SPI-2006 (Pemp)

Secretary of State Certificate and Order for Filing

TEMPORARY ADMINISTRATIVE RULES

A Statement of Need and Justification accompanies this form..

I certify that the attached	copies* are true, full and cor	rect copies of the TE	EMPORARY Rule(s) adopted on _	1/13/2006 by the Date prior to or same as filing date
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Agency and Division	People with Disabilities			Administrative Rules Chapter Number
Lisa Richards	Lisa Richards 500 Summer St. NE, E10, Salem, OR 97301-1074			503-945-6398
Rules Coordinator	Addre			Telephone
to become effective	1/13/2006	through	6/1/2006	
	Date upon filing or later		A maximum of 180 days including the	ne effective date.
		RULE CA	PTION	
Amended to clarify ex	cluded living arrangement	<u>s</u>		
Not more than 15 words th	nat reasonably identifies the sul	bject matter of the ag	ency's intended action.	
		RULEMAKIN List each rule number sep		
ADOPT:				
AMEND: 411-030-00	040		FILED	
SUSPEND:			JAN 1 3 2006 ARCHIVES DIVISION SECRETARY OF STA	N TE
ors 410.070			SECRETARY OF STA	<u>'</u> '
ORS 410.070 Stat. Auth.			Other Authority	
ORS 410.070 Stats. Implemented	W-0	· · · · · · · · · · · · · · · · · · ·		
·		RULE SU	MMARY	
Additional language home support service	e was added to clarify the es.	rible living arrang at residents of pr	gement as described in OAR isons, hospitals, and instituti	
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Secretary of State

STATEMENT OF NEED AND JUSTIFICATION

A Certificate and Order for Filing Temporary Administrative Rules accompanies this form.

DHS, Seniors and People with Disabilities

411

Agency and Division

Administrative Rules Chapter Number

In the Matter of: OAR 411-030-0040

Rule Caption: Amended to clarity excluded living arrangements. LR

Statutory Authority: ORS 410.070

Other Authority:

Stats. Implemented: ORS 410.070

Need for the Temporary Rule(s):

OAR 411-030-0040 is being changed to clarify that a client whose needs are met through their natural support system will not be eligible for in-home services. This rule change is needed to help local SPD/AA offices to make cost-effective decisions in authorizing services to clients. It will also assist in clarifying that natural supports is both an eligibility factor as well as a service planning issue for administrative law judges who conduct contested case hearings.

In OAR 411-030-0040 a reference to OAR 411-030-0033 was changed to clarify eligible living arrangements for inhome supports. This clarification is needed to support the intent that in-home services are provided to enable an individual to remain in their own home. Changes were needed to clarify excluded living arrangements so that residents of prisons, hospitals and institutions providing ADL services are not determined eligible in error and in violation of our waiver.

Documents Relied Upon, and where they are available:

- OAR 411, division 031 http://arcweb.sos.state.or.us/rules/OARS_400/OAR_411/411_031.html and OAR 411, division 015 http://arcweb.sos.state.or.us/rules/OARS_400/OAR_411/411_031.html
- The Home Care Commission's 2005-2007 collective bargaining agreement with SEIU Local 503, OPEU (representing Homecare Workers). http://www.seiu503.org/docUploads/2005-2007%20State%20Homecare%20Contract.pdf
- Oregon's 1915 (c) Home and Community Based Services Waiver for seniors and persons with physical disabilities
- OAR 461-155-0660 http://arcweb.sos.state.or.us/rules/OARS 400/OAR 461/461 155.html
- Various final orders issued by the Office of Administrative Hearings (which cannot be inspected by the public because they contain confidential client information).
- Code of Federal Regulations Title 42, Volume 3, Part 441 (42CFR441) http://www.access.gpo.gov/nara/cfr/cfr-table-search.html#page1

Justification of Temporary Rule(s):

Failure to change OAR 411-030-0040(2) would result in an invalid rule because the rule if not amended would conflict with the changes to eligible living arrangements described in OAR 411-030-0033. Failure to clarify OAR 411-030-0040(3) and (5) could result in non-compliance with SPD's federal nursing facility waiver if residents of excluded living arrangements were determined eligible for in-home support services.

Authorized Signer a Cooper

Catherine A Cooper 1/13/06

DEPARTMENT OF HUMAN SERVICES Seniors and People with Disabilities

Oregon Administrative Rules Chapter 411, Division 030

IN-HOME SUPPORT SERVICES

411-030-0040 Eligibility Criteria

- (1) In-home support services may be provided to those individuals who meet the established priorities for service as described in OAR chapter 411, division 015 and have been assessed to be in need of a service provided in OAR chapter 411, division 030. Payments for in-home support services are not intended to replace the resources available to a client from their natural support system of relatives, friends, and neighbors. Payment by the Department can be considered or authorized only when such resources are not available, not sufficient, or cannot be developed to adequately meet the needs of the individual. An individual whose care needs are met by their natural supports will not be eligible for in-home support services. Service plans will be based upon the least costly means of providing adequate care.
- (2) Clients served under the Home and Community Based Services waivered In-Home Services Program must meet the established priorities for service as described in OAR chapter 411, division 015 and be included in one of the following groups:
- (a) Current recipients of OSIPM who reside in a living arrangement in which inhome services may be provided, as described in OAR 411-030-0033 and who are eighteen years of age or older;
- (b) Eligible adults, eighteen and older, receiving TANF with MAA, MAF or Extended Medical benefits only when service is necessary to prevent nursing facility placement.
- (3) To be eligible for the Home and Community-Based Services waivered In-Home Services Program, a client must employ an enrolled Homecare Worker or Contracted In-Home Care Agency to provide those services authorized and paid by the Department.
- (a) If, for any reason, the employment relationship between the client and provider is discontinued, an enrolled Homecare Worker or Contracted In-Home Care Agency must be employed within thirty calendar days for the client to remain eligible for the program.

- (b) Following discharge from a temporary stay in any facility or medical institution, the client must employ an enrolled Homecare Worker or Contracted In-Home Care Agency within thirty calendar days.
- (4) Separate eligibility for in-home support services exists for persons eligible for:
- (a) Oregon Project Independence as defined in OAR chapter 411, division 032;
- (b) Independent Choices as defined in OAR chapter 411, division 036; or
- (c) Spousal Pay Program as defined in OAR 411-030-0080.
- (5) Residents of licensed community-based care facilities, nursing facilities, prisons, hospitals and other institutions that provide activities of daily living are not eligible for in-home support services.

Stat. Auth.: ORS 409.050, 410.070 & 410.090

Stats. Implemented: ORS 410.010, 410.020 & 410.070