

Respite Care Services

Service Definition
<p>A. Respite is short-term care intended to provide both the family or other primary caregiver and the participant with a break from their daily routines. and as an emergency backup plan for unpaid caregivers. Respite relieves families or other primary caregivers from their daily care giving responsibilities.</p> <p>B. Respite can be provided in:</p> <ol style="list-style-type: none">1. The participant's own home;2. The home of a respite care provider;3. A licensed residential site; and4. State certified overnight or youth camps, certified by the Maryland Department of Health.; and.5. Other settings and camps as approved by the DDA.
<p>SERVICE REQUIREMENTS:</p> <p>A. Someone who lives with the participant may be the respite provider, as long as they are not the person who normally provides care for the participant. Respite may not be provided by the primary caregiver.</p> <p>B. A legally responsible person or legal guardian or relative of a participant (who is not a spouse), may be paid to provide this service in accordance with the applicable requirements set forth in Appendix C-2.</p> <p>C. A neighbor or friend may provide services under the same safeguard requirements as defined in Appendix C-2-e.</p> <p>D. Receipt of respite services does not preclude a participant from receiving other services on the same day. For example, the participant may receive meaningful day services (e.g., Employment Services or Day Habilitation) on the same day they receive respite services so long as these services are provided at different times.</p> <p>E. Under self-directing services, the following applies:</p> <ol style="list-style-type: none">1. Participant or their designated representative self-directing services is considered the employer of record;2. Participant or their designated representative is responsible for supervising, training, and determining the frequency of services and supervision of their direct service workers;

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3. Respite Care Services include the cost associated with staff training such as First Aid and CPR; and

4. Respite Care Services staff, with the exception of legal guardians and relatives, must be compensated overtime pay as per the Fair Labor Standards Act from the self-directed budget.

F. Payment rates for services must be customary and reasonable, as established by the DDA.

G. Services are reimbursed based on:

1. A 15-minute rate, for services provided in the participant's home or non-licensed respite provider's home;

2. Daily rate, for services provided in a licensed residential site; or

3. Reasonable and customary fee, for a camp meeting applicable requirements.

H. Respite cannot replace day care while the participant's parent or guardian is at work.

I. If respite is provided in a residential site, the site must be licensed. Services provided in the participant's home or the home of a relative, neighbor, or friend does not require licensure.

J. Respite does not include funding for any fees associated with the respite care (for example, membership fees at a recreational facility, community activities, travel adventures **(unless it is a day trip)**, vacations, or insurance fees).

K. Respite Care Services are not available to participants receiving support services in Community Living-Enhanced Supports, Community Living-Group Home, or Supported Living Services.

L. Respite Care Services are not available at the same time as the direct provision of Career Exploration, Community Development Services, Community Living-Enhanced Supports, Community Living-Group Homes, Day Habilitation, ~~Employment Discovery and Customization~~, Employment Services, Medical Day Care, Personal Supports, ~~Supported Employment~~, Supported Living, or Transportation Services.

M. Payment may not be made for services furnished at the same time as other services that include care and supervision. This includes Medicaid State Plan Personal Care Services as described in Code of Maryland Regulations 10.09.20, the Attendant Care Program and the In-Home Aide Services Program.

N. Prior to accessing DDA funding for this service, all other available and appropriate funding sources **which may include, as applicable, private insurance**, ~~including those~~ services offered by Maryland Medicaid State Plan, Maryland State Department of Education (MSDE), Division of Rehabilitation Services (DORS), and Department of Human Services (DHS), **and**

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or any other federal, or State government funding program, must be explored and exhausted to the extent applicable.

1. These efforts must be documented in the participant's file.
2. If these services are deemed by the participant's person-centered planning team to be inappropriate to meet the specific needs of the participant, the exploration efforts and reasons that these services do not meet the participant's needs shall be documented in the participant's **file PCP**.
3. The DDA has authority to determine if further efforts must be made, and documented, prior to authorization of funding for the service under the Waiver program.

