

## ARTICLE 15. STANDARDS FOR CERTIFICATION OF HOME AND COMMUNITY-BASED SERVICE (HCBS) PROVIDERS

*Editor's Note: Article 15, consisting of Sections R6-6-1501 and R6-6-1502, was repealed under an exemption from the provisions of A.R.S. Title 41, Chapter 6, pursuant to Laws 1992, Ch. 355, § 9. A new Article 15 was subsequently adopted under the regular rulemaking process.*

### **R6-6-1501. Definitions**

The following definitions apply in this Article:

1. "AHCCCS provider type" means the descriptive category of service types assigned to a provider by AHCCCS during the registration process for individuals or agencies providing services to ALTCS clients.
2. "Applicant" means an agency or individual that has applied to the Division to become certified or to renew a certificate as an HCBS service provider.
3. "Certified instructor" means an individual who has a current certificate to provide instruction for CPR, First Aid, or client intervention techniques.
4. "Client intervention techniques" means methods which provide an individual with defensive skills for dealing with aggressive behaviors and is designed to reduce the chance of physical injury and property destruction and to prevent reinforcement of those aggressive behaviors.
5. "Compliance audit" means an examination of service provider records and interviews which the Division conducts to assess compliance with HCBS certification.
6. "Corrective action plan" means a specific activity prescribed by the Division which directs the service provider to remedy violations of HCBS certification requirements within a specific period of time.
7. "Direct services" means services provided specifically for the benefit of an individual client.
8. "Direct care" means those services provided to a client which result in attention to personal needs and supervision of the client.
9. "HCBS" or "Home and Community-based Services" means one or more of the following services provided to clients:
  - a. Attendant Care,
  - b. Day Treatment and Training for Children or Adults,
  - c. Habilitation,
  - d. Home Health Aide,
  - e. Home Health Nurse,
  - f. Hospice Care,
  - g. Housekeeping-Chore/Homemaker,
  - h. Non-Emergency Transportation,
  - i. Occupational Therapy,
  - j. Personal Care,
  - k. Physical Therapy,
  - l. Respiratory Therapy,
  - m. Respite services,
  - n. Speech/Hearing Therapy,
  - o. Supported Employment,
  - p. Other comparable services as approved by the AHCCCS Director.
10. "HCBS certificate" means the document the Division issues to a service provider or applicant as evidence the service provider has met the Home and Community-based Service standards in this Article.
11. "HCBS certification" means the process by which the Division ensures that an applicant or service provider meets the standards in this Article for Home and Community-based Services.
12. "Housekeeping" means providing assistance in the performance of activities related to routine household maintenance at a client's residence but does not include any direct care for the client.
13. "Immediate relative" means natural parent, stepparent, adoptive parent, natural child, natural sibling, adoptive child, adoptive sibling, stepchild, stepbrother, stepsister, spouse, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law.
14. "Medicare certified" means having received Medicare certification through the Arizona Department of Health Services.

### **Historical Note**

Adopted effective May 12, 1982 (Supp. 82-3). Section R6-6-1501 repealed effective June 7, 1993, under an exemption from A.R.S. Title 41, Chapter 6 (Supp. 93-2). New Section adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

### **R6-6-1502. Applicability**

This Article applies to an individual or agency that provides or wishes to provide Home and Community-based Services to clients.

### **Historical Note**

Adopted effective May 12, 1982 (Supp. 82-3). Section R6-6-1501 repealed effective June 7, 1993, under an exemption from A.R.S. Title 41, Chapter 6 (Supp. 93-2). New Section adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1503. Requirement for an HCBS Certificate**

- A. No individual shall provide Home and Community-based Services to clients unless the Division has certified the individual in accordance with this Article and, if providing services through ALTCS, registered the applicant with AHCCCS.
- B. The Division shall register the applicant with AHCCCS, if required, as part of HCBS certification.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1504. Application for an Initial HCBS Certificate**

- A. To become certified to provide a Home and Community-based Service to a client, an applicant shall file an application for an HCBS certificate with the Division and meet the requirements of this Article.
- B. The applicant shall complete application for an initial HCBS certificate on a form prescribed by the Division. The form shall contain the following information:
  - 1. Name,
  - 2. Home and business address,
  - 3. Specific services for which application is made,
  - 4. Phone number,
  - 5. Social security number or tax identification number,
  - 6. Self declaration regarding criminal history of offenses listed in R6-6-1514(B),
  - 7. Description of work experience, and
  - 8. Description of educational background.
- C. The applicant shall provide a copy of any other license or certificate required by this Article to provide a specific service.
- D. Except as provided by R6-6-1521, the applicant shall provide forms for three letters of reference to individuals who are not the applicant's family members and who have personal knowledge about the applicant's employment history, education, or character. The letters will be on forms provided by the Division. The individual giving the reference shall send the completed reference form to the Division.
- E. The Division shall be in receipt of a completed application and three letters of reference before considering certification of the applicant.
- F. The applicant shall provide the Division with written documentation signed by the person performing the inspection of the completion of the requirements of R6-6-1505.
- G. Within 60 days of receipt of an application, the Division shall notify the applicant of any missing documents or information. The Division shall allow 30 days from the date of notification to the applicant for submission of the remaining documents or information and, if not received at that time, may close the record.
- H. The Division shall conduct background checks with Child Protective Services and Adult Protective Services on applicants when information in the application indicates a past history of child or elder abuse. The Division shall utilize the background check information when determining whether to certify an applicant.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1504.01. Time-Frame for Granting or Denying an HCBS Certificate**

For the purpose of A.R.S. § 41-1073, the Division establishes the following HCBS certificate time-frames:

- 1. Administrative completeness review time-frame:
  - a. For an initial certificate, 60 days;
  - b. For a renewal certificate, 25 days; and
  - c. For an amended certificate, 25 days.
- 2. Substantive review time-frame:
  - a. For an initial certificate, 60 days;
  - b. For a renewal certificate, 5 days; and
  - c. For an amended certificate, 5 days.
- 3. Overall time-frame:
  - a. For an initial certificate, 120 days;
  - b. For a renewal certificate, 30 days; and
  - c. For an amended certificate, 30 days.

**Historical Note**

Adopted effective February 1, 1998 (Supp. 98-1).

**R6-6-1504.02. Administrative Completeness and Substantive Review Process**

- A. The Division shall send the applicant a written notice within the administrative completeness review time-frame indicating that the application package is either complete or incomplete.

- B. If the application package is incomplete, the Division shall list the missing information in the notice and ask the applicant to supply the missing information within 30 days from the date of notice. If the applicant fails to do so, the Division may close the file.
- C. An applicant whose file has been closed and who later wishes to become certified may reapply to the Division. The administrative completeness time-frame starts over when the Division receives the written request to reapply.
- D. When the application is complete, the Division shall complete a substantive review of the applicant's qualification. The Division shall:
  - 1. Review the application form and all required documents to ensure compliance with this Article,
  - 2. Conduct CPS/APS background checks, and
  - 3. Verify previous licensure or certification.
- E. If an HCBS certificate is denied, the Division shall send a notice to the applicant and include the following information:
  - 1. The reason for the denial with citation to supporting statutes or rules,
  - 2. The applicant's right to appeal the denial, and
  - 3. The time periods for appealing the denial.
- F. An applicant shall submit an HCBS certificate application package to DES/DDD, P.O. Box 6123, Site Code 791A, Phoenix, Arizona 85005-6123, Attention: HCBS Certification Unit.

**Historical Note**

Adopted effective February 1, 1998 (Supp. 98-1).

**R6-6-1504.03. Contents of a Complete Application Package - Initial Certificate**

An initial application package is complete when the Division has all of the following information:

- 1. From the applicant, a completed application form as prescribed in R6-6-1504 (B); and
- 2. From the applicant, the following documents listed on the application form:
  - a. A completed AHCCCS provider participation agreement form as prescribed in R6-6-1503 which contains the following information:
    - i. The applicant's name, social security number or tax identification number, and business address;
    - ii. