

**DEPARTMENT OF HUMAN SERVICES  
AGING AND PEOPLE WITH DISABILITIES  
OREGON ADMINISTRATIVE RULES**

**CHAPTER 411  
DIVISION 37**

**COMMUNITY-BASED CARE TRANSITION SERVICES**

**411-037-0010 Purpose and Scope**

*(Adopted 3/29/2018)*

Community Transition Services are non-recurring set-up expenses for individuals who are transitioning from licensed community based care settings or acute care hospitals to an in-home service setting defined in OAR 411-030-0033 where the person would be directly responsible for his or her own living expenses.

Stat. Auth.: ORS 409.050, 410.070

Stats. Implemented: ORS 409.050, 410.070

**411-037-0020 Definitions**

*(Adopted 3/29/2018)*

- (1) "Central Office" means the Program office of the Department.
- (2) "Consumer" means the person applying for or eligible for Medicaid home or community-based services.
- (3) "Department" means the Department of Human Services (DHS).
- (4) "Transition Services and Supports" means services that are non-recurring set-up expenses for individuals who are transitioning from a licensed community based care setting or an acute care hospital to a living arrangement in a private residence where the person is directly responsible for his or her own living expenses.

Stat. Auth.: ORS 409.050, 410.070

Stats. Implemented: ORS 409.050, 410.070

### **411-037-0030 Eligibility for Community Transition Services**

*(Adopted 3/29/2018)*

(1) Eligibility for community transition services are restricted to consumers transitioning from a community-based care facility or an acute care hospital to an in-home setting, described in 411-030-0033.

(2) Consumers transitioning between community-based care facilities or from other institutions are not eligible for Community Transition Services defined in this rule. Consumers not eligible under these rules may be eligible for transition services defined in OAR chapter 411, division 035.

Stat. Auth.: ORS 409.050, 410.070

Stats. Implemented: ORS 409.050, 410.070

### **411-037-0040 Community Transition Services**

*(Adopted 3/29/2018)*

(1) Approval for services and supports must:

(a) Be based on an assessed need determined during the person-centered service planning process.

(b) Support the desires and goals of the consumer receiving services and supports.

(2) Total expenses for transition services and supports covered under this rule may be approved from the date of authorization up to 30 days after a consumer discharges from their current community-based care facility or acute care hospital on a permanent basis and may include more than one item.

(3) Allowable expenses are those necessary to enable a person to establish a basic household and to meet their assessed needs.

(4) Total purchases for basic household goods and furnishings are limited to one time per year and must occur within the first 30 days a consumer discharges from their current community-based care facility or an acute care hospital to a permanent in-home setting.

(5) Total purchases for transition services and supports, other than basic household goods and furnishings, are limited to no more than twice annually. To access transition services and supports more often, Central Office may approve exceptions to this rule.

(6) Funds must not be used to retroactively reimburse a consumer, natural supports, or community-based care providers for transition service expenses.

(7) Unless indicated in this rule, allowable transition services are limited and include:

(a) Housing application fees.

(b) Payment for background and credit checks related to housing.

(c) Cleaning deposits.

(d) Security deposits.

(e) Initial deposits for heating, lighting, and phone service.

(f) Payment of previous utility bills that prevent a consumer from receiving utility services.

(g) Purchase of Basic Household Goods:

(A) Household Goods may include, but are not limited to:

(i) Cookware.

(ii) Tableware.

(iii) Garbage cans.

(iv) Trash bags.

(v) Toilet paper.

(vi) Bedding.

(vii) Linens.

(viii) Basic cleaning supplies.

(B) The purchase of basic household goods is not intended to replace useable items already available to the consumer.

(C) Purchases of household goods are limited to:

(i) The amount necessary to adequately meet the needs of the consumer, but may not exceed \$500.

(ii) The Department may approve additional household goods if the consumer's functional needs assessment indicates the need for additional household goods beyond the standard limit.

(h) Purchase of Basic household furnishings.

(A) Basic household furnishings may including, but are not limited to:

(i) Beds.

(ii) Mattresses.

(iii) Dressers.

(iv) Couches.

(v) Tables.

(vi) Chairs required in an in-home service setting.

(B) The purchase of basic household furnishing is not intended to replace useable items already available to the consumer.

(C) Purchases are limited to:

(i) The amount necessary to adequately meet the needs of the consumer and may not exceed \$1,000.

(ii) The Department may approve additional household furnishings if the consumer's functional needs assessment indicates the need for additional household furnishings beyond the standard limit.

(i) Movers and moving expenses may be authorized if required to transition a consumer from a community-based care or acute care hospital to an in-home setting. Local offices may approve moving costs up to \$1,000 per move. Any expenditures above that amount may be approved by the Central Office.

(j) Extra locks, for security purposes, or duplicate keys needed to assist the consumer in their in-home service setting.

(k) Community Long Term Care Nursing services where a contract RN delegates or teaches the consumer, caregivers, or natural supports to:

(A) Provide personal care assistance to the individual;

(B) Provide ongoing medical treatment; or

(C) Administer medication.

(8) The following services and expenses must be pre-authorized by the Department's Central Office:

- (a) Purchases that exceed the monetary limits described in this rule.
- (b) Approval for expenses that occur greater than 30 days after the transition period.
- (c) Items required to establish a home not identified in this rule.
- (d) Other necessities not identified in this rule that are required for a consumer to transition from a community-based care facility setting.

Stat. Auth.: ORS 409.050, 410.070

Stats. Implemented: ORS 409.050, 410.070

#### **411-037-0050 Limitations**

*(Adopted 3/29/2018)*

Community Transition Services:

(1) Are furnished only to the extent that they are reasonable and necessary as determined through the service plan development process, clearly identified in the service plan and the person is unable to meet such expense or when the services cannot be obtained from other sources.

(2) Do not include any of the following:

- (a) Monthly rental or mortgage expense.
- (b) Food.
- (c) Regular utility charges.
- (d) Household appliances or items that are intended for purely diversional or recreational purposes.

(3) May not overlap, supplant, or duplicate other services provided through the Medicaid State Plan, Medicaid State Plan Options, or other approved Medicaid waiver authorities.

Stat. Auth.: ORS 409.050, 410.070

Stats. Implemented: ORS 409.050, 410.070