

WEST VIRGINIA

Overview			
<p>The state licenses medical adult day care centers as a special type of ambulatory health care center. The rule regarding these centers does not apply to 3-8-hour behavioral health service programs (e.g., serving persons with mental retardation) carried out by a behavioral health center unless the behavioral health center program routinely offers medical treatment services in addition to those behavioral health services within the scope of the rule. This rule also does not apply to adult day care programs that are primarily social and recreational in nature, but that may occasionally offer medical screening clinics. Those programs are neither licensed nor certified. Medicaid Aged & Disabled Waiver providers of medical adult day care must be licensed according to the licensing requirements described in this profile.</p>			
Licensure and Certification Requirements			
Licensure Only <input checked="" type="checkbox"/>	Certification Only <input type="checkbox"/>	Both Required <input type="checkbox"/>	Other <input type="checkbox"/>
Definitions			
<p>Medical adult day care center is an ambulatory health care facility that provides an organized day program of therapeutic, social, and health maintenance and restorative services, and whose general goal is to provide an alternative to 24-hour long term institutional care to elderly or disabled adults who are in need of such services by virtue of physical and mental impairment.</p>			
Parameters for Who Can Be Served			
<p>Providers may serve only individuals who can benefit from the medical adult day care program. Providers may discharge participants if they: (1) demonstrate sufficient improvement to enable them to live more independently; (2) require specialized institutional care, due to illness; or (3) develop behavioral problems that may endanger or seriously disrupt other participants or staff members.</p>			
Inspection and Monitoring			
Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	
<p>An unannounced on-site inspection of every center regulated pursuant to these rules shall be conducted no less frequently than once every year. The director of the Department of Health has the authority to conduct either announced or unannounced visits, and may provide for such other inspections or investigations as he or she may deem necessary.</p>			

Required and Optional Services		
	Medical Adult Day Care	
	Required	Optional
Activities of Daily Living (ADL) Assistance	X	
Health Education and Counseling		
Health Monitoring/Health-Related Services	X	
Medication Administration	X	
Nursing Services	X	
Physical Therapy, Occupational Therapy, or Speech Therapy	X	
Skilled Nursing Services		
Social Services	X	
Transportation	X	
Case management, maintenance therapy services, nutrition services, activities and recreation, and emergency services are also required services not listed in the services exhibit above.		
Provisions Regarding Medications		
Participants shall be allowed to self-administer their own medication provided their attending physician has certified, in writing, that they are capable of doing so. Medications and treatments that are not self-administered shall be administered only by a nurse or physician. The same person who prepared the doses for administration shall administer drugs to those participants who do not self-administer their medication. All participants receiving services in the center have a right to be free from unnecessary or excessive medication. Medication shall not be used for the convenience of the staff, as a substitute for a program, or in quantities that interfere with the participant's treatment program.		
Provisions for Groups with Special Needs		
Dementia <input type="checkbox"/>	Mental Retardation/ Developmental Disabilities <input type="checkbox"/>	Other <input type="checkbox"/>
Staffing Requirements		
<p>Type of staff. The center shall meet the staffing requirements specified below:</p> <ol style="list-style-type: none"> 1. The center shall employ a <i>center director</i> or designate one of the professional staff members as the center director. The center director shall be a qualified health professional, such as a nursing home administrator, registered nurse, social worker, physician, licensed physical, occupational or speech therapist. 2. The center shall designate one of the professional staff members as <i>assistant center director</i> to act in the absence of the center director. 3. The center shall have available a <i>staff physician</i>. 4. The center shall employ a <i>nurse</i> who shall be on the site daily for all hours the center is open. If the center's daily enrollment is 18 or more participants, the center shall employ a registered nurse who will be on site daily for 8 hours a day. If the daily enrollment is fewer than 18 participants, a registered nurse and a licensed practical nurse shall each be on site daily for a minimum of 4 hours. 5. The center shall employ an <i>activities director</i> who shall be on site daily for a minimum of 10 scheduled hours per week. 6. The center shall employ a <i>social worker</i> who shall be on site a minimum of 1 hour each week for each two participants. 		

