



## Categorization of In-Home Support Services (IHSS) Services

**Use only for IHSS Services**

**Table 1: Limits and Restrictions**

<u>Personal Care</u> <i>(Not Offered in CHCBS Waiver)</i>	<u>Health Maintenance Activities</u> <i>(HMA)</i>	<u>Homemaker</u> <i>(Not Offered in CHCBS Waiver)</i>
<ul style="list-style-type: none"> <li>• Family members that have been designated as a client’s Authorized Representative (AR) may not be reimbursed for providing IHSS.</li> <li>• All family members combined cannot be reimbursed for providing more than 40 hours of IHSS Relative Personal Care in a week.</li> <li>• IHSS Personal Care is not offered in the CHCBS waiver</li> </ul>	<ul style="list-style-type: none"> <li>• Family members that have been designated as a client’s Authorized Representative (AR) may not be reimbursed for providing IHSS.</li> </ul>	<ul style="list-style-type: none"> <li>• Family members that have been designated as a client’s Authorized Representative (AR) may not be reimbursed for providing IHSS.</li> <li>• A family member <u>shall not be</u> reimbursed for providing <u>only</u> IHSS Homemaker Services. A family member may perform homemaker tasks which are secondary and contiguous to IHSS Relative Personal Care or IHSS Health Maintenance Activities. Additional service hours will not be authorized to complete homemaker tasks</li> <li>• Family members are not eligible to be the client’s IHSS homemaker</li> <li>• IHSS Homemaker is not offered in the CHCBS waiver</li> </ul>



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		<ul style="list-style-type: none"> <li>• IHSS Homemaker Services includes services that would be considered general household activities provided for an eligible client to maintain a healthy and safe home environment.</li> <li>• Homemaker services should only be provided when the person ordinarily responsible for these activities is absent or unable to manage these tasks.</li> </ul> <p>Homemaker does not include:</p> <ul style="list-style-type: none"> <li>• Personal care services</li> <li>• Services the person can perform independently</li> <li>• Homemaker Services provided in uncertified congregate facilities are not a benefit</li> </ul>



**Table 2: Description of Activities in Each Service Category**

<b><u>Personal Care</u></b> <i>(Not Offered in CHCBS Waiver)</i>	<b><u>Health Maintenance Activities</u></b> <b><u>(HMA)</u></b>	<b><u>Homemaker</u></b> <i>(Not Offered in CHCBS Waiver)</i>
<b>Bathing</b> <ul style="list-style-type: none"> <li>When skilled skin care, skilled transfer, or skilled dressing is <u>not</u> required in conjunction with bathing</li> </ul>	<b>Bathing</b> <ul style="list-style-type: none"> <li>When skilled skin care, skilled transfer or skilled dressing is required in conjunction with bathing</li> </ul>	<b>Routine light housecleaning</b> May Include: <ul style="list-style-type: none"> <li>Dusting</li> <li>Vacuuming</li> <li>Mopping</li> <li>Cleaning bathroom and kitchen areas</li> <li>Dishwashing</li> <li>Bed making</li> <li>Laundry</li> </ul>
<b>Skin Care</b> <ul style="list-style-type: none"> <li>When skin is unbroken</li> <li>When any chronic skin problems are not active</li> <li>When preventive rather than a therapeutic nature</li> </ul> May include: <ul style="list-style-type: none"> <li>Application of non-medicated lotions and solutions, or of lotions and solutions not requiring a physician's prescription</li> <li>Rubbing of reddened areas</li> <li>Reporting of changes to supervisor</li> <li>Application of preventive spray on unbroken skin areas that may be</li> </ul>	<b>Skin Care</b> <ul style="list-style-type: none"> <li>When there is broken skin, or potential for infection due to a chronic skin condition in an active stage</li> </ul> May Include: <ul style="list-style-type: none"> <li>Wound care</li> <li>Dressing changes</li> <li>Application of prescription medications</li> <li>Skilled observation and reporting</li> </ul>	<b>Meal Preparation</b>



