



In-Home Support Services (IHSS) FAQ for Case Managers & Provider Agencies

BECOMING AN IHSS AGENCY

How does my agency become an IHSS agency?

- Visit the following link to submit a Letter of Intent (LOI) to the Colorado Department of Public Health and Environment (CDPHE) www.colorado.gov/cdphe/health-facilities-licensure-and-certification
 - A staff member from CDPHE will send you an application and offer further guidance.
 - Once approved, you will receive a certificate approving your agency to provide In-Home Support Services.
- Complete provider enrollment online with the Department of Health Care Policy and Financing (HCPF) www.colorado.gov/hcpf/provider-enrollment
 - If you need assistance call 1-800-237-0757 and select option 5 or email Provider.Questions@state.co.us
 - Once you start provider enrollment online, the portal will automatically assign you a 5-digit application tracking number (ATN).
 - To check in on the status of your enrollment you can log in to the portal at any time.
- After you receive approval from both CDPHE and HCPF, submit your IHSS certificate and your ATN to:
 - Participant Directed Liaison: Erica Weidenfeld
Email: Erica.Weidenfeld@state.co.us
 - HCPF will verify if the provider enrollment is approved and add your agency to the approved IHSS provider list online: www.colorado.gov/hcpf/participant-directed-programs#IHSS
- **NOTE:** You must complete both CDPHE and HCPF's processes before providing IHSS services to any participant.

HOMEMAKER, PERSONAL CARE, AND HEALTH MAINTENANCE SERVICES

Can a family member get paid to provide Homemaker services?

- No, a family member cannot be paid for Homemaker services. However, a participant can have the IHSS agency provide Homemaker services.
- For more information, refer to the IHSS Categorization Table online: www.colorado.gov/hcpf/participant-directed-programs#IHSS





A family member may perform homemaker tasks which are secondary and contiguous to IHSS Relative Personal Care or IHSS Health Maintenance Activities. What does “secondary and contiguous” mean?

- Regulation 8.552.8.G states "Health Maintenance Activities (HMA) may include related Personal Care and Homemaker services if such tasks are completed during the health maintenance visit and are secondary and contiguous to the health maintenance activity." The main focus must be a HMA task and not the Personal Care or Homemaker tasks. Care tasks would not be bundled as HMA if they were not secondary and contiguous to a skilled care task. If the task can be split out or is not secondary and contiguous to a HMA task, then it should be billed in the appropriate category.
 - Homemaker/Personal Care tasks would be listed under Health Maintenance on the care plan and marked as secondary and contiguous to a specific activity.
 - Please note that a family member/relative cannot be paid to complete a homemaker task. A family member cannot be compensated for completing homemaker tasks even if they are secondary and contiguous to a HMA task.
- Example of a secondary and contiguous task:
 - While an attendant is assisting a participant with bathing, water splashes on the floor. To avoid a safety hazard, the attendant wipes up the water. The task of wiping up water from the floor is secondary and contiguous to the HMA bathing.
 - An attendant is assisting a participant with undressing to get ready for bed. After undressing, the attendant places soiled garments in the washing machine to run a load. Putting the clothing in the washer is a task that is secondary and contiguous to the HMA dressing.

Can an agency employ a relative to perform the Homemaker tasks?

- A relative can only be paid to provide IHSS Health Maintenance and/or Relative Personal Care. They cannot hire a relative as an IHSS Homemaker.

What is the cap for Relative Personal Care?

- 40 hours a week.

Can a participant have more than one family member provide Personal Care and each attendant work 40 hours per week (totaling 80 hours a week)?

- The participant is limited to receiving a total of 40 hours per week for Relative Personal Care.

Can two family members split the 40 hours of Personal Care per week?

- Yes, as long as they are adhering to the 40-hour limit.

Is IHSS Personal Care exempt from Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)?

- Yes, with the exception of participants active with the Children’s Home and Community Based Services (CHCBS) waiver, a member can elect to not participate in EPSDT and receive IHSS.





Can a CHCBS participant receive EPSDT services as well, or is this duplicative of HMA?

- CHCBS participants can elect to receive HMA through an IHSS provider and Personal Care services through EPSDT.

If a family member is unavailable to provide Relative Personal Care and the IHSS agency provides a back-up caregiver to provide Personal Care, should the back-up caregiver fill out their time on the Relative Personal Care form or on a regular Personal Care form?

- The agency caregiver should use a regular Personal Care form and the family member should use a Relative Personal Care form.
- All services must be prior authorized by the case manager. In the event that services need to be modified, the case manager will complete a Service Plan and Prior Authorization Request revision. The IHSS agency and case manager must communicate when there is a need to modify hours from Relative Personal Care to regular Personal Care.

