| **ID/DD Waiver Home and Community Supports**  **Service Agreement** |
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| **Name:** | |  | **Medicaid Number:** | | |  |
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| 1. | Home and Community Supports (HCS) will meet the support needs identified in the Plan of Services and Supports and Activity Support Plan. Only the amount of Home and Community Supports authorized in the Plan of Services and Supports will be provided. If a change in the amount is needed, the Support Coordinator must be contacted. | | | | | |
| 2. | HCS can be provided in the home and/or in the community and either with or without a parent/legal representative present, depending upon identified support needs. | | | | | |
| 3. | HCS staff cannot be responsible for caring for others who may be in the home. HCS staff is only responsible for the person who is enrolled in the ID/DD Waiver. Also, the HCS staff person is not responsible for caring for pets. | | | | | |
| 4. | HCS cannot be provided at a staff person’s home. | | | | | |
| 5. | If a scheduled HCS visit must be canceled (e.g. because of a doctor’s appointment, illness, going out of town, etc.), the provider must be notified as soon in advance of the cancellation as possible. Three (3) cancellations for which no notice is given will result in a review of the Plan of Services and Supports to determine if Home and Community Supports are still necessary and appropriate. | | | | | |
| 6. | HCS may be terminated according to the provisions in the ID/DD Waiver Enrollment Agreement. | | | | | |
| 7. | If a decision is made to terminate HCS, notification will be sent as soon as possible. The Support Coordinator will assist in locating other service options, if available. There are established procedures for filing an appeal of the decision. The services will not change until the outcome of the appeal is determined. If termination of services is due to the environment or persons in the environment posing a risk to the HCS staff person, services might continue pending the outcome of the appeal. | | | | | |
| 8. | Should any problems arise regarding the provision of HCS, the Support Coordinator is to be notified immediately. | | | | | |
| 9. | HCS cannot be provided on an overnight basis outside of the legal residence. | | | | | |
| 10. | HCS staff cannot provide medical treatment of any sort, as defined in the Mississippi Nurse Practice Act Rules and Regulations. | | | | | |
| 11. | Home and Community Supports staff cannot accompany a minor child on a medical visit without the parent/legal representative. | | | | | |
| 12. | HCS staff cannot provide services to someone who is in a hospital or any other facility being reimbursed by Medicaid, Medicare or private insurance. | | | | | |
| 13. | Home and Community Supports cannot be provided in a school setting. | | | | | |
| 14. | Home and Community Supports providers cannot do personal errands or have interactions with their family and friends during the provision of services. | | | | | |
| **The above information has been reviewed and the circumstances under which Home and Community Supports can be provided are understood.** | | | | | | |
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| **Person/Legal Representative Signature** | | | |  | **Agency Representative Signature/ Credentials** | |
|  | | | |  |  | |
| **Date** | | | | | **Date** | |