

Home and Community-Based Care Newsletter (2025-01)
June 2025

## **Home and Community-Based Care Updates**

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# **IDOH Staffing Updates**

- Lisa McColly retired as of April 1, 2025
  - Please join us in welcoming Amy Robinson to fill this position
  - Please continue to use <a href="https://hcbc@health.IN.gov">hcbc@health.IN.gov</a> for all inquiries and submissions
    - IDOH requests patience with processing as we transition these responsibilities
- Join us in welcoming Tangela Walker in the Personal Services Agency (PSA) department
  - Please continue to use <u>PSA@health.IN.gov</u> for all inquiries and submissions

# **Local Agency Staffing**

## **Requirements and Reminders**

- For all new applications and new employees, criminal background checks must be completed by Indiana State Police (ISP)
  - o The ISP contracts with <u>IDEMIA</u> and <u>IDENTOGO</u> to identify a location
  - You may also use <u>Safe Hiring Solutions</u>.
- ISP issued the following on May 8, 2025
  - The Indiana State Police has made the following changes for home health care agencies and personal service agencies instructions on being added to the inkless site for fingerprinting/background services
    - If you are a new home health care or personal services agency and do not have your agency's license, please email <a href="mailto:applicantprocessing@isp.in.gov">applicantprocessing@isp.in.gov</a>. Please fill out the attached form and return it to ISP to get your new agency added. Once ISP receives the form back, ISP will get your agency added and send you the information. After you receive the information, you may have your prints taken. To obtain a your results please send the request to <a href="mailto:applicantprocessing@isp.in.gov">applicantprocessing@isp.in.gov</a> along with a picture of your id with current address and the TCR and TCN numbers (on receipt or you may contact the agency and for these numbers). Once ISP receives this, ISP will email your results
    - Once you receive your home health care/personal services agency license, you will need to email a copy of the license to applicantprocessing@isp.in.gov. This must be done within 90 days, or your agency will be removed from the inkless registration site. It will be the agency's responsibility to send ISP the license for they will not remind or notify the agency of the removal. If you do not have a license within 90 days, contact ISP for further directions
    - If you are an existing agency please email a copy of the license to the Indiana State Police, at applicantprocessing@isp.in.gov and ISP will send you a form to fill out and return to get your agency added

- FBI Identity Summary History does <u>not</u> include state and local offenses <u>unless</u> it is at the Federal level and reported by the local and state agencies
  - Home Health and PSA providers who are obtaining their own FBI Identity
     Summary History for their employees through the FBI website will have to
     re-run their criminal history checks
  - This must be completed by July 1, 2025.
  - IDOH will accept only ISP/IDENTOGO/IDEMIA or Safe Hiring Solutions criminal history checks

#### **State Licensure Reminders**

## **Application Review**

- The timeline for application reviews for PSA and HHA/hospice may take from 30-60 days
  - It is recommended that applicants do not follow-up on the status of their application until after this timeframe has elapsed
  - You CANNOT admit patients until you receive your provisional license.
     Just because the check is cashed/cleared by IDOH does not mean that you are automatically approved to start admitting

#### **Renewal Notices**

- IDOH will no longer be sending providers a notice at 60 or 90 days for license renewal for PSA, home health, and hospice. You are expected to know when your renewal is due and may access the renewal online. If you mail your renewal application and payment, please remember that all documents/checks must be sent to the cashier's office first, then it will be forwarded to the Division of Home and Community-Based Care once the check clears
  - You can also renew your license online by <u>clicking here</u>
    - Please submit proof of payment (receipt) with the renewal application to IDOH at <a href="https://documents.ncg/hcBC@health.IN.gov">HCBC@health.IN.gov</a>
    - IDOH recommends that renewals are submitted 30-60 days in advance of expiration to prevent lapses in licensure

## **HHA Applications (Online)**

#### Section II.B.

 Name of the owning company, not the same of the person who owns the company. This should match the Secretary of State document. (The Secretary of State should be reflective and dated with your home health agency, not your PSA)

#### Section II.E.

 Do not check this off if you have a PSA agency. This should only be checked if you are planning to provide these services under your home health license

