

## IDAHO

### Overview

Adult Day Care (ADC) in Idaho is regulated for persons served by the Commission on Aging Senior Services Program under the Rules Governing Senior Services Programs. The rules state that ADC programs must operate under guidelines established by the Idaho Commission on Aging that are in accordance with the standards developed by the National Council on Aging, National Institute on Adult Day Care (now known as the National Adult Day Services Association). The ADC service is funded under Title III-B and III-E.

Adult Day Health (ADH) services are provided under two Medicaid 1915(c) waivers: the Aged and Disabled Waiver and the Adult Developmental Disabilities (DD) Waiver. Waiver services providers are governed by the Department of Health and Welfare, Division of Medicaid and must meet standards described in the Medicaid provider manual as well as additional terms to the Medicaid provider agreement.<sup>1</sup>

The building standards in the additional terms agreement apply to freestanding structures that provide only ADH services. Such facilities must meet the building and health standards identified in the Idaho Code relating to DD agencies. In addition to freestanding ADH facilities and DD agencies, ADH services may also be provided in certified family homes and licensed residential and assisted living facilities. All entities must meet their certification or licensure requirements when providing ADH services.

The sources of information in this profile include the Idaho administrative code rules for governing the Senior Services program and Medicaid enhanced plan benefits, the Idaho Medicaid provider manual, and the Idaho Medicaid provider agreement's additional terms for ADC.

### Definitions

**Adult day care** is a comprehensive program that provides individually planned care, supervision, social interaction, and supportive services for frail older persons in a protective group setting other than the participants' homes during any part of a day, but for less than 24 hours. It is designed to meet the needs of eligible participants whose functional or cognitive abilities have deteriorated and is intended to provide relief and support for family caregivers.

---

<sup>1</sup> The additional terms agreement is being updated in 2014 to reflect current language in the rules of the Idaho Administrative Procedure Act (IDAPA), which was updated in 2013.

**Adult day health** is a supervised, structured service generally furnished 4 or more hours per day on a regularly scheduled basis, for 1 or more days per week. It is provided outside the participant's home in a non-institutional, community-based setting, and encompasses health services, social services, recreation, supervision for safety, and assistance with activities of daily living (ADLs) needed to ensure the optimal functioning of the participant.

Aged and Disabled Waiver program participants may receive adult health services for any part of a day but not more than 12 hours in any 24-hour period.

## Parameters for Who Can Be Served

**Adult Day Care.** Persons eligible to receive services must be 60 years of age or older. Functionally or cognitively impaired adults under age 60 living in the home of a caregiver who is age 60 or older are exempt from this requirement. In those instances the caregiver is considered to be the participant. Providers may serve individuals who have physical or cognitive disabilities affecting ADLs or instrumental ADLs, and are capable of being transported, of benefiting from socialization and structured and supervised group-oriented programs, and of self-care with supervision or cueing.

**Adult Day Health.** Centers may accept waiver program participants who do not have: (1) pressure ulcers, open wounds, or draining wounds that cannot be contained; or (2) who require continuous nursing assessment and intervention. Providers may accept participants only when they are able to provide the type or level of service the participant requires and have an adequate number of skilled and/or licensed staff on site to deliver the service. No participant may be enrolled whose physical, emotional, or social needs are not compatible with the other participants in the facility.

## Inspection and Monitoring

**Adult Day Care.** The Idaho Commission on Aging contracts with six Area Agencies on Aging (AAAs) to provide ADC services. The AAAs subcontract with local providers and monitor their performance.

**Adult Day Health.** Idaho Medicaid conducts a review of all provider agencies every 2 years to ensure rule compliance and best practices. Agencies are contacted at least 30 days prior to a review. Providers conduct a quality assurance program consisting of: (1) sufficient training sessions to ensure staff qualifications and competence, and participant satisfaction; and (2) an annual competency review. Providers must implement a quality improvement plan for any deficiencies noted.

