



PIEDMONT TRIAD REGIONAL COUNCIL
AREA AGENCY ON AGING

Home and Community Care Block Grant Services Eligibility – Region G – SFY 2020

Unit Based Services

Description of Terms per the DAAS 101 Long Form (Client Registration Form), dated August 2012:

ADLs (Activities of Daily Living): Eat, Get dressed, Bathe self, Use the toilet, Transfer into/out of bed/chair, Ambulate (walk or move about the house without anyone's help)

IADLs (Instrumental Activities of Daily Living): Prepare meals, Shop for personal items, Manage own medications, Manage own money (pay bills), Use telephone, Do heavy housework, Do light cleaning, Transportation ability.

Adult Day Care/Adult Day Health Services Eligibility

Adult Day Care Eligibility

(Source: HCCBG Adult Day Care/Adult Day Health Services Service Standards, last revised March 13, 2015; effective July 1, 2014.)

An individual must be:

- 1) aged 60 or over
- 2) Must meet the definition of "frail" as defined by the Older Americans Act, Reauthorization of 2006: Is unable to perform at least two (2) activities of daily living (ADLs) without substantial human assistance, including verbal reminding, physical cueing or supervision **OR** Due to cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual. (The participant's medical examination report will be the document used to confirm a participant's eligibility.)

[Number of Counties in Region G in SFY 2020: 6.]

Adult Day Health Services Eligibility

(Source: HCCBG Adult Day Care/Adult Day Health Services Service Standards, last revised March 13, 2015; effective July 1, 2014.)

An individual must be:

- 1) aged 60 or over
- 2) Must meet the definition of "frail" as defined by the Older Americans Act, Reauthorization of 2006: Is unable to perform at least two (2) activities of daily living (ADLs) without substantial human assistance, including verbal reminding, physical cueing or supervision **OR** Due to cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual. (The participant's medical examination report will be the document used to confirm a participant's eligibility.)
- 3) **AND** require one of the following during hours of attendance at the day health program coordinated by the Health Care Coordinator: Monitoring of a medical condition; or administration of medication, special feedings, or provision of other treatment or services related to health care needs.

[Number of Counties in Region G in SFY 2020: 4.]



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Group Respite Eligibility

(Source: NC Division of Aging and Adult Services – Group Respite Policies and Procedures, last revised: February 5, 2015; effective date: July 1, 2015.)

Participant Eligibility

Age: The participant attending the group respite program is required to be 60 years of age or older.

Supervision: Group Respite participants are individuals in need of supervision who have a caregiver. Group Respite participants' need for supervision with activities of daily living can be provided through verbal reassurance, encouragement and physical cueing. No hands-on/personal care is needed by the participants while participants are in attendance at the group respite program. No hands-on/personal care may be provided to participants by staff (paid and volunteer). Participants are able to communicate (though not necessarily verbalize) personal needs.

Physical or Cognitive Impairment: Participants either have (1) Physical conditions that are medically stable and do not require hands-on personal care assistance or intervention while in attendance at the group respite program; or (2) Cognitive impairment or behaviors which can be managed through redirection, distraction and reassurance.

Group Respite is Distinct from Adult Day Care in North Carolina

1. Primary goals [of Group Respite] are to provide dependable, scheduled, short-term relief for the caregiver, supervision and socialization for the participant, and possible resource information for the family.
2. The Group Respite program is required to operate a minimum of three (3) continuous hours per day, but no more than six (6) continuous hours per day for no more than four (4) days per week.
3. Does not require certification as an adult day care if participants are not receiving personal care from staff (paid and volunteer) such as assistance with toileting (incontinence care) or eating while participants are in attendance at the group respite program and is operating less than the required minimum days per week and hours per day for Adult Day Care Certification.
4. May be more affordable for a community or local organization to develop and provide than adult day care.

[Number of Counties in Region G in SFY 2020: 1.]



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In-Home Aide Services Eligibility and Description of IHA Service Levels

Client Eligibility for In-home Aide Services for Older Adults

(Source: NC Division of Aging In-home Aide Services – Policies and Procedures, effective date – July 1, 1992.)

Clients eligible for services must be 60 years of age or older, live at home, and have home management and/or personal care needs.

Description of In-home Aide Service Levels for Older Adults

(Source: NC Division of Aging In-home Aide Services – Policies and Procedures, effective date – July 1, 1992. AND NC Division of Social Services Family Services Manual, Volume VII, Chapter VIII – In-home Aide Services – Definition of Service – December 1, 1991. Subchapter 13J - The Licensing of Home Care Agencies - January 1, 2010; Memorandum - Role of the Registered Nurse, The NC Division of Health Service Regulation – August 31, 2015.)

