



# H C B S

**HOME AND COMMUNITY BASED SERVICES**

**Live At Home Longer**

*with services and support for older adults  
and individuals with physical disabilities*

NORTH  
**Dakota** | Human Services  
Be Legendary.™



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# Introduction to Home and Community-Based Services

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Home and Community-Based Services (HCBS) are provided in the individual's home such as homemaker services (housecleaning, laundry, or meal preparation) or personal care (assisting with a bath, etc.) or are community-based, such as non-medical transportation assistance and home-delivered meals.

HCBS focuses on:

- Individual needs
- Choice of services
- Choice of who provides care
- Maintaining as much independence as possible

North Dakota provides Home and Community-Based Services through several programs. Each program offers a specific set of services and each program may have different functional and financial eligibility criteria. See pages 20-21 for a program comparison outline.

## PROGRAMS INCLUDE:

- Medicaid State Plan - Personal Care Services (see pages 10-11)
- Medicaid Waivers for Home and Community-Based Services (see pages 12-13)
- Service Payments for the Elderly and Disabled (SPED) program (see pages 14-15)
- Expanded Service Payments for the Elderly and Disabled (Ex-SPED) program (see pages 14-15)

### ➤ *Who is eligible for HCBS?*

Individuals must meet both functional and financial eligibility requirements.

## FINANCIAL ELIGIBILITY:

- Some programs require eligibility for Medicaid; Medicaid eligibility is determined by an eligibility worker.
- Eligibility for other programs is determined by a case manager and is based on an individual's assets/income and other resources.

### ➤ *What is the most money someone can have and still be eligible?*

Under the SPED program, an individual can have up to \$50,000 dollars in assets. (See pages 20-21, Program Comparison Outline.)

## FUNCTIONAL ELIGIBILITY:

- An assessment is completed by a case manager, which determines eligibility by scoring the individual's ability to complete self-care activities such as bathing, dressing, laundry, housework and meal preparation.
- *Is the score the same for all programs?*  
No, each program has a unique set of criteria. See pages 20-21 for a program comparison outline.

## ROLE OF HCBS CASE MANAGEMENT:

Complete a comprehensive assessment of the individual's needs, assist with establishment of HCBS Services, and assist with referral for other community services that may be needed. One of the key responsibilities of a case manager is to assist with completion of a care plan, monitoring, and referral to an enrolled Qualified Service Provider (QSP) to provide the services.

- *What are the services available in each program?* See pages 20-21, Program Comparison Outline.
- *Where can I find the service definitions?* See pages 6-9, Service Definitions.
- *Who provides the services?* See pages 16-19, Qualified Service Providers.

## QUALIFIED SERVICE PROVIDER (QSP):

An individual or agency that has met the minimum standards set by the North Dakota Department of Human Services in order to be enrolled as a QSP.

- *How does the QSP know someone needs HCBS?*  
The HCBS case manager must provide the QSP with an "Authorization to Provide Service" form before the QSP can provide and/or receive payment.
- *Who pays the QSP?*  
The provider sends a bill to the North Dakota Department of Human Services (DHS) Medical Services Division and they receive payment through the Department's payment system.
- *Can my neighbor, friend or family member be a QSP?*  
Yes.
- *Can I choose who will be providing services for me?*  
Yes.



# Service Definitions

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## **ADULT DAY CARE**

A community-based service offered within a group setting designed to meet the needs of functionally impaired individuals. It is a structured, comprehensive service that provides a variety of social and support services in a protective setting during part of a day. Meals provided as part of these services shall not constitute a full, nutritional regimen (three meals/day).

## **ADULT FOSTER CARE**

Assistance with activities of daily living (ADLs), instrumental activities of daily living (IADLs) and supportive services provided in a licensed private home by a care provider that lives in the home. Adult foster care is provided to adults or individuals who are at least 18 years old and receive these services while residing in a licensed home. The total number of individuals who live in the home who are unrelated to the care provider cannot exceed four.