#### Section IV.A.

o If there is more than one owner, please include the percentage of interest each owner has

#### Section V.A.

o Includes the name of your governing body members and their positions

#### Section V.B.

If you have had a denial in the past, this should be answered as "yes" and you will need to provide an explanation. If you rescinded your application, check "no"

#### • Section VI.A. + B.

Should only include information if you are using a management company.
 Otherwise, leave it blank

#### **Notice of Readiness (NOR)**

- IDOH must know within 30 days of your expiration that you are ready for your survey
- If IDOH does not hear from you, your initial licensure application is denied and you must re-apply
- IDOH must be allocated time to plan schedules, conduct surveys with home visits, write the report, allow time to submit a plan of correction(s), conduct a re-visit (if applicable), or time to find placement of patients if licensure is denied

Additional requests for documents on new applications will be expected within 30 days. You will receive one (1) reminder and be expected to respond within 14 days. If we do not hear from you, your application will be closed, and you will have to re-apply.

If you own a PSA and want to open an HHA (or vice versa), please do not give both entities the same name. Please distinguish between the two providers in the type of service you are providing (e.g., ABC123 Personal Home Care and ABC123 Home

Healthcare Agency). This will help—not only the clients/patients to know which type of services they are receiving—but it will also help our department as well as our complaint department to know where to put a complaint, should one be received. If a client/patient cannot distinguish the two entities, a complaint will be placed in both entities and will be consecutively investigated by our surveyors. This could cause you to be cited for not properly educating your patient/client on the two entities. Remember that homecare references non-medical/personal service agencies and home health references medical/home health agencies.

If you are adding PSA services under your HHA license, you must submit a letter on agency letterhead, signed by the administrator, of your plan to add the services. You must include the facility ID and effective date in your letter along with PSA policies, service plan form, compliant form, and the statement of client rights. For initial HHA licensure surveys, you need at least one client receiving PSA services, for PSA records will be included in all state licensure surveys. You must verify that you have PSA policies, service plan form, and statement of client rights for your PSA-only clients. Complaint logs must be specific as to whether the issue is under HHA or PSA services.

If you receive your provisional license, you are expected to respond to IDOH's inquiries about your status in 7-10 days. If IDOH does not hear from you, you may face application closure and must re-apply.

# **Trends in Survey Findings**

- Providers indicating compliance but inability to justify it Providers are indicating they are in compliance with Indiana Administrative Code (410 IAC 17), Indiana Code (IC 16-27 et all), and Conditions of Participation (CoPs Code of Federal Regulations for Home Health 42 CFR 484, Appendix B), but when asked what they are during survey, Administrator/Clinical Supervisor does not know and has never read it.
  - Please make sure you review IAC, IC, and CoPs as required
- 2. Wanting to share or borrow patients from another agency
  - Example: PSA using their clients as patients for the HHA initial license so that they can continue to bill and the patient is not pro-bono
    - This could be considered fraud. Do not borrow or share patients
- 3. Wanting to use pseudo-patients or family members who don't meet the criteria for home health services

## 4. Not having a physician-directed plan of care

- Providers must talk to a physician or a physician designee (it is your responsibility to know who you are talking to) for verbal orders and the verbal orders to be put into writing and sent for signature
  - If the physician or designee will not take calls and you have to fax, you cannot provide services until the orders/plan of care is returned and signed by the physician
- 5. Lack of dementia training
- 6. If conducting a federal survey, lack of emergency preparedness
- 7. Lacking infection control during home visits
- 8. Long-term diagnosis or medications being used as a skilled nursing education when there is no exacerbation or medication changes