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susceptible to development of decubiti		
<b>Hair care</b> <ul style="list-style-type: none"> <li>When skilled skin care, transfer, or skilled dressing <u>is not</u> required in conjunction with hair care</li> </ul> May include: <ul style="list-style-type: none"> <li>Shampooing with non-medicated shampoo or shampoo that does not require a physician's prescription</li> <li>Drying of hair</li> <li>Combing of hair</li> <li>Styling of hair</li> </ul>	<b>Hair care</b> <ul style="list-style-type: none"> <li>When skilled skin care, skilled transfer, or skilled dressing is required in conjunction with hair care</li> <li>When it involves the application of prescribed medication or shampoos</li> </ul>	<b>Shopping</b>
<b>Nail Care</b> <ul style="list-style-type: none"> <li>When skilled skin care <u>is not</u> required in conjunction with nail care</li> <li>In the absence of any medical conditions that might involve peripheral circulatory problems or loss of sensation</li> </ul> May include: <ul style="list-style-type: none"> <li>Soaking of the nails</li> <li>Filing of nails</li> </ul>	<b>Nail care</b> <ul style="list-style-type: none"> <li>When skilled skin care is required in conjunction with nail care</li> <li>When medical conditions that may involve peripheral circulatory problems or loss of sensation are present</li> </ul>	<b>Teaching</b> <ul style="list-style-type: none"> <li>Teaching the skills listed above to clients who are capable of learning to do such tasks for themselves</li> <li>Teaching shall result in a decrease of weekly units required within ninety days</li> <li>If such a savings in service units is not realized, teaching shall be deleted from the care plan</li> </ul>



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<b>Mouth care</b> <ul style="list-style-type: none"> <li>When skilled skin care <u>is not</u> required in conjunction with mouth care.</li> </ul> May include: <ul style="list-style-type: none"> <li>Denture care</li> <li>Basic oral hygiene</li> </ul>	<b>Mouth care</b> <ul style="list-style-type: none"> <li>When skilled skin care is required in conjunction with mouth care</li> <li>When there is injury or disease of the face, mouth, head or neck</li> <li>When in the presence of communicable disease</li> <li>When the client is unconscious</li> <li>When oral suctioning is required</li> </ul>	
<b>Shaving</b> <ul style="list-style-type: none"> <li>When skilled skin care <u>is not</u> required in conjunction with shaving</li> <li>Only an electric razor may be used</li> </ul>	<b>Shaving</b> <ul style="list-style-type: none"> <li>When skilled skin care is required in conjunction with shaving</li> </ul>	
<b>Dressing</b> <ul style="list-style-type: none"> <li>When skilled skin care or skilled transfer <u>is not</u> required in conjunction with dressing</li> </ul> May include: <ul style="list-style-type: none"> <li>Assistance with ordinary clothing</li> <li>Application of support stockings of the type that can be purchased without a physician's prescription</li> <li>Application of orthopedic devices such as splints and braces, or of</li> </ul>	<b>Dressing</b> <ul style="list-style-type: none"> <li>When skilled skin care or skilled transfer is required in conjunction with dressing</li> <li>Application of anti-embolic or other pressure stockings that can be purchased only with a physician's prescription</li> <li>Application of orthopedic devices such as splints and braces, or of artificial limbs, if considerable</li> </ul>	



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artificial limbs, if considerable manipulation of the device or limb is not necessary <ul style="list-style-type: none"> <li>Application of orthopedic devices such as splints and braces, or of artificial limbs if the client is fully trained in the use of the device or limb and is able to instruct the personal care staff</li> </ul>	manipulation of the device or limb is necessary <ul style="list-style-type: none"> <li>Application of orthopedic devices such as splints and braces, or of artificial limbs when the client is still learning to use the device or limb</li> </ul>	
<b>Feeding</b> <ul style="list-style-type: none"> <li>When skilled skin care or skilled dressing <u>is not</u> required in conjunction with feeding</li> <li>When oral suctioning <u>is not</u> needed on a stand-by or other basis</li> </ul> May include: <ul style="list-style-type: none"> <li>Assistance with eating by mouth, using common eating utensils, such as forks, knives and straws</li> </ul>	<b>Feeding</b> <ul style="list-style-type: none"> <li>When skilled skincare or skilled dressing is required in conjunction with assistance with eating</li> <li>When oral suctioning is needed on a stand-by or other basis</li> <li>When there is high risk of choking that could result in the need for emergency measures such as CPR or the Heimlich maneuver</li> <li>Syringe feeding</li> </ul>	
<b>Ambulation</b> <ul style="list-style-type: none"> <li>When skilled transfers <u>are not required</u> in conjunction with ambulation</li> <li>When assisting a client with adaptive equipment and the client</li> </ul>	<b>Ambulation</b> <ul style="list-style-type: none"> <li>When skilled transfers are required in conjunction with ambulation</li> <li>Assistance with adaptive equipment when the client is still being trained in the use of such equipment</li> </ul>	