## Required and Optional Services

All ADC and ADH programs furnish socialization, social activities, nutrition services, and supervision to ensure safety. They also monitor participants' health and functioning at a basic level to determine if the program can continue to meet participants' health and functional needs. The table below lists additional required and optional services.

Required and Optional Services	Adult Day Care		Adult Day Health	
	Required	Optional	Required	Optional
ADL Assistance	X		X	
Health Education and Counseling				
Health Monitoring				
Medication Administration				X
Nursing Services			X	
Physical Therapy, Occupational Therapy, or Speech Therapy				
Skilled Nursing Services				
Social Services				
Transportation				X

## Medication Provisions

**Adult Day Care.** Service workers must not administer medications. A service worker may remind a participant to take medications, assist with removing the cap from a multi-dose or bubble pack container, and observe the participant taking medications.

**Adult Day Health.** Medications may be administered only by licensed nurses. Any staff member who assists with medications must be licensed to do so or must successfully complete a Board of Nursing-approved course on assistance with medication, as the delegate of a licensed nurse.

## Staffing Requirements

### Adult Day Care

**Type of Staff.** Staff must be adequate in numbers and skill to provide essential services.

If the *site administrator* is responsible for more than one site or has duties not directly related to ADC, a *program manager* must be designated for each site. If the ADC program is provided in other than a freestanding facility, such as in a nursing facility or assisted living facility, the rules governing that facility must also be followed.

**Staffing Ratios.** At least two responsible persons must be at the center at all times when participants are in attendance. One must be a paid staff member. The staff-to-participant ratio must be increased appropriately if the number of participants in day

care increases or if the degree of severity of participants' functional or cognitive impairment increases. Staff persons counted in the staff-to-participant ratio must be those who spend the major part of their work time in direct service to participants. Volunteers may be included in the staff ratio only when they conform to the same standards and requirements as paid staff.

### ***Adult Day Health***

***Type of Staff.*** The provider must employ sufficient personnel to ensure the safe and proper care of the participants.

***Staffing Ratios.*** The staff-to-participant ratio must be a minimum of one staff to six participants. As the number of participants and the severity of participant functional impairments increases, the staff-to-participant ratio must be adjusted accordingly. Programs serving a high percentage of participants who are severely impaired must have a staff-to-participant ratio of 1:4.

## **Training Requirements**

### ***Adult Day Care***

All service workers must receive an employee orientation from the provider before performing any services. Orientation must include the purpose and philosophy of the services, review of pertinent skills, program regulations, policies and procedures, proper conduct in relating to participants, and handling of confidential and emergency situations involving a participant.

Service workers must complete cardiovascular pulmonary resuscitation (CPR) training within 3 months of hire and must maintain certification thereafter. Providers must annually provide service workers with a minimum of 10 hours training, including CPR, for the purpose of upgrading their skills and knowledge. Providers must ensure that service workers who assist participants with bathing or hair washing receive specific training in performing these services prior to being assigned to a participant.

### ***Adult Day Health***

Providers must meet, either by formal training or demonstrated competency, the training requirements contained in the Aged and Disabled Waiver program's provider training matrix and the standards for direct care staff and allowable tasks or activities. The provider must ensure that staff have sufficient training to maintain qualifications and competence. At a minimum, providers must have training in infection control, CPR, and first-aid.