## **ADULT RESIDENTIAL SERVICES**

A residential program specializing in care of individuals with chronic moderate to severe memory loss or with significant emotional, behavioral or cognitive impairments. Independent living skills training and support are provided to promote and develop relationships, participation in community social life and workplace task skills including behavioral skill building. The individual may require protective oversight and supervision in a structured environment that is professionally staffed to monitor, evaluate and accommodate his or her changing needs. Assistance with ADLs/IADLs, therapeutic, social and recreational programming is provided. Care must foster the maintenance or improvement in independence of the recipient.

## **ATTENDANT CARE SERVICES (ACS)**

Hands-on supportive and medical care specific to a client who is ventilator dependent for a minimum of 20 hours per day. ACS includes nursing activities that have been delegated by the nurse manager to the ACS provider.

## **CASE MANAGEMENT**

Assists functionally impaired individuals to achieve and maintain independence in the living arrangement of their choice. A case manager helps individuals gain access to waiver and other services. Case managers help the client understand options, make informed choices, solve problems and connect with community resources and qualified service providers.

## CHORE SERVICE

Assistance with tasks an individual is not able to complete in order to remain independent in their own home. Tasks include cleaning and floor care of an unusual nature, moving heavy furniture, cleaning of appliances, snow removal, professional extermination or sanitation. The tasks authorized must be directly related to the health and safety of the individual.

## COMMUNITY SUPPORT SERVICES

Formalized training and supports provided to eligible individuals who require some level of ongoing daily support. This service is designed to assist with and develop self-help, socialization, and adaptive skills that improve the individual's ability to independently reside and participate in an integrated community. Services can be provided in the individual's home or in an Agency Foster Home for Adults.

## COMMUNITY TRANSITION SERVICES

Assist eligible individuals transitioning from an institution or another provider-operated living arrangement (to include skilled nursing facility, adult residential, adult foster care, basic care, and assisted living) to a living arrangement in a private residence where the individual is directly responsible for his/her own living expenses and needs non-recurring set-up expenses. Services can be provided in the individual's home or in an Agency Foster Home for Adults.

## COMPANIONSHIP SERVICES

Reduces social isolation in older adults and individuals with physical disabilities. Companionship services are non-medical care, supervision and socialization, provided to an individual who lives alone or with an individual who is not capable or obligated to provide the service.

## EMERGENCY RESPONSE SYSTEM (LIFELINE)

Allows individuals to access emergency call systems during the absence of human assistance.

## ENVIRONMENTAL MODIFICATION

Physical adaptations to the home required by the individual's plan of care to ensure their health and safety or enable greater independence in the home. Such adaptations may include the installation of ramps and grab bars, widening of doorways, modification of bathroom facilities, or installation of specialized electronic and plumbing systems to accommodate the medical equipment and supplies of the recipient.



## **EXTENDED PERSONAL CARE**

Hands-on medical care specific to the needs of an eligible individual, enabling an individual to live at home. This service may include skilled or nursing care to the extent permitted by State law. A licensed nurse provides training to an individual approved by the N.D. Department of Human Services to provide the required care and reviews the client's needs every six months to determine if additional training is required. Activities of daily living (ADLs) and instrumental activities of daily living (IADLs) are not a part of this service.

## **FAMILY HOME CARE**

Assists individuals to remain with family members and in their own communities. It provides an option for an individual who is experiencing functional impairments which contribute to his or her inability to accomplish activities of daily living.

## **FAMILY PERSONAL CARE**

Assists individuals to remain with family members and in their own communities. It provides for the provision of extraordinary care payments to the legal spouse of a recipient for the provision of personal care or similar services.

## **HOME-DELIVERED MEALS**

Nutritious and well-balanced meals delivered to individuals who live alone and are unable to prepare an adequate meal for themselves, or who live with an individual who is unable or not available to prepare an adequate meal.

## **HOMEMAKER SERVICES**

Assistance with environmental tasks that an individual is not able to complete in order to maintain that individual's home such as housework, meal preparation, laundry, shopping, communication and managing money.