O. For participants enrolled in the Self-Directed Services Delivery, this Waiver program service includes:

1. The reasonable and customary costs of training the participant's direct support staff, including First Aid and CPR certifications;
2. Travel reimbursement, benefits and leave time for the participant's direct support staff, subject to the following requirements:
 - a. The reimbursement, benefits and leave time requested are:
 - i. Within applicable reasonable and customary standards as established by DDA policy; or
 - ii. Required for the participant's compliance, as the employer of record, with applicable federal, State, or local laws; and
 - b. Any reimbursement (e.g., mileage), benefit and leave time requested by the participant must comply with applicable federal, State, or local laws.
 - c. Mileage reimbursement, under the Self-Directed Services Delivery, to the owner of a specialized, modified, or accessible vehicle driven by an employee of the participant and for the purpose of the participant engaging in activities specified in the participant's **file PCP**.
3. Cost for training, mileage, benefits, and leave time are allocated from the participant's total budget allocation.

P. Anyone paid to provide a Medicaid waiver service, including participant's employees, are considered a Medicaid Provider, subject to all laws and regulations associated with a Medicaid Provider.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

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<p>1. Respite Care Services 15-minute and daily, total hours may not exceed 720 hours within each Person-Centered Plan year unless otherwise authorized by the DDA.</p> <p>2. The total cost for camp cannot exceed \$7,248 within each plan year.</p>
Service Delivery Method (check each that applies):
<p>X Participant-directed as specified in Appendix E</p> <p>X Provider managed</p> <p>(Don't Check) Remote/via Telehealth</p>
Specify whether the service may be provided by (check each that applies):
<p>X Legally Responsible Person</p> <p>X Relative</p> <p>X Legal Guardian</p>
Provider Category(s) (check one or both):
X Individual. List types:
Respite Care Supports Professional
X Agency. List the types of agencies:
Camp
Licensed Community Residential Services Provider
Respite Care Provider
Organized Health Care Delivery System Provider
Provider Type:
Respite Care Supports Provider Professional
License (specify)

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Certificate (specify)
Other Standard (specify)
<p>Individual must complete the MDH DDA provider application and be certified based on compliance with meeting the following standards:</p> <ol style="list-style-type: none"> 1. Be at least 16 years old; 2. Possess current First Aid and CPR certification or Emergency Medical Technician (EMT); <ol style="list-style-type: none"> a. The First Aid and CPR training must include a hands-on, in-person component. b. At minimum, employees must participate in an in-person skills session that will require them to show that they are able to perform CPR and First Aid skills. c. Written materials may be used online and at the employee's own pace.; 3. Pass a criminal background investigation and any other required background checks and credentials verifications as provided in Appendix C-2; 4. Unlicensed direct support professional staff who administer medication or perform delegable nursing tasks as part of this Waiver service must be certified by the Maryland Board of Nursing as Medication Technicians, except if the participant and their medication administration or nursing tasks qualifies for exemption from nursing delegation pursuant to Code of Maryland Regulations 10.27.11; 5. Possess a valid driver's license, if the operation of a vehicle is necessary to provide services; 6. Have automobile insurance for all automobiles that are owned, leased, and/or hired and used in the provision of services; 7. Satisfactorily completeComplete required orientation and training designated by the DDA; 8. Satisfactorily completeComplete necessary pre/in-service training based on the Person-Centered Plan; 9. Have 3 professional references which attest to the provider's ability to deliver the support/service in compliance with the Department's policy values in Annotated Code of Maryland, Health General, Title 7; 10. Demonstrate financial integrity through Internal Revenue Services, Maryland Department of Health, and Medicaid Exclusion List checks;

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11. Complete and sign any agreements required by the Maryland Department of Health (MDH) or DDA; and

12. Have a signed Medicaid Provider Agreement.

Individuals providing services for participants self-directing their services must meet the standards 1 through 6 noted above. They do not need to complete the DDA provider application. Individuals must submit forms and documentation as required by the Financial Management and Counseling Services agency. Financial Management and Counseling Services must ensure the individual or entity performing the service meets the qualifications.

Participants in self-directing services, as the employer, may require additional reasonable staffing requirements based on their preferences and level of needs.