## **Reminders for Home Health and Personal Services**

**Home Health vs. Personal Services for Your Patient?** 

- Per 405 IAC 5-16-3 "Prior Authorization for HHA Services," providers must determine:
  - Severity of illness and symptoms
  - Stability of the condition and symptoms
  - Change in medical condition that affects the type or units of service that can be authorized
  - Treatment plan, including identified goals
  - Intensity of care required to meet needs
  - Complexity of needs
  - Amount of time required to complete treatment task
  - Rehabilitation potential
  - Whether the services required in the current care plan are consistent with prior care plans
  - Need for instructing the member on self-care techniques in the home or need for instructing the caregiver on caring for the for the member in the home, or both
- Per 405 IAC 5-16-3.1 "Home Health agency services; limitations."
  - Sec. 3.1(a) In addition to the prior authorization requirements as outlined in section 3 of this rule, services provided by a registered nurse, licensed

practical nurse, home health aide, or renal dialysis aide employed by a home health agency must be as follows:

- Prescribed or ordered in writing by a physician
- Provided in accordance with a written plan of treatment developed by the attending physician
- Intermittent or part time, except for ventilator-dependent patients who have developed plan of home health care
- Health-related nursing care. Homemaker, chore services, and sitter/companion service are not covered, except as specified under applicable Medicaid waiver programs
- Medically necessary

#### Medicaid PA; Home Health Aide Services

- Eligibility: Individuals must meet medical criteria, typically requiring skilled nursing or home health aide services
- Considerations: May require a nurse oversight function, and it's important to determine if the client's health condition is medically complex or unstable. Totally dependent client, Advance Amyotrophic Lateral Sclerosis (ALS-Lou Gehrig's disease) client, trach client, or advance dementia
- Coverage: Can include activities like bathing, dressing, mobility, toileting, and other personal care needs

#### Attendant Care Services

- Basic Services: Assist getting in and out of bed; assistance with routine bodily functions (e.g., bathing and personal hygiene; dressing and grooming; feeding including preparation and clean-up).
  - Keyword: assistance
- Assists with household chores, transportation, errands, and companionship
- Activities not allowed: Services provided for a participant regarding specialized feeding, unless permitted under law and no duplication of Indiana Medicaid State Plan services

# • Services provided to a participant requiring the management of the following:

 Uncontrolled seizures, infusion therapy, venipuncture, injection, wound care for decubitus and incision, ostomy care, tube feedings, services provided as a substitute for care provided by a RN, LPN, MD or other health professional; setting up and administering medications; and assisting with catheter and ostomy care

- Services provided to household members other than to the participant
- IDOH HHA Surveyors are conducting in-person complaint investigations for Personal Service Agencies. You are expected to have someone in the office during the business operating hours that you provided on your application
  - Entities are not permitted to "reschedule" or "make appointments" for IDOH to come to your agency
- PSAs are to cooperate with home health agencies when it comes to coordination of care. It is not a breach of HIPAA or PHI. A patient cannot receive the same services from both companies at the same time.

## **Requirements for Reporting to IDOH**

## What should be reported?

- Any abuse, neglect, or misappropriation must be reported to the complaint department by phone, email, or online
  - The complaint website references LTC, but is the site for all provider types
- Any staff changes, hours/days of operation, phone/fax changes, relocations/address, county changes, changes in services, branch information, change of ownership, stock/transfer interest, acquisitions, and anything that changes the operations of any agency must be reported
  - o For PSA changes, use the PSA@health.IN.gov email address.
  - o For HHA/Hospice, please use HCBC@health.IN.gov.
- Failure to report these changes will result in a citation and a fine

# Indiana Code 16-27 and SB 473: Effective July 1, 2025

Please review <u>SEA 473</u>, as it will take effect July 1, 2025.

The bill includes revisions to the tube feeding requirements and includes a new law in which new employees who are not already registered as home health aides must complete 75 hours of training and competencies. This includes 16 hours of practicum and the remaining hours for competency training and evaluation.

# **Dementia Training**

IDOH does not have a specific dementia course that is endorsed for education. Providers are creating their own curriculum and sending it to IDOH for approval.

If you are interested in creating your own curriculum, please complete the application by <u>clicking this link</u>. Please also include your curriculum with your application in an email to <u>HCBC@health.IN.gov</u>. There is no cost and approval may take up to 60 days depending on agency capacity.

The following providers offer training courses for dementia that have been approved:

- In The Know
- Relias
- Nevvon
- Medbridge
- Medline University
- Dementia Wise

To promote, protect, and improve the health and safety of all Hoosiers.

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