## **NON-MEDICAL TRANSPORTATION**

Enables individuals to access essential community resources or services in order to maintain themselves in their home and community.

## **PERSONAL CARE SERVICES**

Assist an individual with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) so that the individual is able to live at home. Services assist the eligible individual with as many ADLs and IADLs as needed and as permitted in order to maintain independence and self-reliance to the greatest degree possible.



## RESIDENTIAL HABILITATION

Formalized training and supports provided to eligible individuals who require some level of ongoing daily support. This service is designed to assist with and develop self-help, socialization, and adaptive skills that improve the participant's ability to independently reside and participate in an integrated community. Services can be provided in the individual's home or in an Agency Foster Home for Adults.

## RESPIRE CARE

Provides temporary relief to the individual's primary care provider from the stresses and demands associated with constant care or in emergencies.

## SPECIALIZED EQUIPMENT AND SUPPLIES

Goods that enable individuals to increase their abilities to perform ADLs or to perceive, control or communicate with the environment in which they live. These goods must not be attainable through other informal or formal resources.

## SUPERVISION

Up to 24 hours of supervision may be provided to individuals who because of their impairments need monitoring to assure their continued health and safety.

## SUPPORTED EMPLOYMENT

Activities needed to sustain paid work for persons for whom competitive employment at or above the minimum wage is unlikely and intensive. This includes ongoing support to perform in a work setting with necessary adaptations, supervision and training appropriate to the person's disability.

## TRANSITIONAL LIVING SERVICES

Supervision, training or assistance with self-care, communication skills, socialization, sensory/motor development, reduction/elimination of maladaptive behavior, community living and mobility. Staff support including escort services and independent living skills training is provided until the interdisciplinary team determines this is no longer appropriate.



# Medicaid State Plan - Personal Care Services (MSP-PC)

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**Medicaid State Plan** - Personal Care Services (MSP-PC) helps people with daily living activities such as bathing, dressing, transferring, toileting, preparing meals, housework and laundry so they can continue to live in their homes and communities.

## FREQUENTLY ASKED QUESTIONS

➤ *Who qualifies for Medicaid State Plan - Personal Care Services?*

### Level A Personal Care Service Criteria

Individuals may be eligible for Level A Personal Care and receive up to 120 hours of help per month if they meet these guidelines.

- Must be on Medicaid.
- Needs are expected to last 30 days or more.
- A case manager will assess how much help is needed with activities such as bathing, transferring, toileting, dressing, laundry and housework. The amount of help needed will determine if an individual qualifies for services.

### Level B Personal Care Service Criteria

- Individuals may be eligible for Level B Personal Care and receive up to 240 hours of help per month if they meet these guidelines.
- Must be on Medicaid.
- Needs are expected to last 30 days or more.
- A case manager will assess how much help an individual needs with activities such as bathing, transferring, toileting, dressing, laundry and housework. The amount of help needed will decide if an individual qualifies for services.
- An individual must meet nursing facility or intermediate care facility-intellectually disabled level of care.

### Level C Personal Care Service Criteria

Individuals may be eligible for Level C Personal Care and receive up to 300 hours of help per month if they meet these guidelines.

- Must be on Medicaid.
- Needs are expected to last 30 days or more.
- A case manager will assess how much help an individual needs with activities such as bathing, transferring, toileting, and dressing. The amount of help needed, will decide if an individual qualifies for services. Help with laundry, shopping and housework is not available under Level C.

- A case manager will also determine if an individual meets nursing facility or intermediate care facility-intellectually disabled level of care.

## Personal Care in Basic Care

Individuals may be eligible for personal care services in a basic care facility if they meet these guidelines:

- Must be on Medicaid.
- Needs are expected to last 30 days or more.
- Requires daily service.
- A case manager will assess how much help an individual needs with activities such as bathing, transferring, toileting, dressing, laundry and housework. The amount of help needed will decide if an individual qualifies for services.

