

Long Term Services Benefit Specifications and Provider Qualifications

PERSONAL ASSISTANCE SERVICES

SCOPE OF BENEFIT/SERVICE

Supports involving the labor of another person to help waiver participants carry out everyday activities they are unable to perform independently. Services may be provided in the person's home or to access community resources. PAS includes direct personal care services which are defined as assistance with activities of daily living, including mobility, bathing, body care, dressing, eating, personal hygiene, medication management, toilet use, and transfer and assistance with instrumental activities of daily living (e.g., essential shopping, housework, meal preparation, and transportation for essential shopping).

Personal care services also include assistance with health related tasks that can be delegated under the Washington State Nurse Delegation rule. Providers of direct personal care services may be asked to perform certain delegated tasks. These services differ from Treatment and Health Maintenance services in that they are provided to a participant by an individual or agency caregiver who has been trained by a nurse to provide what would otherwise be a skilled task. Treatment and Health maintenance services are provided by a licensed, skilled professional.

Personal care services may be provided outside of the participant's home as specified in the service plan. Personal care may be furnished to individuals participating in community activities or accessing other community services, or to assist a person to function in the workplace.

AMOUNT OF BENEFIT/SERVICE, INCLUDING LIMITATIONS

Participants/caregivers may select services identified in their assessment which they or their unpaid caregiver are eligible to receive. All other payment sources such as Medicare, Apple Health, Veterans benefits, or private insurance must be considered before the demonstration service may be authorized.

DURATION OF BENEFIT/SERVICE, INCLUDING LIMITATIONS

- The following tasks **cannot** be delegated: injections other than insulin, central lines, sterile procedures, and tasks that require nursing judgement.
- Home delivered meals shall not replace nor be a substitute for a full day's nutritional regimen.

AUTHORIZATION REQUIREMENTS

N/A.

PROVIDER SPECIFICATIONS AND QUALIFICATIONS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Individual (list types) | <input checked="" type="checkbox"/> Agency (list types of agencies) |
| <input type="checkbox"/> Legally Responsible Person | <input checked="" type="checkbox"/> Relative/Legal Guardian |

1. PROVIDER TYPE: INDIVIDUAL PROVIDER

License Required: Yes No

Certificate Required: Yes No

Individual providers must contract with the Department before providing personal care services. In order to contract with the Department the individual provider must:

- a. be authorized to work in the United States,
- b. have passed a background check, including the federal background check, and
- c. be age 18 or older.

Individual Providers must meet training requirements and timeframes required in Washington State rule.

2. PROVIDER TYPE: HOME CARE AGENCY

License Required: Yes No
(from Department of Health)

Certificate Required: Yes No

Providers must have a Home Care Agency license as described under Chapter 70.127 RCW and WAC 246-335 or Home Health Agency license under Chapter 70.127 RCW

3. PROVIDER TYPE: ADULT DAY CARE CENTER

License Required: Yes No

Certificate Required: Yes No

Must be in compliance with all of WAC 388-71-0702 through 388-71-0776.

If an Adult Day Center is also a provider of Memory Care & Wellness Services, they must also meet the MCWS Standards of Care.

4. PROVIDER TYPE: ADULT DAY HEALTH CENTER

License Required: Yes No

Certificate Required: Yes No

Must be in compliance with all of WAC 388-71-0702 through 388-71-0776.

If an Adult Day Health Center is also a provider of Memory Care & Wellness Services, they must meet the MCWS Standards of Care.

5. PROVIDER TYPE: REGISTERED NURSE

License Required: Yes No

Certificate Required: Yes No

Licensed under Chapter 18.79.040 RCW.

6. PROVIDER TYPE: **HOME HEALTH AGENCY**

License Required: Yes No

Certificate Required: Yes No

Home Health Agencies must be in compliance with Chapter 70.126 RCW and Chapter 246-335 RCW and WACs 182-551-2000—182-551-2210.

7. PROVIDER TYPE: **FOOD SERVICE VENDOR**

License Required: Yes No

Certificate Required: Yes No

Food Service Vendors must meet requirements for Older Americans Act Title III C2 service provision and Chapter 246-215 WAC. When a participant's needs cannot be met by a Title III provider due to geographic inaccessibility, special dietary needs, the time of day or week the meal is needed, or existing Title III provider waiting lists, a meal may be provided by a restaurant, cafeteria, or caterer who complies with Washington State Department of Health and local Board of Health regulations for food service establishments.