

LICENSED HEALTH AID

Service Description

A service that provides limited skilled interventions, health maintenance, continued treatment or monitoring of a health condition, and supportive care for activities of daily living at the individual's place of residence or in the community.

Service Requirements and Limitations

1. This service may be provided in the following settings:
 - 1.1 The Division member's home
 - 1.2 The Community
2. This service shall not be provided when the member is hospitalized.
3. The service shall not be provided in a community residential setting, as defined in A.R.S. § 36-551 (15) .
4. This service shall not be provided to members living in skilled nursing facilities or non-state operated Intermediate Care Facilities ("ICFs").
5. This service shall be provided on the same day as Attendant Care or Homemaker service only when there is no duplication of services and the time and documentation of services do not overlap .
6. The authorization of this service shall include a review of authorized nursing services to ensure the coordination of care that is most beneficial to the member's goals and expectations.
7. This service must be ordered by a physician and implemented through the member's individualized care plan developed by the Home Health Agency ("HHA") provider.
8. The member's individualized care plan must be reviewed by a physician every sixty-two (62) days (bimonthly) and authorized/monitored by the Division's Health Care Services in conjunction with the member's Support Coordinator.
9. Licensed Health Aides shall provide limited skilled interventions and nursing assistant services including monitoring of a member's medical condition, health maintenance or continued treatment services, and activities of daily living under the direction and supervision of a registered nurse ("RN").

Service Goals and Objectives

Service Goals

1. To improve or maintain the physical well-being and/or mental health of members
2. To increase or maintain self-sufficiency of members.

Service Objectives

The Qualified Vendor shall ensure that the following objectives are met:

1. Obtain an order from the physician for Licensed Health Aide services.
2. Under the supervision of a RN implement an individualized care plan for the member upon approval by the member's Primary Care Physician ("PCP") , review the plan of care with the RN every sixty (60) days and send the plan to the Primary Care Physician ("PCP") for approval, based on the member's self-care skills and health condition.
 - 2.1 Have the member's individualized care plan reviewed by a physician every sixty-two (62) days (bimonthly) and authorized and monitored by the Division's Health Care Services in conjunction with the member's Support Coordinator.
3. Provide limited skilled interventions and nursing assistant services including monitoring of a member's medical condition, health maintenance or continued treatment services, and activities of daily living tasks under the direction and supervision of an RN to:
 - 3.1. Monitor a member's medical condition by: providing medication administration, tracheostomy care, enteral care and therapy, and any other tasks approved by the State Board of Nursing in rule.
 - 3.1.1 Monitoring and documenting vital signs, as well as reporting results to the supervising RN or PCP,
 - 3.1.2 Changing dressings and/or bandages,
 - 3.1.3 Providing care to prevent pressure ulcers, and
 - 3.1.4 Determining his/her compliance with nursing instructions and providing reinforcement as needed.
 - 3.2 Provide health maintenance or continued treatment services for the member including, but not limited to:
 - 3.2.1 Personal care activities such as:
 - 3.2.1.1 Bathing/shampooing;
 - 3.2.1.2 Toileting;

- 3.2.1.3 Bowel, bladder, and/or ostomy programs as well as catheter hygiene (does not include catheter insertion);
- 3.2.1.4 Dressing;
- 3.2.1.5 Routine ambulation, transfers, range of motion activities or simple exercise programs;
- 3.2.1.6 Combing/brushing and fixing hair;
- 3.2.1.7 Skin care including hand and foot care;
- 3.2.1.8 Shaving;
- 3.2.1.9 Nail care;
- 3.2.1.10 Dental/oral hygiene; and
- 3.2.1.11 Assisting with the use of special appliances and/or prosthetic devices.
- 3.2.2 Assisting the member with self-administration of medication, as needed.
- 3.2.3 Assisting the member with eating, if required, to maintain sufficient nutritional and fluid intake.
- 3.2.4 Providing information about nutrition.
- 3.2.5 Assisting the member in activities of daily living to increase physical mobility.
- 3.3 Assist the member in activities of daily living by:
 - 3.3.1 Cleaning the member's living area,
 - 3.3.2 Doing the member's laundry,
 - 3.3.3 Shopping,
 - 3.3.4 Banking, and
 - 3.3.5 Cooking for the member, as necessary.
- 3.5 Under the direction of the RN, inform the member's Division Health Care Services nurse when there are additional medical problems or social problems identified during the course of service delivery.

Service Utilization Information

1. This service will be authorized based on the nursing needs assessment conducted by the

Division's Health Care Services.

2. The Division's Health Care Services will complete nursing assessments at least annually, or more frequently if determined by the Division, to reassess the member's need for this service.

Rate Basis

1. Published. The published rate is based on one (1) unit of direct service.
2. Throughout the term of the contract, the appropriate billing codes, billing units, and associated billing rules are subject to change. All billing codes and billing units, and associated billing rules will be included in the Division's Policies and Procedures Manual, Billing Manual, *RateBook*, and/or other provider resources made available by the Division.

Direct Service Staff and Agency Qualifications

1. Direct Service Staff shall meet the following requirements:
 - 1.1 Pursuant to A.R.S. § 32-1601, be a person who is licensed to provide or assist in providing nursing-related services pursuant to A.R.S. §36-2939; and the qualifications pursuant to 42 Code of Federal Regulations ("C.F.R.") Part 484.4; and
 - 1.2 Is the parent, guardian, or family member of the Arizona Long-Term Care System (ALTCS) member receiving services who may provide Licensed Health Aide (LHA) services only to that member and only consistent with that member's plan of care.
 - 1.3 Be supervised by a RN The supervisor must conduct home visits at least every sixty (60) days.
2. The Qualified Vendor shall meet the following requirements:
 - 2.1 The Qualified Vendor shall be a Home Health Agency licensed by the Arizona Department of Health Services ("ADHS") and certified by Medicare utilizing RNs, and LPNs under the direction and supervision of an RN, for both intermittent or continuous nursing care;
 - 2.2 Under certain circumstances in accordance with the Arizona Health Care Cost Containment System ("AHCCCS"), the Qualified Vendor shall be a Home Health Agency licensed by the ADHS utilizing RNs, and LPNs under the direction and supervision of an RN, for both intermittent and continuous nursing care.

Recordkeeping and Reporting Requirements

1. The Qualified Vendor shall submit monthly individualized progress reports on the member no later than the tenth (10th) business day following the close of the month to the Division's Health Care Services nurse, Support Coordinator, and the member/member's representative

unless the member/member's representative has requested not to receive them. The Qualified Vendor shall refer to the Division's Provider Manual for guidance on report due dates and minimum content of the reports.

2. The Qualified Vendor must maintain daily records on file as proof of the number of hours worked by each direct service staff providing direct service to members.
 - 2.1 Each time sheet, equivalent document, or data system must contain the original signature or other independent verification (that complies with A.R.S. § 41-132) of the member/member's representative after service delivery confirming the hours worked. Proof of hours worked must be signed or verified by the member/member's representative before the Qualified Vendor submits the claim for payment.
3. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.