### ➤ *What if I do not qualify for the Medicaid State Plan - Personal Care Services or what if the help I need is not available under this service? Are there other options to receive services?*

Possibly. North Dakota offers Home and Community-Based Services through several programs. Each program has rules that decide if an individual qualifies based on the level of need. Some programs do not require individuals to be on Medicaid. These other programs include:

- Service Payments for the Elderly and Disabled (SPED)
- Expanded Service Payments for the Elderly and Disabled (Expanded-SPED)
- Medicaid Waiver

### ➤ *Who pays for the services?*

An individual may qualify for services to be paid in full by Medicaid or may have to pay part of the cost. This is called Client Share (Recipient Liability), which is the monthly amount an individual must pay before the Medicaid program will pay for the care they received. It works like a monthly deductible.

### ➤ *Who provides the services?*

Services are provided by a Qualified Service Provider (QSP) who is an agency or an individual such as a family member, neighbor or friend that has met the standards set by the N.D. Department of Human Services (DHS).

### ➤ *Who will pay the QSP?*

The QSP will send a bill for the services they provided for you to DHS and they will receive payment from DHS. If an individual has a Client Share, the QSP will send the individual a bill for their portion of the cost.

### ➤ *Can I choose my QSP?*

Yes. An individual has the right to choose a QSP that meets their needs.

## Medicaid Waivers for Home and Community-Based Services

Medicaid Waivers for Home and Community-Based Services (HCBS) were created to offer a variety of services and support that allow people to stay in their homes instead of getting care in a nursing home.

### SERVICES PROVIDED:

- Adult Day Care**
- Adult Foster Care**
- Adult Residential Services**
- Chore Service**
- Community Support Services**
- Community Transition Services**
- Companionship Services**
- Emergency Response**
- Environmental Modification**
- Extended Personal Care/Nurse Education**
- Family Personal Care**
- HCBS Case Management**
- Home Delivered Meals**
- Homemaker Services**
- Non-Medical Transportation**
- Residential Habilitation**
- Respite Care**
- Specialized Equipment/Supplies**
- Supervision**
- Supported Employment**
- Transitional Living**





## FREQUENTLY ASKED QUESTIONS

### ➤ *Who qualifies for services under the Medicaid waiver?*

An individual must be on Medicaid. Eligibility for Medicaid is decided by an eligibility worker. Also, a case manager will assess how much help is needed with activities such as bathing, transferring, toileting, dressing, laundry and housework. The amount of help needed will determine if an individual qualifies for services. The HCBS case manager will assist in the determination of meeting nursing facility level of care.

### ➤ *What if I do not qualify for Medicaid waiver programs or what if the help I need is not available under this program? Are there other options to receive services?*

Possibly. North Dakota offers Home and Community-Based Services through several programs. Each program has rules that decide if an individual qualifies based on the level of need. Some programs do not require individuals to be on Medicaid. These other programs include:

- Service Payments for the Elderly and Disabled (SPED)
- Expanded Service Payments for the Elderly and Disabled (Expanded-SPED)
- Medicaid State Plan Personal - Care Services (MSP-PC)

### ➤ *Who pays for the services?*

An individual may qualify for services to be paid in full by Medicaid or may have to pay part of the cost. This is called Client Share (Recipient Liability), which is the monthly amount an individual must pay before the Medicaid program will pay for the care they received. It works like a monthly deductible.

### ➤ *Who provides the services?*

Services are provided by a Qualified Service Provider (QSP) who is an agency or an individual such as a family member, neighbor or friend that has met the standards set by the N.D. Department of Human Services (DHS).

### ➤ *Who will pay the QSP?*

The QSP will send a bill for the services they provided for you to DHS and they will receive payment from DHS. If an individual has a Client Share, the QSP will send the individual a bill for their portion of the cost.

### ➤ *Can I choose my QSP?*

Yes. An individual has the right to choose a QSP that meets individual needs.

# Service Payments for the Elderly and Disabled (SPED) and Expanded SPED (Ex-SPED) Programs

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The Service Payments for the Elderly and Disabled Program (SPED) and Expanded Service Payments for the Elderly and Disabled Program (Ex-SPED) were created to offer a variety of services and support that allow people to stay in their homes instead of getting care in a nursing home.