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<p>is fully trained in the use of such equipment</p> <p>When assisting someone in a cast and there is <u>no need</u> for observation and reporting to a nurse and there is <u>no need</u> for skilled skin care</p> <p>*Adaptive equipment may include, but is not limited to, gait belts, walkers, canes and wheelchairs</p>	<ul style="list-style-type: none"> <li>Assisting someone in a cast if there is a need for observation and reporting to a nurse or there is a need for skilled skin care.</li> </ul>	
<p><b>Assistance with exercises</b></p> <ul style="list-style-type: none"> <li>When the exercises <u>are not</u> prescribed by a nurse or other licensed medical professional</li> </ul> <p><u>Only includes:</u></p> <ul style="list-style-type: none"> <li>The encouragement of normal bodily movement, as tolerated, on the PAR of the client</li> </ul> <p>*Attendants shall not prescribe nor direct any type of exercise program for the client</p>	<p><b>Assistance with exercises</b></p> <ul style="list-style-type: none"> <li>When the exercises are prescribed by a nurse or other licensed medical professional</li> <li>This may include passive range of motion</li> </ul>	
<p><b>Transfers</b></p> <ul style="list-style-type: none"> <li>When the client has sufficient balance and strength to assist with the transfer to some extent</li> </ul>	<p><b>Transfers</b></p> <ul style="list-style-type: none"> <li>When the client is unable to assist with the transfer</li> </ul>	



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<ul style="list-style-type: none"> <li>Except for Hoyer lifts, adaptive equipment may be used in transfers, provided that the client is fully trained in the use of the equipment and can direct the transfer step by step</li> </ul> <p>*Adaptive equipment may include, but is not limited to, gait belts, wheelchairs, tub seats, and grab bars</p>	<ul style="list-style-type: none"> <li>Use of Hoyer lifts is considered skilled</li> <li>Use of other adaptive equipment if the client is still being trained in the use of the equipment</li> </ul>	
<p><b>Positioning</b></p> <ul style="list-style-type: none"> <li>When the client is able to identify to the personal care staff, verbally, non-verbally or through others, when the position needs to be changed; and</li> <li>When skilled skin care <u>is not</u> required in conjunction with positioning</li> </ul> <p>May include:</p> <ul style="list-style-type: none"> <li>Simple alignment in a bed, wheelchair, or other furniture</li> </ul>	<p><b>Positioning</b></p> <ul style="list-style-type: none"> <li>When the client <u>is not able</u> to identify to the caregiver when the position needs to be changed</li> <li>When skilled skin care is required in conjunction with positioning</li> </ul>	
<p><b>Bladder care</b></p> <ul style="list-style-type: none"> <li>When skilled transfer or skilled skin care <u>is not</u> required in conjunction with bladder care</li> </ul>	<p><b>Bladder care</b></p> <ul style="list-style-type: none"> <li>When it involves disruption of the closed system for a Foley or suprapubic catheter, such as</li> </ul>	



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<p>May include:</p> <ul style="list-style-type: none"> <li>Assisting the client to and from the bathroom</li> <li>Assistance with bed pans, urinals, and commodes</li> <li>Changing of clothing and pads of any kind used for the care of incontinence</li> <li>Emptying of Foley catheter bags or suprapubic catheter bags only if there is no disruption of the closed system</li> </ul> <p>*Attendants must be trained to understand what constitutes disruption of the closed system</p>	<ul style="list-style-type: none"> <li>changing from a leg bag to a night bag</li> <li>Care of external catheters</li> <li>When skilled transfer or skilled skin care is required in conjunction with bladder care</li> </ul>	
<p><b>Bowel care</b></p> <ul style="list-style-type: none"> <li>When skilled transfer or skilled skincare <u>is not</u> required in conjunction with bowel care</li> </ul> <p>May include</p> <ul style="list-style-type: none"> <li>Assisting the client to and from the bathroom</li> <li>Assistance with bed pans and commodes</li> </ul>	<p><b>Bowel care</b></p> <ul style="list-style-type: none"> <li>When it a skilled transfer or skilled skin care is required in conjunction with bowel care</li> </ul> <p>May include:</p> <ul style="list-style-type: none"> <li>Digital stimulation</li> <li>Enemas</li> <li>Care of ostomies that are new</li> <li>Care of ostomies when the client is unable to self-direct the care</li> </ul>	



