HOMEMAKER

Service Description

A service that provides assistance in the performance of routine household activities at an individual’s place of residence.

This service was previously called Housekeeping.

Service Requirements and Limitations

1. This service shall be provided in the Division member’s home. Members residing in home and community-based alternative residential settings are not eligible for this service.

2. This service may be provided outside the member’s residence only when unsafe and/or unsanitary conditions exist or in the community when purchasing supplies or medicines.

3. This service shall not be provided when the member is hospitalized.

4. Within the same day, this service shall not be provided in conjunction with Attendant Care or Home Health Aide services that encompass homemaker tasks without special approval of the member’s Support Coordinator.

5. This service shall be for the benefit of the member and not for the benefit of other family members or residents.

6. This service shall be supervised and monitored. When the service is provided by a Qualified Vendor, it is the responsibility of the Qualified Vendor to conduct the supervision and monitoring. When the service is provided by an Individual Independent Provider, it is the responsibility of the member’s planning team [e.g., Individual Support Plan (“ISP”) team] to decide, prior to the delivery of services, who will conduct the supervision and monitoring. The minimum requirements of the Arizona Health Care Cost Containment System (“AHCCCS”) are:

   6.1 Conduct at least one (1) supervisory visit for each direct service staff within the first ninety (90) days of their hire date, and annually thereafter, and when the direct service staff is working and physically present in the member’s home. Additional supervisory visits might be warranted.

   6.2 Conduct an initial supervisory visit to speak with the member/member’s representative regarding the quality of care, delivery of services, and education of the member/member’s representative about the need to contact the Qualified Vendor/Individual Independent Provider if concerns develop between supervisory and/or Support Coordinator visits. This visit must be initiated not more than five (5) days from initial provision of the service by the Qualified Vendor/Individual Independent Provider and
may be made by telephonic contact. A follow-up site visit is required at thirtieth (30th) day. A visit at the sixtieth (60th) day is required if issues are identified; otherwise these ongoing visits occur at least every ninety (90) days thereafter.

6.3 The completion of a supervisory visit may occur in conjunction with the monitoring visit.

7. The AHCCCS Agency with Choice Member-Directed Service Delivery Model/Option.

7.1 The Qualified Vendor shall identify in the Division’s Qualified Vendor Application and Directory System (“QVADS”) whether it is participating in the AHCCCS Agency with Choice member-directed service delivery model (see the AHCCCS website located at www.azahcccs.gov for additional information regarding the AHCCCS Agency with Choice member-directed service delivery model/option).

7.2 The Qualified Vendor accepting a service authorization for Homemaker for a member who has chosen to participate in the AHCCCS Agency with Choice member-directed service delivery option shall participate in the AHCCCS Agency with Choice member-directed service delivery model, shall agree to comply with all AHCCCS rules and policies regarding the Agency with Choice member-directed service delivery model, and shall implement the member’s planning document.

7.3 The Qualified Vendor shall comply with the AHCCCS Agency with Choice member-directed service delivery model requirements and ensure that the direct service staff providing Homemaker is not the member’s individual representative as defined by the AHCCCS Agency with Choice member-directed service delivery model.

7.4 A member participating in the AHCCCS Agency with Choice member-directed service delivery option may request a change in vendors at any time without having to express any reason for the change, notwithstanding Arizona Administrative Code (“A.A.C.”) R6-6-2109(B), (C), and (D).

7.5 The Qualified Vendor that has chosen to participate in the AHCCCS Agency with Choice member-directed service delivery model may be required to provide additional training for the member and/or member’s representative regarding the partnership as assessed and authorized by the Division. If this is required, the Qualified Vendor shall bill a unique service code as identified by the Division.

7.6 The Qualified Vendor that has chosen to participate in the AHCCCS Agency with Choice member-directed service delivery model may be required to provide additional training for the direct service staff outside of the scope of the required/standard training [i.e., Cardiopulmonary Resuscitation, First Aid, Article 9 (Managing Inappropriate Behaviors), Direct Care Worker, etc.] and in order to meet the unique needs of the member as assessed and authorized by the Division. If this is required, the Qualified Vendor shall bill a unique service code as identified by the Division.
Service Goals and Objectives

Service Goals

To preserve or improve the safety and sanitation of the member’s living conditions.

Service Objectives

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

1. Develop and implement a schedule and general plan of care for the member.

2. Provide assistance to the member to attain or maintain safe and sanitary living conditions, including, but not limited to, the following tasks:
   
   2.1 Dusting;
   
   2.2 Cleaning floors, bathrooms, and windows (if necessary for safe and sanitary living conditions);
   
   2.3 Cleaning kitchen, washing dishes, routine maintenance and cleaning of household appliances (including, but not limited to, oven and refrigerator);
   
   2.4 Changing linens and making bed;
   
   2.5 Washing, drying, and folding the member’s laundry (ironing only if necessary);
   
   2.6 Shopping for and storing household supplies and medicines;
   
   2.7 Taking garbage out; and
   
   2.8 Other duties as determined appropriate and necessary by the planning team.

3. In unusual circumstances, the following tasks may be performed for the member:

   3.1 To attain safe living conditions, including:
      
      3.1.1 Heavy cleaning, such as washing walls or ceilings, and/or
      
      3.1.2 Yard work, such as cleaning the yard and hauling away debris.
   
   3.2 To assist the member in obtaining and/or caring for basic material needs for water, heating, and food; and
   
   3.3 Planning, shopping, storing, and cooking food for nutritional meals.
Service Utilization Information

1. Typical utilization of Homemaker is two (2) to four (4) hours per week.

2. Using the assessment and plan development processes, needs are assessed by the member’s planning team based upon what is normally expected to be performed by a member and/or his/her natural supports. Consideration should be made to age-appropriate expectations of the member and his/her natural supports (i.e., what can reasonably be expected of each member based on his/her age). This service will only be utilized after the member/natural supports and resources have been exhausted.