## SERVICES OFFERED THROUGH SPED AND EX-SPED:

**Adult Day Care**

**Adult Foster Care**

**Chore**

**Emergency Response**

**Environmental Modification**

**Extended Personal Care Services/Nurse Education (SPED only)**

**Family Home Care**

**HCBS Case Management**

**Home Delivered Meals**

**Homemaker**

**Non-Medical Transportation**

**Personal Care Services (SPED only)**

**Respite**

## FREQUENTLY ASKED QUESTIONS

### ➤ *Who qualifies for services under the SPED program?*

This program is for older adults and people with physical disabilities who have trouble performing daily living activities. An individual may qualify if they meet these guidelines.

- Liquid assets of less than \$50,000 (such as cash, stocks, bonds or certificates of deposit).
- Income is taken into consideration; there may be a cost share (service fee).
- A case manager will assess how much help is needed with activities such as bathing, transferring, toileting, dressing, laundry and housework. The amount of help needed will decide if an individual qualifies for services.
- Need for help is expected to last three months or more.

➤ *Who qualifies for services under the Ex-SPED program?*

This program is for older adults, people with physical disabilities and people with mental health conditions who have trouble performing daily living activities. An individual may qualify if the individual meets these guidelines.

- Must be on Medicaid, which is decided by an eligibility worker
- Receive Social Security Income (SSI) or income is at or below the SSI level.
- A case manager will assess how much help an individual needs with activities such as bathing, transferring, toileting, dressing, laundry and housework. The amount of help needed will determine if an individual qualifies for services.

➤ *What if I do not qualify for SPED or Ex-SPED, or if the help I need is not available under these programs? Are there other options to receive services?*

Possibly. North Dakota offers Home and Community-Based Services through several programs. Each program has rules that decide if an individual qualifies based on the level of need. The following programs require individuals to be on Medicaid:

- Medicaid Waivers for Home and Community-Based Services
- Medicaid State Plan - Personal Care Services (MSP-PC)

➤ *Who pays for the services?*

An individual may qualify for services to be paid in full by the SPED program or may have to pay part of the cost. This is called a service fee which is the amount the client must pay before the SPED program will pay for the care the client received. It works like a monthly deductible.

If you qualify for services under the Ex-SPED program, there is no service fee.

➤ *Who provides the services?*

Services are provided by a Qualified Service Provider (QSP) who is an agency or an individual such as a family member, neighbor or friend that has met the standards set by the N.D. Department of Human Services (DHS).

➤ *Who will pay the QSP?*

The QSP will send a bill for the services they provided for you to DHS and they will receive payment from DHS. If an individual has a service fee, the QSP will send a bill for their portion of the cost.

➤ *Can I choose my QSP?*

Yes. An individual has the right to choose a QSP that meets individual needs.

# Qualified Service Providers (QSPs)

Qualified Service Providers (QSPs) are friends, neighbors and family members who are committed to providing care for individuals who want to continue to live in their own homes and communities. QSPs do not need to have a special certificate or license, but they do need to prove they have the skills to provide care.

The N.D. Department of Human Services (DHS) has created a video highlighting the experiences of real people providing services for clients as a QSP. This video can help you decide if being a QSP is right for you. Find it online at <https://www.nd.gov/dhs/services/adultsaging/providers.html>.



DHS enrolls two types of QSPs; an individual or an agency.

- **Individual QSPs** need to prove they have competency in all the standards to provide a specific service. They are self-employed contractors and responsible to withhold or pay any social security, federal or state income tax, unemployment insurance, or workers' compensation insurance premiums from the payments received as a QSP.
- **Agency QSPs** need to ensure their staff has the necessary skills to provide a specific service.