Provider Type:

Camp

License (specify)

Certificate (specify)

Other Standard (specify)

Camp must meet the following standards:

1. Complete the DDA provider application and be certified based on compliance with meeting the following standards:

~~A. Be properly organized as a Maryland corporation or surrounding states, if operating as a foreign corporation, be properly registered to do business in Maryland;~~

~~B. A minimum of 5 years demonstrated experience and capacity providing quality developmental disability similar services;~~

~~C. Have a governing body that is legally responsible for overseeing the management and operation of all programs conducted by the licensee, including ensuring that each aspect of the agency's programs operates in compliance with all local, State, and federal requirements, applicable laws, and regulations;~~

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~~D. Except for currently DDA approved camps, demonstrate the capability to provide or arrange for the provision services required by submitting, at a minimum, the following documents with the application:~~

~~(1) A program service plan that details the camp's service delivery model;~~

~~(2) A summary of the applicant's demonstrated experience;~~

~~A. (3) State certification and licenses as a camp including overnight and youth camps as per Code of Maryland Regulations 10.16.06, unless otherwise approved by the DDA; and~~

~~(4) Prior licensing reports issued within the previous 5 years from any in-State or out-of-State entity associated with the applicant, including deficiency reports and compliance records.~~

~~E. If a currently approved camp, produce, upon written request from the DDA, the documents required under D;~~

~~F. Be in good standing with the Internal Revenue Service and State Department of Assessments and Taxation MDAT;~~

~~G. Have Workers' Compensation Insurance;~~

~~H. Have Commercial General Liability Insurance;~~

~~I. Required criminal background checks, Medicaid Exclusion List, and child protective clearances as provided in Appendix C-2-a and per DDA policy;~~

~~J. Require staff certifications, licenses, and/or trainings as required to perform services;~~

~~K. Complete required orientation and training;~~

~~L. Comply with the DDA standards related to provider qualifications; and~~

~~B. M. Complete and sign any agreements required by the Maryland Department of Health (MDH) or DDA;~~

~~C. N. Have a signed Medicaid Provider Agreement;~~

~~O. Have documentation that all vehicles used in the provision of services have automobile insurance; and~~

~~D. P. Submit a provider renewal application at least 60 days before expiration of its existing approval as per DDA policy.~~

~~2. Out of state camps may be approved by DDA based on state licensure requirements.~~

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Provider Type:
Licensed Community Residential Services Provider
License (specify)
Licensed Community Residential Services Provider
Certificate (specify)
Other Standard (specify)
<p>Agencies must meet the following standards:</p> <ol style="list-style-type: none"> 1. Complete the MDH DDA provider application and be certified based on compliance with meeting all of the following standards: <ol style="list-style-type: none"> A. Be properly organized as a Maryland business entity corporation, or, if operating as a foreign corporation, be properly registered to do business in Maryland; B. A minimum of 5 years demonstrated experience and capacity providing quality similar respite care or personal care assistance services; C. Have a governing body that is legally responsible for overseeing the management and operation of all programs conducted by the licensee including ensuring that each aspect of the agency's programs operates in compliance with all local, State, and federal requirements, applicable laws, and regulations; D. Except for currently DDA licensed or certified Day Habilitation providers; Demonstrate the capability to provide or arrange for the provision of Respite Care Services required by submitting, at a minimum, the following documents with the application: <ol style="list-style-type: none"> (1) A program service plan that details the agency's agencies service delivery model; (2) A business plan that clearly demonstrates the ability of the agency to provide Respite Care Services; (3) A written quality assurance plan to be approved by the DDA; (4) A summary of the applicant's demonstrated experience in the field of developmental disabilities; and (5) Prior licensing reports issued within the previous 10 years from any in-State or out-of-State entity associated with the applicant, including deficiency reports and compliance records.