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<ul style="list-style-type: none"> <li>Changing of clothing and pads of any kind used for the care of incontinence</li> <li>Emptying of ostomy bags and assistance with other client-directed ostomy care is unskilled only when there is no need for skilled skin care or for observation and reporting to a nurse</li> </ul>		
<p><b>Medication Reminding</b></p> <ul style="list-style-type: none"> <li>When medications have been preselected, by the client, a family member, a nurse, or a pharmacist, and are stored in containers other than the prescription bottles, such as medication minders</li> <li>Medication minder containers must be clearly marked as to day and time of dosage, and must be kept in such a way as to prevent tampering</li> </ul> <p>Only includes:</p> <ul style="list-style-type: none"> <li>Inquiries as to whether medications were taken</li> <li>Verbal prompting to take medications</li> <li>Handing the appropriately marked medication minder container to the client</li> </ul>	<p><b>Medication Reminding</b></p> <ul style="list-style-type: none"> <li>When it consists of putting the medication in the client's hand when the client can self-direct in the taking of medications</li> </ul>	



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<ul style="list-style-type: none"> <li>Opening the appropriately marked medication minder container for the client if the client is physically unable to open the container</li> </ul> <p>*These limitations apply to all prescription and all over the counter medications, including p.m. medications</p> <p>*Any irregularities noted in the preselected medications, such as medications taken too often or not often enough, or not at the correct time as marked on the medication minder container, shall be immediately reported by the personal care staff to a supervisor</p>		
<p><b>Respiratory care</b>          Only includes:</p> <ul style="list-style-type: none"> <li>Cleaning or changing the tubing for oxygen equipment</li> <li>Filling the distilled water reservoir</li> <li>Temporarily removing and replacing the cannula or mask from the client's face for purposes of shaving or washing the client's face</li> </ul>	<p><b>Respiratory care</b>          May include:</p> <ul style="list-style-type: none"> <li>Postural drainage</li> <li>Cupping</li> <li>Adjusting oxygen flow within established parameters</li> <li>Suctioning of mouth and nose</li> </ul>	



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<p><b>Accompanying</b>            Accompanying the client to medical appointments, banking errands, basic household errands, clothes shopping, and grocery shopping to the extent necessary and as specified on the care plan <u>only when an attendant is needed during the trip to provide one or more other unskilled personal care services</u></p> <ul style="list-style-type: none"> <li>• When all the care that is provided by the attendant in relation to the trip is unskilled personal care</li> <li>• Accompanying the client to other services is also permissible as specified on the care plan, to the extent of time that the client would otherwise receive personal care services in the home</li> <li>• <u>Accompanying the client primarily to provide companionship is not a covered benefit</u></li> </ul>	<p><b>Accompanying</b>            Accompanying the client to medical appointments, banking errands, basic household errands, clothes shopping, and grocery shopping to the extent necessary and as specified on the care plan <u>only when an attendant is needed during the trip to provide one or more HMA services</u></p> <ul style="list-style-type: none"> <li>• When the care provided by the attendant in relation to the trip is HMA</li> <li>• Accompanying the client to other services is also permissible as specified on the care plan, to the extent of time that the client would otherwise receive HMA services in the home</li> <li>• <u>Accompanying the client primarily to provide companionship is not a covered benefit</u></li> </ul>	
<p><b>Protective oversight</b></p> <ul style="list-style-type: none"> <li>• When the client requires stand-by assistance with any of the unskilled</li> </ul>	<p><b>Protective oversight</b></p> <ul style="list-style-type: none"> <li>• When the client requires standby assistance with HMA tasks</li> </ul>	



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personal care described in these regulations <ul style="list-style-type: none"> <li>• When the client must be supervised at all times to prevent wandering</li> </ul>	<ul style="list-style-type: none"> <li>• If HMA tasks are performed while providing oversight</li> </ul>	
	Other CNA and nursing tasks	