Level 3 Personal Care

In-home Aide Services at this level are intended to provide substantial ADL [activities of daily living] support to clients who require assistance with health/personal care tasks. Provision of these tasks involves extensive “hands on” care and potential assistance with a wide range of health related conditions. Individuals to be served include those who are medically stable with significant ADL impairments (3 or more) resulting from a chronic condition; or who are medically unstable due to recent illness, complications of chronic condition, or a deteriorating condition with variable ADL and IADL needs. This is termed “extensive assistance” in “The Licensing of Home Care Agencies.”

[Number of Counties in Region G (including Respite Care) in SFY 2020: 11.]

Level 2 Personal Care

Clients to be served include those who are medically stable and partially dependent in activities of daily living (ADL) functioning (1 or 2 ADLs) due to physical and/or mental impairment; or who have maintenance needs and/or rehabilitative potential. In addition to their personal care needs, clients/families may also require assistance with IADL [instrumental activities of daily living] activities to improve IADL functioning or to learn independent living skills; or they may have increased IADL needs (2-4) requiring additional support to maintain/achieve overall functioning. This is termed “limited assistance” in “The Licensing of Home Care Agencies.”

[Number of Counties in Region G (including Respite Care) in SFY 2020: 11.]

Level 3 Home Management

In-home Aide Services at this level are intended to provide intensive education and support to clients/families in carrying out home management tasks and improving family functioning skills. Clients/families to be served generally have moderate to severe limitations in cognitive and/or psychosocial functioning, but have potential for partial/total independence in IADL and/or home management functioning. Some clients may have severe IADL impairments (more than 4).

[Number of Counties in Region G in SFY 2020: 1.]



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Level 1 Home Management

In-home Aide services at this level are intended to provide support to individuals/families requiring assistance with basic home management tasks, such as housekeeping, cooking, shopping, and bill paying. Individuals to be served include those who are self-directing, medically stable, and have at least one (1) instrumental activity of daily living (IADL) impairment. Personal Care tasks may **NOT** be performed at this level.

[Number of Counties in Region G in SFY 2020: 7.]

Nutrition Services Eligibility

(Source: HCCBG Nutrition Service Standards, effective July 1, 2003 and DAAS Administrative Letter No. 12-13, July 20, 2012, "Changes in Home and Community Care Block Grant Client Eligibility Policy Related to the Registration of Clients under Age 60.")

Congregate Nutrition Eligibility

People age 60+.

[Number of Counties in Region G in SFY 2020: 12.]

Home Delivered Meals Eligibility

People age 60+ who are physically or mentally unable to obtain food or prepare meals, who have no responsible person who is able and willing to perform this service, and who are unable to participate in Congregate Nutrition program because of physical or mental impairment.

Note: Home delivered meal providers have some local flexibility to interpret what homebound means for the HCCBG nutrition program, as long as the interpretation is applied fairly and equitably to all applicants and clients. A person does not have to be bedridden to be generally confined to his or her home, but leaving home for non-medical reasons should be for short periods of time or infrequently.

[Number of Counties in Region G in SFY 2020: 12.]

Nutrition Services – Special Eligibility

Federal rules establish special eligibility for spouses under age 60 and give providers the option of offer a meal (congregate or home delivered) to certain other people under age 60:

- Spouses under age 60 of an eligible nutrition participant
- Individuals under age 60 providing volunteer services during meal hours (local option)
- Individuals under age 60 with disabilities who reside at home with eligible older adults receiving home-delivered meals (local option)
- Individuals under age 60 with disabilities who reside at home with and accompany an eligible older adult to the nutrition site (local option)
- Individuals under age 60 with disabilities who reside in housing facilities occupied primarily by older adults at which congregate nutrition services are provided (local option)



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Transportation Services Eligibility

(Source: HCCBG Transportation Services – Policies and Procedures, effective July 1, 1993.)

Transportation Services are limited to individuals 60 years of age and older who are in need of the service. There are two categories of Transportation Services:

General Transportation: includes transporting eligible older adults to local community resources or other locations necessary for accessing services and/or accomplishing activities necessary for daily living. Destinations may include, but are not limited to, nutrition sites, senior centers, shopping centers, pharmacies, and recreation facilities. General Transportation does **NOT** include transporting eligible older adults to medical care facilities.