## Location of Licensing, Certification, or Other Requirements

*Idaho Administrative Code*, IDAPA 15, Office of the Governor: Rules Governing Senior Services Program. Idaho Commission on Aging. [Various dates, latest is April 6, 2005]  
<http://adminrules.idaho.gov/rules/current/15/0101.pdf>

*Idaho Administrative Code*, IDAPA 16: Medicaid Enhanced Plan Benefits. Department of Health and Welfare. [Various dates, latest is April 4, 2013]  
<http://adminrules.idaho.gov/rules/current/16/0310.pdf>

*Idaho Medicaid Provider Manual 2014*. Idaho Department of Health and Welfare.  
<http://www.qualishealth.org/sites/default/files/ID-Medicaid-Provider-Manual.pdf>

*State of Idaho Medicaid Provider Agreement Additional Terms--Adult Day Care* [February 1, 2012]  
<https://www.idmedicaid.com/Provider%20Enrollment%20Paper%20Maintenance%20Forms/Adult%20Day%20Care%20Agreement%20DDA%20Additional%20Terms.pdf>

## Information Sources

Pam Catt-Oliason  
Program Specialist  
Idaho Commission on Aging

Mark Wasserman  
Alternative Care Coordinator  
Bureau of Long Term Care  
Division of Medicaid  
Department of Health and Welfare

# REGULATORY REVIEW OF ADULT DAY SERVICES: FINAL REPORT, 2014 EDITION

## Files Available for This Report

### FULL REPORT

Executive Summary <http://aspe.hhs.gov/daltcp/reports/2014/adultday14es.cfm>  
HTML <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.cfm>  
PDF <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.pdf>

### SEPARATE STATE PROFILES

[**NOTE:** These profiles are available in the full HTML and PDF versions, as well as each state available as a separate PDF listed below.]

Alabama	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AL.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AL.pdf</a>
Alaska	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AK.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AK.pdf</a>
Arizona	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AZ.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AZ.pdf</a>
Arkansas	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AR.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AR.pdf</a>
California	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CA.pdf</a>
Colorado	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CO.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CO.pdf</a>
Connecticut	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CT.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CT.pdf</a>
Delaware	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DE.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DE.pdf</a>
District of Columbia	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DC.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DC.pdf</a>
Florida	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-FL.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-FL.pdf</a>
Georgia	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-GA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-GA.pdf</a>
Hawaii	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-HI.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-HI.pdf</a>
Idaho	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ID.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ID.pdf</a>
Illinois	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IL.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IL.pdf</a>
Indiana	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IN.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IN.pdf</a>
Iowa	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IA.pdf</a>
Kansas	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KS.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KS.pdf</a>
Kentucky	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KY.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KY.pdf</a>
Louisiana	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-LA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-LA.pdf</a>

Maine	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ME.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ME.pdf</a>
Maryland	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MD.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MD.pdf</a>
Massachusetts	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MA.pdf</a>
Michigan	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MI.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MI.pdf</a>
Minnesota	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MN.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MN.pdf</a>
Mississippi	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MS.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MS.pdf</a>
Missouri	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MO.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MO.pdf</a>
Montana	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MT.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MT.pdf</a>
Nebraska	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NE.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NE.pdf</a>
Nevada	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NV.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NV.pdf</a>
New Hampshire	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NH.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NH.pdf</a>
New Jersey	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NJ.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NJ.pdf</a>
New Mexico	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NM.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NM.pdf</a>
New York	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NY.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NY.pdf</a>
North Carolina	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NC.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NC.pdf</a>
North Dakota	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ND.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ND.pdf</a>
Ohio	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OH.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OH.pdf</a>
Oklahoma	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OK.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OK.pdf</a>
Oregon	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OR.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OR.pdf</a>
Pennsylvania	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-PA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-PA.pdf</a>
Rhode Island	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-RI.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-RI.pdf</a>
South Carolina	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SC.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SC.pdf</a>
South Dakota	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SD.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SD.pdf</a>
Tennessee	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TN.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TN.pdf</a>
Texas	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TX.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TX.pdf</a>
Utah	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-UT.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-UT.pdf</a>
Vermont	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VT.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VT.pdf</a>
Virginia	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VA.pdf</a>
Washington	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WA.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WA.pdf</a>
West Virginia	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WV.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WV.pdf</a>
Wisconsin	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WI.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WI.pdf</a>
Wyoming	<a href="http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WY.pdf">http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WY.pdf</a>