## DEFINITIONS TO KNOW

- **Authorization to Provide Service Form** is sent to the QSP by the HCBS case manager, authorizing a specific service, time frame during which the service can be provided, and tasks the QSP is allowed to provide. The QSP cannot provide or bill DHS for services until they receive this form.
- **Standard:** A level of quality or excellence that is accepted as the norm for a specific task.
- **Competency Level:** The skills and abilities required to complete a task well or to a required standard. Some services require the competency level to be verified by a health care provider. The potential QSP is responsible to obtain verification from a health care provider of their choice.
  - o Train ND has nurses available to help train and verify that a potential QSP has the skills to provide a service at no cost to the provider. Contact DHS for more information.



## **QSPs CAN PROVIDE THE FOLLOWING SERVICES:**

**Adult Day Care**  
**Adult Foster Care**  
**Adult Residential Services**  
**Chore**  
**Community Support Services**  
**Community Transition Services**  
**Companionship Services**  
**Emergency Response**  
**Environmental Modification**  
**Extended Personal Care/Nurse Education**  
**Family Personal Care**  
**HCBS Case Management**  
**Home Delivered Meals**  
**Homemaker**  
**Non-Medical Transportation**  
**Personal Care**  
**Residential Habilitation**  
**Respite Care**  
**Specialized Equipment/Supplies**  
**Supervision**  
**Supported Employment**  
**Transitional Living**

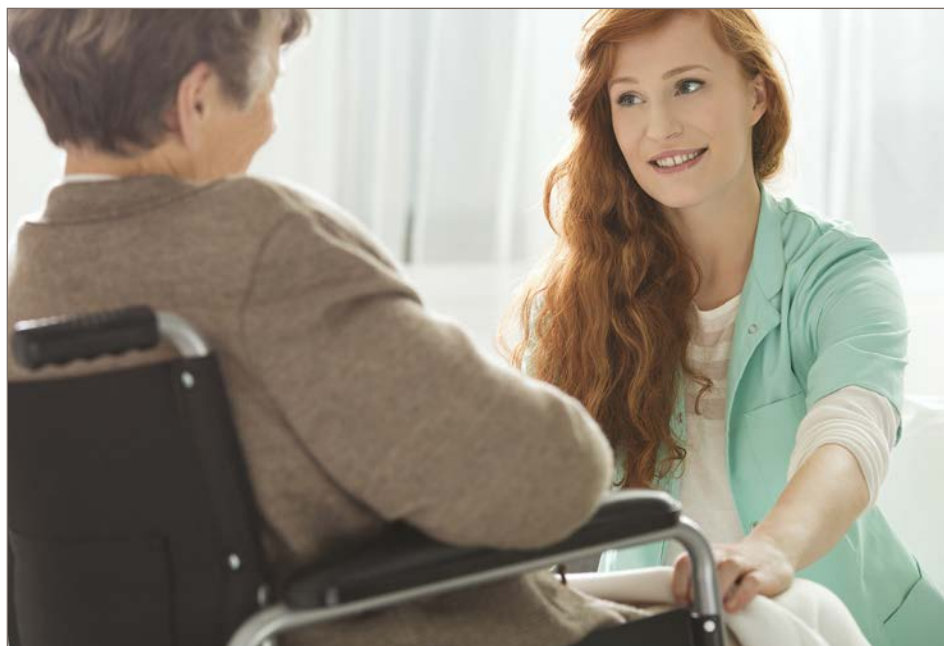


## HOW DOES IT WORK?

- To apply to be a Qualified Service Provider (QSP), start by getting a copy of the QSP Agency or Individual Handbook, review it, and follow the instructions to complete the needed forms. Most of the forms are in the handbook, but for some services, more forms are needed. The handbook will tell you how to get those forms and where to send your completed forms.
  - To get a copy of a QSP handbook:
    - Contact your local Human Service Zone office (formerly county social service office)
    - Go online to [www.nd.gov/dhs/services/adultsaging/providers.html](http://www.nd.gov/dhs/services/adultsaging/providers.html)
    - Contact the N.D. Department of Human Services at 1-855-462-5465
- After DHS enrolls a person as a QSP, a packet of information will be sent to them. The packet will include the provider's number, instructions on how to bill for the services provided, rules about record keeping, and other rules about providing services as a QSP.
- A QSP can have their name added to a public list of QSPs which is given to clients by a case manager. They can also choose not to have their name added to this list.
- After a client has selected their QSP, a case manager will give an Authorization to Provide Service Form to the individual's chosen QSP.
- The QSP will receive and review the Authorization to Provide Service form. The tasks the QSP are authorized to provide are checked on this form. The tasks are described on the back of these forms and the tasks provided by QSP must fall within the descriptions.