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- E. If currently licensed or certified, produce, upon written request from the DDA, the documents required under D;
- F. Be licensed by the Office of Health Care Quality;
- G. Be in good standing with the Internal Revenue Service and ~~State Department of Assessments and TaxationMDAT~~;
- H. Have Workers' Compensation Insurance;
- I. Have Commercial General Liability Insurance;
- J. Submit results from required criminal background checks, Medicaid Exclusion List, and child protective clearances as provided in Appendix C-2-a~~and per DDA policy~~;
- K. Submit documentation of staff certifications, licenses, and/or trainings as required to perform services;
- L. ~~Satisfactorily completeComplete~~ required orientation and training;
- M. Comply with the DDA standards related to provider qualifications; and
- N. Complete and sign any agreements required by the Maryland Department of Health (MDH) or DDA.
- O. Have a signed Medicaid Provider Agreement;
- P. Have documentation that all vehicles used in the provision of services have automobile insurance;
- Q. Submit a provider renewal application at least 60 days before expiration of its existing approval~~as per DDA policy~~. ~~The renewal license is good for up to a 3 year period~~; and
- R. Respite Care Services provided in a provider owned and operated residential site must be licensed.

~~The DDA Deputy Secretary may waive the requirements noted above if an agency is licensed or certified by another State agency or accredited by a national accreditation agency, such as Council on Quality Leadership or Commission on Accreditation of Rehabilitation Facilities for similar services for individuals with developmental disabilities, and be in good standing with the Internal Revenue Service and State Department of Assessments and TaxationMDAT.~~

Staff working for or contracted with the agency as well as volunteers utilized in providing any direct support services or spend any time alone with a participant must meet the following minimum standards:

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1. Be at least 16 years old;
2. Possess current First Aid and CPR certification **or Emergency Medical Technician (EMT)**;
 - a. The **First Aid and CPR** training must include a hands-on, in-person component.
 - b. At minimum, employees must participate in an in-person skills session that will require them to show that they are able to perform CPR and First Aid skills.
 - c. Written materials may be used online and at the employee's own pace.;
3. Training by participant/family on participant-specific information (including preferences, positive behavior supports, when needed, and disability-specific information);
4. **Training on additional**~~Additional~~ requirements based on the participant's preferences and level of needs;
5. Pass a criminal background investigation and any other required background checks and credentials verifications as provided in Appendix C-2-;
6. **Satisfactorily complete**~~Complete~~ necessary pre/in-service training based on the Person-Centered Plan;
7. **Satisfactorily complete**~~Complete~~ required orientation and training designated by the DDA;
8. Unlicensed direct support professional staff who administer medication or perform delegable nursing tasks as part of this Waiver service must be certified by the Maryland Board of Nursing as Medication Technicians, except if the participant and their medication administration or nursing tasks qualifies for exemption from nursing delegation pursuant to Code of Maryland Regulations 10.27.11;
9. Possess a valid driver's license, if the operation of a vehicle is necessary to provide services; and
10. Have automobile insurance for all automobiles that are owned, leased, and/or hired and used in the provision of services.

Provider Type:

Respite Care Provider

License (specify)

Certificate (specify)

Respite Care Services

Other Standard (specify)
<p>Agencies must meet the following standards:</p> <ol style="list-style-type: none"> 1. Complete the MDH DDA provider application and be certified based on compliance with meeting all of the following standards: <ol style="list-style-type: none"> A. Be properly organized as a Maryland business entity corporation, or, if operating as a foreign corporation, be properly registered to do business in Maryland; B. A minimum of 5 years demonstrated experience and capacity providing quality similar respite care or personal care assistance services; C. Have a governing body that is legally responsible for overseeing the management and operation of all programs conducted by the licensee including ensuring that each aspect of the agency's programs operates in compliance with all local, State, and federal requirements applicable laws, and regulations; D. Except for currently DDA-licensed or certified Day Habilitation providers, Demonstrate the capability to provide or arrange for the provision of Respite Care Services required by submitting, at a minimum, the following documents with the application: <ol style="list-style-type: none"> (1) A program service plan that details the agency's agencies service delivery model; (2) A business plan that clearly demonstrates the ability of the agency to provide Respite Care Services; (3) A written quality assurance plan to be approved by the DDA; (4) A summary of the applicant's demonstrated experience in the field of developmental disabilities; and (5) Prior licensing reports issued within the previous 10 years from any in-State or out-of-State entity associated with the applicant, including deficiency reports and compliance records. E. If currently licensed or certified, produce, upon written request from the DDA, the documents required under D; F. Be in good standing with the Internal Revenue Service and State Department of Assessments and Taxation MDAT; G. Have Workers' Compensation Insurance; H. Have Commercial General Liability Insurance;

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I. Submit results from required criminal background checks, Medicaid Exclusion List, and child protective clearances as provided in Appendix C-2-a ~~and per DDA policy~~;

J. Submit documentation of staff certifications, licenses, and/or trainings as required to perform services;

K. ~~Satisfactorily complete~~ **Complete** required orientation and training;

L. Comply with the DDA standards related to provider qualifications; and

M. Complete and sign any agreements required by the MDH or DDA.

2. Have a signed Medicaid Provider Agreement;

3. Have documentation that all vehicles used in the provision of services have automobile insurance; and

4. Submit a provider renewal application at least 60 days before expiration of its existing approval ~~as per DDA policy~~. **The renewal license is good for up to a 3 year period.**

~~The DDA Deputy Secretary may waive the requirements noted above if an agency is licensed or certified by another State agency or accredited by a national accreditation agency, such as Council on Quality Leadership or Commission on Accreditation of Rehabilitation Facilities for similar services for individuals with developmental disabilities, and be in good standing with the Internal Revenue Service and State Department of Assessments and TaxationMDAT.~~

Staff working for or contracted with the agency as well as volunteers utilized in providing any direct support services or that spend any time alone with a participant must meet the following minimum standards:

1. Be at least 16 years old;

2. Possess current First Aid and CPR certification **or Emergency Medical Technician (EMT)**;

a. The **First Aid and CPR** training must include a hands-on, in-person component.

b. At minimum, employees must participate in an in-person skills session that will require them to show that they are able to perform CPR and First Aid skills.

c. Written materials may be used online and at the employee's own pace.;

3. Training by participant/family on participant-specific information (including preferences, positive behavior supports, when needed, and disability-specific information);

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4. Pass a criminal background investigation and any other required background checks and credentials verifications as provided in Appendix C-2-a;
5. Complete necessary pre/in-service training based on the Person-Centered Plan;
6. ~~Satisfactorily complete~~**Complete** required orientation and training designated by the DDA;
7. Unlicensed direct support professional staff who administer medication or perform delegable nursing tasks as part of this Waiver service must be certified by the Maryland Board of Nursing as Medication Technicians, except if the participant and their medication administration or nursing tasks qualifies for exemption from nursing delegation pursuant to Code of Maryland Regulations 10.27.11;
8. Possess a valid driver's license, if the operation of a vehicle is necessary to provide services; and
9. Have automobile insurance for all automobiles that are owned, leased, and/or hired and used in the provision of services.

~~Camp requirements including:~~

- ~~1. Be a certified Organized Health Care Delivery System provider;~~
- ~~2. Have State certification and licenses as a camp, including overnight and youth camps as per Code of Maryland Regulations 10.16.06, unless otherwise approved by the DDA; and~~
- ~~3. Be a DDA approved camp.~~

Provider Type:

Organized Health Care Delivery System Provider

License (specify)

Certificate (specify)

Other Standard (specify)

Agencies must meet the following standards:

1. Be ~~certified or licensed~~ **approved** by the DDA to provide at least one Medicaid Waiver service; and

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2. Complete the DDA provider application to be an Organized Health Care Delivery System provider.

Organized Health Care Delivery System providers shall verify the licenses, credentials, and experience of all professionals with whom they contract or employs and have a copy of the same available upon request.

Staff working for or contracted with the agency as well as volunteers utilized in providing any direct support services or spend any time alone with a participant must meet the following minimum standards:

1. Be at least 16 years old;
2. Possess current First Aid and CPR certification **or Emergency Medical Technician (EMT)**;
 - a. The **First Aid and** CPR training must include a hands-on, in-person component.
 - b. At minimum, employees must participate in an in-person skills session that will require them to show that they are able to perform CPR and First Aid skills.
 - c. Written materials may be used online and at the employee's own pace.
3. Training by participant/family on participant-specific information (including preferences, positive behavior supports, when needed, and disability-specific information);
4. Pass a criminal background investigation and any other required background checks and credentials verifications as provided in Appendix C-2-a;
5. ~~Satisfactorily complete~~**Complete** necessary pre/in-service training based on the Person-Centered Plan;
6. ~~Satisfactorily complete~~**Complete** required orientation and training designated by the DDA;
7. Unlicensed direct support professional staff who administer medication or perform delegable nursing tasks as part of this Waiver service must be certified by the Maryland Board of Nursing as Medication Technicians, except if the participant and their medication administration or nursing tasks qualifies for exemption from nursing delegation pursuant to Code of Maryland Regulations 10.27.11;
8. Possess a valid driver's license, if the operation of a vehicle is necessary to provide services; and
9. Have automobile insurance for all automobiles that are owned, leased, and/or hired and used in the provision of services.
10. Out of state camps may be approved by DDA based on state licensure requirements.

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~~Camp requirements including:~~

- ~~1. Be a certified Organized Health Care Delivery System provider;~~
- ~~2. Have State certification and licenses as a camp, including overnight and youth camps as per COMA Code of Maryland Regulations 10.16.06, unless otherwise approved by the DDA; and~~
- ~~3. Be a DDA approved camp.~~

Verification of Provider Qualifications

Provider Type:

Respite Care Professional

Entity Responsible for Verification:

1. ~~MDH DDA~~ for approval of Respite Care Supports ~~Professional~~.
2. Financial Management and Counseling Services providers, as described in Appendix E, for participants self-directing services.

Frequency of Verification

1. ~~MDH DDA~~ – Initially and at least every 3 years.
2. Financial Management and Counseling Services provider – Prior to service delivery and continuing thereafter.

Provider Type:

Camp

Entity Responsible for Verification:

1. ~~MDH DDA~~ for approval of camps.
2. Financial Management and Counseling Services providers, as described in Appendix E, for participants self-directing services.

Frequency of Verification

1. ~~MDH DDA~~ – Initially and at least every 3 years.
2. Financial Management and Counseling Services provider – Prior to service delivery and continuing thereafter.

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Provider Type:
Licensed Community Residential Services Provider
Entity Responsible for Verification:
<ol style="list-style-type: none"> 1. MDH DDA for approval of provider license and licensed site. 2. Licensed Community Residential Services Provider for verification of direct support staff and camps. 3. Financial Management and Counseling Services providers, as described in Appendix E, for participants self-directing services.
Frequency of Verification
<ol style="list-style-type: none"> 1. MDH DDA – Initially and at least every 3 years. 2. Licensed Community Residential Services Provider – Prior to service delivery and continuing thereafter.
Provider Type:
Respite Care Provider
Entity Responsible for Verification:
<ol style="list-style-type: none"> 1. MDH DDA for approval of provider. 2. Respite Care Services Provider for verification of direct support staff and camps. 3. Financial Management and Counseling Services providers, as described in Appendix E, for participants self-directing services.
Frequency of Verification
<ol style="list-style-type: none"> 1. MDH DDA – Initially and at least every 3 years. 2. MDH DDA - Certified Respite Care Services Provider – prior to service delivery and continuing thereafter. 3. Financial Management and Counseling Services to service delivery and continuing thereafter.
Provider Type:
Organized Health Care Delivery System Provider

Respite Care Services

Entity Responsible for Verification:
<ol style="list-style-type: none">1. MDH DDA for approval of Organized Health Care Delivery System.2. Organized Health Care Delivery System providers for verification of entities and individuals they contract or employ.3. Financial Management and Counseling Services providers, as described in Appendix E, for participants self-directing services.
Frequency of Verification
<ol style="list-style-type: none">1. Organized Health Care Delivery System – Initially and at least every 3 years.2. Organized Health Care Delivery System providers – Prior to service delivery and continuing thereafter.3. Financial Management and Counseling Services – Prior to service delivery and continuing thereafter.