

## Adult Foster Home Provider Alert

Policy updates, rule clarifications and announcements

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**Date:** June 1, 2020

**Topic:** **HCBS Individually Based Limitations (IBLs)**

**To:** APD Adult Foster Home Providers

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Beginning **June 30<sup>th</sup>, 2020**, the requirement for formally documenting any limitations needed for health and safety that are related to rights and freedoms will be in effect. If you have questions about the process, it is imperative that you speak to your licensor or an AFH policy analyst for clarification. There are different processes for Medicaid and private-pay consumers. Please see more details below.

**As a reminder, the following rights may have an individually based limitation if needed by the consumer to ensure their health and safety:**

- Access to food at any time
- Choice of roommate in shared units
- Control own schedule and activities
- Freedom from restraint
- Furnish and decorate bedroom or living unit
- Privacy - Lockable doors
- Visitors at any time

### **Private Pay Process**

At each resident review conducted by the provider, the provider will now formally document any limitations proposed for the health and safety of residents.

Please complete the attached document when limitations are proposed and obtain the consent of the individual or their representative along with a witness signature. The witness may not be a staff person of the provider.

Should an individual not have capacity to consent, based on a physician's written statement, efforts should be made to find a representative. If no representative can be found the provider may continue limits to protect the health and safety of the individual. The inability to consent, the attempt to find a

representative, and the necessary documentation supporting the limitation should be noted in the consumer record.

### **Medicaid**

For existing Medicaid consumers, case managers will discuss the need for any limitations at the annual reassessment. Providers do not need to contact the case manager prior to that reassessment for a limitation. If appropriate, any limitations consented to will be documented on the Medicaid Service Plan by the case manager and documented in the provider's service plan. Following the first review, when a new need for a limitation is identified, contact the Medicaid case manager. When a Medicaid individual cannot consent and there is no representative, one may be appointed.

For new Medicaid consumers, a provider may implement a limitation as described for private pay individuals. The Case Manager will review any limitations that the provider has implemented at the reassessment.

### **APD 0556 Form**

The [APD 0556 form](#) can be found by visiting the form website. A copy of this form is also included with this provider alert. This form must be completed for any resident that needs an IBL and must be kept as part of the resident's record. Typically, a case manager would complete the form for Medicaid individuals and the provider would complete the form for private-pay individuals. If a Medicaid individual needs an IBL prior to the case manager's re-assessment, the provider must complete the form and return to the case manager.

### **Reminder**

All limitations should be formally documented by **June 30, 2020**. By following a schedule of documenting private-pay individuals at facility care plan review or during the annual reassessment for Medicaid, all limitations should be documented during this period. If providers have not documented this information through the formal process by June 30, 2020 the provider will receive a licensing violation and/or another form of corrective action.

To contact the Adult Foster Home Unit directly, please email us at:

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