- A QSP must have an up-to-date copy of the Authorization to Provide Service form in their possession before providing services for an individual and to be able to bill for services provided.
- The service must be provided by the QSP listed on the Authorization to Provide Service form.
- The QSP must keep records of the services they provide to individual. DHS may request the records for review and audit.
- QSPs are not employees of DHS. They are self-employed, independent contractors who provide services and are paid for the authorized services they provided for individual. DHS does not withhold or pay any social security, federal or state income tax, unemployment insurance, or workers' compensation insurance premiums from the payments received as a QSP. Withholding and paying taxes on QSP payments is the responsibility of the self-employed individual. Information on the tax responsibilities can be found at [www.IRS.gov](http://www.IRS.gov).
- The QSP will bill DHS directly for services provided.
- Payment from DHS will not include any client liability or service fee. Some individuals are responsible for a portion of the cost of their care (recipient liability/service fee). It is the QSP's responsibility to bill the individual directly for any recipient liability/service fee.



# HCBS FUNCTIONAL & FINANCIAL ELIGIBILITY REQUIREMENTS

	EXSPED (Expanded Service Payments for the Elderly & Disabled)	SPED (Service Payments for the Elderly & Disabled)	MSP - Personal Care (Level A)
Services	<ul style="list-style-type: none"> <li>• Adult Day Care</li> <li>• Adult Foster Care</li> <li>• Chore &amp; ERS</li> <li>• Emergency Response</li> <li>• Environmental Modification</li> <li>• Family Home Care</li> <li>• HCBS Case Management (billed under Targeted Case Management)</li> <li>• Home Delivered Meals</li> <li>• Homemaker</li> <li>• Non-Medical Transportation</li> <li>• Respite</li> </ul>	<ul style="list-style-type: none"> <li>• Adult Day Care</li> <li>• Adult Foster Care</li> <li>• Chore &amp; ERS</li> <li>• Emergency Response</li> <li>• Environmental Modification</li> <li>• Ext. Personal Care</li> <li>• Family Home Care</li> <li>• HCBS Case Management</li> <li>• Home Delivered Meals</li> <li>• Homemaker</li> <li>• Non-Medical Transportation</li> <li>• Personal Care Services</li> <li>• Respite</li> </ul>	<ul style="list-style-type: none"> <li>• Personal Care Services (includes Daily/Rate &amp; PC-Basic Care)</li> </ul>
	<p><b>Personal Care Service:</b> Assistance with activities of daily living (ADLs) such as bathing, dressing, toileting, transferring, eating, mobility and incontinence care and with instrumental activities of daily living (IADLs) may be provided in conjunction with the tasks for ADLs</p>		
Functional Eligibility	<p>Not severely impaired in ADLs: Toileting, Transferring, Eating</p> <p><b>And</b></p> <p>Impaired in 3 of the 4 following IADLs:</p> <ul style="list-style-type: none"> <li>• Meal Preparation</li> <li>• Housework</li> <li>• Laundry</li> <li>• Medication Assistance</li> </ul> <p><b>Or</b></p> <p>Have health, welfare or safety needs, requiring supervision or structured environment</p>	<p>Impaired in two ADLs, OR in at least four IADLs, totaling eight (8) or more points or if living alone totaling at least six (6) points</p> <p><b>Or</b></p> <p>If under age 18, meet <b>LOC</b> screening criteria</p> <p><b>And</b></p> <p>Impairments must have lasted or are expected to last three months or more</p>	<p>Impaired in one ADL</p> <p><b>Or</b></p> <p>Impaired in three of the following four IADLs:</p> <ul style="list-style-type: none"> <li>• Meal Preparation</li> <li>• Housework</li> <li>• Laundry</li> <li>• Medication Assistance</li> </ul>
Financial Eligibility	Medicaid Eligible	Income and Asset Based Sliding Fee Scale Resources \$50,000 or less	Medicaid Eligible
Program Cap	\$3537.00 per month	\$3537.00 per month	Level A - 480 units per month (a unit is 15 minutes)