3. The planning team decides, prior to the delivery of services, who and how service delivery will be monitored.

4. Homemaker tasks shall be performed only for the member’s areas of the home or common areas of the home used by the member.

5. The member or member’s representative is expected to provide all necessary housekeeping supplies.

6. The member or member’s representative is responsible for providing money for supplies and food in advance of the purchase if direct service staff is expected to shop for food and household supplies.

7. The amount of Homemaker service provided shall be determined based on the home requirements for a safe and sanitary environment. If more than one (1) eligible member resides in the home, payment will not be made twice for cleaning common areas of the home.

8. Homemaker staff shall not provide supervision of members or personal care to the member.

Rate Basis

1. Published. The published rate is based on one (1) hour 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 Qualifications

1. Direct service staff shall be physically capable of performing the required tasks.

2. Direct service staff shall not be the member’s individual representative (as defined by the AHCCCS Agency with Choice member-directed service delivery model) when
the member chooses the AHCCCS Agency with Choice member-directed service delivery option.

Direct Service Staff Training Requirements

1. The Qualified Vendor shall ensure that direct service staff comply with the standards and requirements set forth in Section 5.3 in Service Requirements/Scope of Work of the Qualified Vendor Agreement before providing direct services alone with members.

2. AHCCCS Direct Care Worker Training and Testing. The Qualified Vendor shall ensure that direct service staff comply with the AHCCCS training and testing requirements for Direct Care Services provided by Direct Care Workers (“DCW”) in accordance with AHCCCS policy and the AHCCCS Contractor Operations Manual (“ACOM”) (see http://azahcccs.gov/dcw). The services provided by Direct Care Workers are collectively known as Direct Care Services. A Direct Care Worker (DCW) is a person who assists a member with activities necessary to allow him or her to reside in their home.

2.1 A caregiver who is a Registered Nurse, Licensed Practical Nurse, or Certified Nursing Assistant per Arizona Revised Statutes (“A.R.S.”) Title 32, Chapter 15, is exempt from the DCW training and testing requirements.

2.2 A DCW with an initial hire date prior to October 1, 2012, is deemed to meet the training and testing requirements with the Qualified Vendor by whom they are currently employed. However, if the DCW becomes employed with another agency on or after October 1, 2012, they shall meet the training and testing requirements contained within the AHCCCS policy. All DCWs with an initial hire date on or after October 1, 2012, must meet the DCW training and testing requirements contained within the AHCCCS policy.

2.3 The DCW shall meet the training, testing, and continuing education requirements as per AHCCCS policy and the ACOM, Chapter 429, Direct Care Worker Training and Testing Program.

2.3.1 To meet the AHCCCS training and testing requirements for DCWs, the Qualified Vendor shall:

2.3.1.1 Register with AHCCCS to become an Approved Program to provide the testing and training to its employees,

2.3.1.2 Enter into a direct contracting relationship with an AHCCCS Approved Testing and Training Program which has an AHCCCS Provider Identification Number to provide the testing and training to its employees, or

2.3.1.3 Enter into a direct contracting agreement with a Private Vocational Program (an AHCCCS Approved Program that does not have an
AHCCCS Provider Identification Number or a subsidiary of a Direct Care Service agency).

2.3.1.4 Meet all applicable requirements specified in the AHCCCS Medical Policy Manual (“AMPM”) and all requirements included in the AHCCCS Provider Participation Agreement.

2.4 The Qualified Vendor shall be responsible for assuring that the DCW is in compliance with the AHCCCS policy for Direct Care Services.

2.5 The Qualified Vendor shall comply with recommendations and requirements resulting from the routine monitoring and supervision of the DCW to ensure competence in the direct care service being provided. The monitoring and supervision may also provide assistance with any adjustment issues between the member and the DCW.

Recordkeeping and Reporting Requirements

1. The Qualified Vendor shall adhere to the requirements of “non-provision of service” as required by Division policy (see Section 5.2.6 in Service Requirements/Scope of Work of the Qualified Vendor Agreement).

2. The Qualified Vendor shall 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 to demonstrate full compliance with all programmatic and contractual requirements of the Department and the Division.

4. For the AHCCCS Direct Care Worker Testing and Training, the Qualified Vendor shall

4.1 Verify and document the DCW’s related educational and work experiences;

4.2 Keep records on continuing education, including hours and topics; and

4.3 Document and maintain in the DCW’s personnel file all monitoring and supervision assessments.