a manner that is person-centered, strength-based, trauma-informed, and culturally sensitive per 45 CFR 1321.77.
- e. Maintain a comprehensive Case Management System to ensure Clients receive the appropriate services from the NMHCBS System within their Planning and Service Area (PSA) as outlined in the DAAS Case Management Policy.
- f. Ensure that AAA employees and Contracted Providers:
 - i. Have current certification in CPR and training in home accident prevention and first aid;
 - ii. Comply with a fingerprint based criminal background

check at the time of hire, or as a result of reassignment after hire, on employees and volunteers who have direct contact with vulnerable individuals including those who are mentally disabled, frail, or have a chronic disease that puts them at risk for abuse (see A.R.S. § 46-141).

- g. Ensure Case Managers meet the licensing and certification requirements set forth in their respective scopes of work.
 - h. Supervise and monitor Case Managers and Contracted Providers.
3. Case Managers/Contracted Providers will:
- a. Conduct an in-home visit and complete an assessment of the Client needs using tools outlined in V.B.2.
 - b. Provide information about available services and eligibility requirements.
 - c. Refer Clients that are not eligible for NMHCBS to other programs that may provide comparable services, when appropriate.
 - d. Develop a care plan in collaboration with the Client or caregiver.
 - e. Verify that there is not a duplication of services with ALTCS at the initial assessment and at each redetermination.
 - f. Authorize, coordinate, and facilitate services to assist Clients that will help them maintain independence.
 - g. Monitor Client's services to ensure appropriateness and effectiveness.
 - h. Complete reassessments at intervals specified in V.D.

F. Fingerprinting and Criminal Background Check

- 1. AAA must ensure that Contracted Providers comply with the following:
 - a. A fingerprint-based criminal background check must be completed at the time of hire or as a result of reassignment after hire, on employees and volunteers who have direct contact with juveniles or vulnerable adults including those who are mentally disabled, frail, or have a chronic disease that puts them at risk for abuse (see A.R.S. § 46-141). See DAAS Administrative Mandates Policy.

G. Systems, Software, and Technology

1. The following systems must be used to meet reporting requirements:
 - a. The Older Americans Act Performance System (OAAPS) by the SUA; and
 - b. The Division of Aging and Adult Services Reporting System (DAARS) by the AAAs.

H. Records Management

1. AAAs and Contracted Providers must maintain NMHCBS program records in paper or electronic format.
2. All records, regardless of their format, must be maintained in a secure manner to protect the contents from breach, theft, or misuse. This includes:
 - a. Maintaining paper documentation in locked files; and
 - b. Securing electronic records.
3. Records and information collected as part of application/appeal are kept confidential.
4. Records and information maintained as confidential must not be released except as authorized under A.R.S. §41-1959.
 - a. AAA must explain to Clients that individual information and records may be shared in order to provide services.

I. Privacy, Confidentiality, and Disclosure

1. The transmission of Personally Identifiable Information (PII) and Protected Health Information (PHI) for any Client must be transmitted using secure means such as encryption to ensure the information is not accessed by unauthorized individuals.
2. Disclosure of PII and PHI may only be made with the informed consent of the Client or their legal representative, unless required by law or court order, for program monitoring by authorized agencies.
3. Address Confidentiality Program
 - a. AAA Employees and Contractors must refer to the DES Address Confidentiality Program (ACP) Policy and the DAAS ACP Policy if a

Client states that they are a participant in the Address Confidentiality Program.

- b. If the Client is an ACP Participant, the substitute address must be accepted on all application material required for the program.

Complaints, Grievances, and Appeals

1. Each AAA will develop and implement a process to:
 - a. Investigate and resolve appeals from Clients and other outside parties against AAA and Contracted Providers per DAAS Administrative Mandates Policy.
 - b. Verify that Clients receive a copy of the appeals process.

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact the Division of Aging and Adult Services at 602-542-4446; TTY/TDD Services 7-1-1