**Individual QSP Rate** \$5.19 per/unit, **HMK** \$4.67 per/unit – **Agency QSP Rate** \$7.13 per/unit, **HMK** \$6.42 per/unit



# COMPARISON (01/2020)

MSP - Personal Care (Level B)	MSP - Personal Care (Level C)	Medicaid Waiver for HCBS (Elderly & Disabled)	Technology Dependent Medicaid Waiver
<ul style="list-style-type: none"> <li>Personal Care Services</li> </ul>	<ul style="list-style-type: none"> <li>Personal Care Services</li> </ul>	<ul style="list-style-type: none"> <li>Adult Day Care</li> <li>Adult Foster Care</li> <li>Adult Residential</li> <li>Chore &amp; ERS Systems</li> <li>Community Support</li> <li>Community Transition</li> <li>Companionship</li> <li>Environmental Modification</li> <li>Extended Personal Care</li> <li>Family Personal Care</li> <li>HCBS Case Management</li> <li>Home Delivered Meals</li> <li>Homemaker</li> <li>Non-Medical Transportation</li> <li>Residential Habilitation</li> <li>Respite</li> <li>Sp. Equipment Supplies</li> <li>Supervision</li> <li>Supported Employment</li> <li>Transitional Living</li> </ul>	<ul style="list-style-type: none"> <li>Attendant Care Service</li> <li>HCBS Case Management</li> <li>Non-Medical Transportation</li> <li>Specialized Equipment and Supplies</li> </ul>
<p>Impaired in one ADL <b>Or</b> Impaired in three of the following four IADLs:</p> <ul style="list-style-type: none"> <li>Meal Prep</li> <li>Housework</li> <li>Laundry</li> <li>Medication Assistance</li> </ul> <p><b>And</b> Meet <b>LOC</b> criteria</p>	<p>Impaired in five ADLs <b>And</b> Meet <b>LOC</b> criteria <b>And</b> No units allocated to the tasks of laundry, shopping and housekeeping <b>And</b> Prior approval from the Department</p>	<ul style="list-style-type: none"> <li>Meet <b>LOC</b> criteria</li> <li>Age 18 or older</li> <li>Choose waiver services</li> <li>Receive service on a monthly basis</li> <li>Participate in planning</li> <li>Functional impairment cannot be the result of a mental illness or mental retardation</li> <li>If under 65 the disability must meet Social Security criteria or determined to be physically disabled by the state review team</li> </ul>	<ul style="list-style-type: none"> <li>Meet <b>LOC</b> criteria</li> <li>Vent Dependent at least 20 hours per day</li> <li>Medically stable</li> <li>Has an informal caregiver system for contingency planning</li> <li>Is competent to participate in planning</li> <li>If under 65 the disability must meet Social Security criteria or determined to be physically disabled by the state review team</li> </ul>
<p>Nursing Facility Level of Care Screening - (<b>LOC</b>) Criteria for <b>LOC</b> Screening - NDAC 75-02-02-09</p>			
<p>Medicaid Eligible</p>	<p>Medicaid Eligible</p>	<p>Medicaid Eligible</p>	
<p>Level B - 960 units per month</p>	<p>Level C - 1200 units per month</p>	<p>Total cost of all waiver services is limited to the highest monthly rate allowed to a nursing facility within the rate settings structure of the Department. Individual service caps may also apply</p>	

(Some rates are also daily, one time, half day or specific to the service)







600 EAST BOULEVARD AVENUE | BISMARCK ND 58505-0250 | [www.nd.gov/dhs](http://www.nd.gov/dhs)