[Number of Counties in Region G in SFY 2020: 10.]

Medical Transportation: includes transporting eligible older adults to medical care facilities. Destinations may include, but are not limited to doctors' offices, hospitals, and health clinics.

[Number of Counties in Region G in SFY 2020: 7.]

Non-Unit Based Services

Care Management Eligibility

(Source: NC Division of Aging and Adult Services, Care Management Service – Policies and Procedures, Effective Date – July 1, 1992.)

Client Eligibility

Care Management Services are limited to older adults 60 years of age or older and/or their spouses who meet the identification priority groups.

Priority Groups

Individuals should be provided Care Management Services in the following order based upon the level of functional impairment:

1. Impairments in at least three (3) activities of daily living (ADL), and have complicated medical, mental, social or behavioral impairment(s), and whose needs cannot be met with services currently available to them and who prefer to be cared for at home; or
2. Impairments in at least one (1) activity of daily living (ADL), and have complicated medical, mental, social or behavioral impairment(s) and whose needs cannot be met with services currently available to them and who prefer to be cared for at home; or
3. Impairments in at least two (2) instrumental activities of daily living (IADL), and have complicated medical, mental social or behavioral impairment(s), and whose needs cannot be met with services currently available to them and who prefer to be cared for at home.

[Number of Counties in Region G in SFY 2020: 1.]



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Housing and Home Improvement Eligibility

(Source: NC Division of Aging and Adult Services Manual, Housing and Home Improvement Policies and Procedures, Effective Date: July 1, 2007, Last Updated: September 22, 2014.)

The eligible population for the Housing and home Improvement service with funding administered by the Division of Aging and Adult Services and focused on those with greatest economic and social need: (a) are 60 years of age or older; (b) have no one able and willing to perform the services for them; and (c) reside within a county where the housing and home improvement service is funded.

[Number of Counties in Region G in SFY 2020: 1.]

Information and Options Counseling Eligibility

(Source: North Carolina Division of Aging and Adult Services, Information and Options Counseling, effective July 1, 2014.)

Information, Assistance, and Options Counseling are seen as single components of the continuum of access services. “Information” includes informing people about programs and services, identifying the types of assistance they need and connecting them to appropriate service providers. “Assistance” is a more intensive service for those persons who require additional help with negotiating the service delivery system. “Options Counseling” is an interactive process where individuals receive guidance in their deliberations to make informed choices about long-term supports. The expectation for Information and Options Counseling is that the agency staff receiving the contact should use a person-centered approach to make sure the individual’s needs have been fully addressed. Reimbursement for Information and Options Counseling is not unit based.

Those eligible for Information and Assistance services are persons 60 years of age and older or persons acting on behalf of persons age 60 and older and who are in need of information or services. The number of duplicated Information and Assistance contacts are entered monthly into the Aging Resources Management System (ARMS). The Client Registration Form (DAAS 101 Form) is not used for Information and Assistance services.

Since Information and Options Counseling (I&OC) is funded through the Home and Community Care Block Grant (HCCBG) which is a mixture of federal and state funding, only Options Counseling monthly contacts for persons age 60 and older are reported in ARMS and monitored for the I&OC service. The Client Registration Form (DAAS 101 Form) is used to track HCCBG Options Counseling clients.

[Number of Counties in Region G in SFY 2020: 6.]



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Senior Center Operations Eligibility

(Source: North Carolina Division of Aging, Senior Center Operations, effective September 1, 2002.)

Since Senior Center Operations funds are part of the Home and Community Care Block Grant (HCCBG) which is a mixture of federal and state funding, an eligible client is an adult 60+ years of age and their spouse who is capable of and interested in participating in the multipurpose senior center. [The term “multipurpose senior center” means a community facility for the organization and provision of a broad spectrum of services, which shall include provision of health (including mental health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals.] **Senior centers dependent on other funding sources may take into consideration other definitions of eligibility according to funding sources.** Note: Other HCCBG services such as Nutrition and Transportation cannot be funded with Senior Center Operations funding. Reimbursement for Senior Center Operations is not unit based. The Client Registration Form (DAAS 101 Form) is not used for Senior Center Operations.

[Number of Counties in Region G in SFY 2020: 9.]

****Note: This “HCCBG Services Eligibility – Region G” document provides a basic explanation of eligibility requirements for various services. It is not intended to replace the North Carolina Service Standards. The North Carolina Service Standards should be consulted to determine exact service requirements.***