If a spouse or family member receives income for providing services, how does this affect a participant's income eligibility?

- Each individual situation is different, therefore the participant should contact their county Health and Human Services Office to discuss any impact to Health First Colorado (Colorado's Medicaid Program) eligibility.

What is the cap for Health Maintenance Activities (HMA)?

- There is no cap for HMA. Authorization is based on individual need.

What services can be provided in the community?

- All IHSS services can be provided in the community. For example, Personal Care may be needed when a participant needs support at a doctor's appointment or at a grocery store.

HOME HEALTH

Can someone receive IHSS and Long Term Home Health (LTHH) at the same time (includes CNA and nursing services)?

- Yes, as long as there is not a duplication of services.

OVERTIME

How does overtime work?

- An IHSS agency is required to comply with the Fair Labor Standards Act (FLSA). For additional information regarding FLSA, please see the [Colorado Department of Labor](http://www.colorado.gov/labor) website.





FORMS

If a new IHSS participant is moving to Colorado from out of state, can the out-of-state physician sign the physician's attestation form?

- Yes. Once a relationship with a Colorado Physician has been established the form should be completed by the new physician.

Can a Physician, Nurse Practitioner or Physician's Assistant sign the Physician's Attestation form?

- Yes

If a participant's main doctor is a psychiatrist, can they sign the Physician's Attestation form?

- No, only a Primary Care Physician, Physician's Assistant, or Nurse Practitioner can sign the form.

Does the IHSS Client and Provider Agency Responsibilities Form need to be completed if the physician says a participant can direct their care?

- No. This form is to be completed when a participant is unable to direct and manage their own care and has elected to receive support from the IHSS provider. The form would not be completed if the participant is able to direct their own care or if the participant has appointed an Authorized Representative.

How do we address the IHSS Client and Provider Agency Responsibilities Form for children under 18 years old?

- In many circumstances of a 2 parent household, one may choose to be a caregiver and other may choose to be the Authorized Representative. In circumstances that it is a single parent with no other natural supports, a family member may choose to be the attendant or caregiver, but cannot be both. The IHSS agency can provide attendants and/or assistance with Authorized Representative responsibilities in these types of scenarios. In these circumstances, the family member should designate how much oversight is being provided by the IHSS agency through the IHSS Client and Provider Agency Responsibilities Form www.colorado.gov/hcpf/participant-directed-programs#IHSS

Do we need to update old IHSS forms with new ones?

- Forms utilized for IHSS must be updated when the participant is experiencing a change. For example, if there is a change in a participant's needs, the Physician Attestation form should be updated. If there is a change in Authorized Representative, a new form shall be completed, etc.

CARE PLAN

What if the IHSS Care Plan created by the IHSS agency doesn't align with the ULTC 100.2 assessment the case manager completed?

- The case manager should discuss the IHSS Care Plan with the participant. The participant's needs may have changed since the time the ULTC 100.2 assessment and IHSS Care Plan were completed. When situations like this occur, there needs to be a dialogue between the participant, IHSS agency, and case manager to ensure the IHSS Care Plan is accurate. The case manager is also responsible for making





changes to the HCBS Service Plan if the participant's needs have changed. If the participant disagrees with the case manager's determination of services, the participant is able to file an appeal to request a hearing before an administrative law judge.

IHSS AGENCY

Is a Registered Nurse (RN) responsible for the family members providing care or can the client direct and determine appropriateness?

- IHSS is a service-delivery option that allows home and community-based services (HCBS) waiver participants to direct their care and have control over their attendant services, while having additional support with budgeting. The participant/authorized representative has control over directing and managing their own care. No matter the participant's circumstances, an IHSS agency is required to provide oversight by a licensed medical professional.

If the participant can their own direct care, does the IHSS Agency still need to send a licensed health care professional out who will verify and document attendant skills, competency to perform IHSS, and basic consumer safety procedures?

- Yes, even if the client can direct their own care, agencies still need to follow IHSS rule [8.552.6 PROVIDER RESPONSIBILITIES](#)

Does the agency determine attendant competency standards?

- Under IHSS rule, the agency shall assure and document that attendant training was completed within 30 days of IHSS services starting. In lieu of training, a skills regulation test can be completed with the attendant.

Are Independent Core Services included in a participant's IHSS Care Plan as HMA?

- The IHSS agency should document on the IHSS care plan what the participant was offered and elected to receive under the Independent Core Services. Core Services are requirements of an IHSS provider agency and are not reimbursable.

Can a participant elect not to receive Independent Core Services?

- Yes, they can elect to not receive these services.

TRAVEL

Can a provider request travel time for IHSS?

- No, travel time is not authorized for IHSS.

