



**State Plan Change Required?** No

*If yes:* What section #(s) \_\_\_\_\_

Submission Date: \_\_\_\_\_

Transmittal Number (TN): \_\_\_\_\_

Supersedes Transmittal Number: \_\_\_\_\_

**Waiver Amendment Required?** Yes

**Routing Information:**

Internal Route Date: 09/08/08

Field Route Date: 09/08/08

KHPA Route Date: 09/08/08

KHPA Approval Date: n/a

Internal Comments Due Date: 09/26/08

Field Comments Due Date: 09/26/08

KHPA Comments Due Date: 09/26/08

**KDOA Approval Date:** 09/30/08

**Training Required?**

KDOA Central Office: Yes

AAA Staff: Yes

Customer Education: Yes

KDOA Field Staff: Yes

Contracted Case Managers: Yes

---

**Rationale for Change:** Senior Companion Service has been added as a waiver service as a result of funding provided for this purpose during the 2008 legislative session.

---

**Final Policy:** This policy change is effective July 1, 2008, with implementation effective October 1, 2008. The Customer Choice form has been updated and is attached for distribution.

---

Approved

Disapproved

---

Secretary of Aging

---

Date

**FS 2008-05**  
**SENIOR COMPANION SERVICE**  
**Section 3.5 Home and Community Based Services/Frail Elderly**

SECTION	PAGE	STAKEHOLDER COMMENT	KDOA RESPONSE	
1	3.5.8.H	25	Please review page 25 of 39 on the draft sent out recently regarding Senior Companion Services. Under 3.5.8H Cont. it discusses the customer's representative, including the POA or guardian / conservator making decisions with regard to self-directing Companion services. It makes no mention of the individual making this decision independently. Does this suggest that only those with a "representative" can qualify for Companion Services? Maybe we are reading this wrong, but it should likely be specific if this is not the intention.	The language has been changed to clarify that Senior Companion may be provider directed or self-directed.
2	3.5.8	12	Add sleep cycle as a self directed service -right now this say there are two services that may be self-directed. Proposed: Page 12 (3.5.8) Currently, there are three services that may be self-directed. They are Attendant Care Services, Sleep Cycle Support and Senior Companion Service. All references to the term worker (instead of caregiver) shall mean the attendant or companion, as applicable.	1) KDOA is taking this recommendation under consideration. 2) We will use the term "worker" and have revised the FSM accordingly.
3	3.5.8	25-26	Clarify that it would be supplementation for clients or their families to pay for Companion Services, since this is now a waived service? We have some assisted livings that require families to pay privately for a companion for clients with high care needs. It may be appropriate for the client to receive Senior Companion Service however, because the assisted living facility cannot also bill attendant care for the same time period under HCBS, this supplementation may be an issue for our area.	Please refer to FSM Section 3.5.7's reference to K.A.R. 30-5-308 which stipulates that "An organization, agency, family, consumer, or other individual shall not be allowed to pay for services that are on the plan of care." As case managers become aware of these supplemental income situations, they need to educate the provider of the regulatory requirements.
4	3.5.8	25-26	Clarify that Senior Companion Service may be provided by agency or self-directed by a client's authorized representative or durable power of attorney. Right now, it only talks about self-direct.	The language has been changed to clarify that Senior Companion may be provider-directed or self-directed.
5	n/a	n/a	For training: Discuss eligibility for "cognitively impaired adult". If clients cognition cannot be assessed because of advanced dementia or language issues and are 9's, it's the assessor judgment, assessment information gathered from client, family, etc. that informs appropriate use of service. Also, a doctor's statement can be requested, especially if the service is being requested but there is disagreement about medical necessity.	KDOA will cover in training.
6	n/a	n/a	For training: Discuss this is routine service, not respite for caregiver. A spouse or caregiver working M-F 8-5 is a routine need for Companion Service. A spouse needing a day or two off each week to relieve themselves would be respite and not served under this program.	KDOA will cover in training.
7	n/a	n/a	For training: Discuss that clients in assisted living cannot have this service provided by assisted living staff, but could have an outside provider come into the facility to do 1:1 care, however, no other attendant care may be billed by facility at the same time.	KDOA will cover in training.
8	3.5.8.H	25	Confirm that clients needing this service would not be able to self-direct it themselves as they would lack capacity to do so due to cognition. Their authorized representative or DPOA could chose to self-direct someone else or use agency directed care for the service.	See response to #1.