7. A part-time or full-time *dietitian* shall be hired or contracted with to provide dietary consultation and supervision of the dietary program provided to the participants.
8. Professional and nonprofessional volunteers may be recruited to assist the center staff, to enrich the program, and to provide meaningful work experience to individuals from the community.

The *center director* shall be a qualified health professional, such as a nursing home administrator; registered nurse; social worker; physician; or licensed physical, occupational, or speech therapist. In centers with 60 or more participants, the director may not serve a dual function.

Staffing ratios. There shall be a minimum of two professional staff members for each medical adult day care center, with the *registered nurse* occupying one of the two positions. Additional personnel shall be added to maintain a ratio of one full-time staff member involved in direct services to participants for each six participants. The medical director, dietician, consulting therapists, food services supervisor, driver, secretaries, cooks, accountants, and other staff members who do not have direct contact with participants shall not be considered in calculating this one-to-six ratio. Aides may be used to meet the one-to-six ratio. Without compromising the one-to-six ratio, functions may be combined within one person (i.e., the center director may be a social worker or nurse).

Training Requirements

The center shall develop and implement policies and procedures for the provision of staff development that update and expand skills. Staff shall be provided with training when their assignments change to include new duties and skills. The center shall provide orientation and training to all new employees and volunteers. The orientation and training shall include at least the following: (1) special problems of the elderly and disabled; (2) participant rights; (3) the use of emergency procedures; (4) infection control; (5) safety and accident prevention, such as wheelchair safety and transfer techniques; (6) feeding techniques; and (7) ADL assistance.

Relevant Medicaid Contracting Requirements for Adult Day Services Providers

Medical adult day care services may be offered to clients of the Aged & Disabled Waiver Program. They are designed to be an alternative to institutional services by providing participants with routine health and maintenance care combined with daily structured and supportive activities in a congregate daytime setting.

Location of Licensing, Certification, or Other Requirements

1. <http://www.wvdhhr.org/ohflac/Rules/64-02.pdf> (PDF version)
<http://www.wvdhhr.org/ohflac/Rules/64-02%20Page.htm> (HTML version)
2. http://www.wvdhhr.org/bms/smanuals/Common_Chapters/bms_manuals_Chapter_500_ADWaiver.pdf

Citations

1. *Licensure of Medical Adult Day Care Centers* (Series 2 of Title 64--Legislative Rules). Office of Health Facility Licensure and Certification, Department of Health and Human Resources, §64-2-1 through 64-2-19. [Effective date July 12, 1985]
2. *Chapter 500-Covered Services, Limitations, and Exclusions for Aged and Disabled Waiver Services (530 Medical Adult Day Care)*. Medicaid Provider Manual. Bureau for Medical Services. [November 1, 2003]

REGULATORY REVIEW OF ADULT DAY SERVICES: Final Report

PDF Files Available for This Report

Cover, Table of Contents, Acknowledgments and Introduction

<http://aspe.hhs.gov/daltcp/reports/adultday.pdf>

SECTION 1. Overview of Adult Day Services Regulations

<http://aspe.hhs.gov/daltcp/reports/adultday1.pdf>

SECTION 2. State Regulatory Profiles

<http://aspe.hhs.gov/daltcp/reports/adultday2.pdf>

Each state can also be viewed separately at:

Alabama <http://aspe.hhs.gov/daltcp/reports/adultdayAL.pdf>

Alaska <http://aspe.hhs.gov/daltcp/reports/adultdayAK.pdf>

Arizona <http://aspe.hhs.gov/daltcp/reports/adultdayAZ.pdf>

Arkansas <http://aspe.hhs.gov/daltcp/reports/adultdayAR.pdf>

California <http://aspe.hhs.gov/daltcp/reports/adultdayCA.pdf>

Colorado <http://aspe.hhs.gov/daltcp/reports/adultdayCO.pdf>

Connecticut <http://aspe.hhs.gov/daltcp/reports/adultdayCT.pdf>

Delaware <http://aspe.hhs.gov/daltcp/reports/adultdayDE.pdf>

District of Columbia <http://aspe.hhs.gov/daltcp/reports/adultdayDC.pdf>

Florida <http://aspe.hhs.gov/daltcp/reports/adultdayFL.pdf>

Georgia <http://aspe.hhs.gov/daltcp/reports/adultdayGA.pdf>

Hawaii <http://aspe.hhs.gov/daltcp/reports/adultdayHI.pdf>

Idaho <http://aspe.hhs.gov/daltcp/reports/adultdayID.pdf>

Illinois <http://aspe.hhs.gov/daltcp/reports/adultdayIL.pdf>

Indiana <http://aspe.hhs.gov/daltcp/reports/adultdayIN.pdf>

Iowa <http://aspe.hhs.gov/daltcp/reports/adultdayIA.pdf>

Kansas <http://aspe.hhs.gov/daltcp/reports/adultdayKS.pdf>

Kentucky <http://aspe.hhs.gov/daltcp/reports/adultdayKY.pdf>

Louisiana <http://aspe.hhs.gov/daltcp/reports/adultdayLA.pdf>

Maine <http://aspe.hhs.gov/daltcp/reports/adultdayME.pdf>

Maryland <http://aspe.hhs.gov/daltcp/reports/adultdayMD.pdf>

Massachusetts <http://aspe.hhs.gov/daltcp/reports/adultdayMA.pdf>
Michigan <http://aspe.hhs.gov/daltcp/reports/adultdayMI.pdf>
Minnesota <http://aspe.hhs.gov/daltcp/reports/adultdayMN.pdf>
Mississippi <http://aspe.hhs.gov/daltcp/reports/adultdayMS.pdf>
Missouri <http://aspe.hhs.gov/daltcp/reports/adultdayMO.pdf>
Montana <http://aspe.hhs.gov/daltcp/reports/adultdayMT.pdf>

Nebraska <http://aspe.hhs.gov/daltcp/reports/adultdayNE.pdf>
New Hampshire <http://aspe.hhs.gov/daltcp/reports/adultdayNH.pdf>
New Jersey <http://aspe.hhs.gov/daltcp/reports/adultdayNJ.pdf>
New Mexico <http://aspe.hhs.gov/daltcp/reports/adultdayNM.pdf>
New York <http://aspe.hhs.gov/daltcp/reports/adultdayNY.pdf>
Nevada <http://aspe.hhs.gov/daltcp/reports/adultdayNV.pdf>
North Carolina <http://aspe.hhs.gov/daltcp/reports/adultdayNC.pdf>
North Dakota <http://aspe.hhs.gov/daltcp/reports/adultdayND.pdf>

Ohio <http://aspe.hhs.gov/daltcp/reports/adultdayOH.pdf>
Oklahoma <http://aspe.hhs.gov/daltcp/reports/adultdayOK.pdf>
Oregon <http://aspe.hhs.gov/daltcp/reports/adultdayOR.pdf>

Pennsylvania <http://aspe.hhs.gov/daltcp/reports/adultdayPA.pdf>

Rhode Island <http://aspe.hhs.gov/daltcp/reports/adultdayRI.pdf>

South Carolina <http://aspe.hhs.gov/daltcp/reports/adultdaySC.pdf>
South Dakota <http://aspe.hhs.gov/daltcp/reports/adultdaySD.pdf>

Tennessee <http://aspe.hhs.gov/daltcp/reports/adultdayTN.pdf>
Texas <http://aspe.hhs.gov/daltcp/reports/adultdayTX.pdf>

Utah <http://aspe.hhs.gov/daltcp/reports/adultdayUT.pdf>

Vermont <http://aspe.hhs.gov/daltcp/reports/adultdayVT.pdf>
Virginia <http://aspe.hhs.gov/daltcp/reports/adultdayVA.pdf>

Washington <http://aspe.hhs.gov/daltcp/reports/adultdayWA.pdf>
West Virginia <http://aspe.hhs.gov/daltcp/reports/adultdayWV.pdf>
Wisconsin <http://aspe.hhs.gov/daltcp/reports/adultdayWI.pdf>
Wyoming <http://aspe.hhs.gov/daltcp/reports/adultdayWY.pdf>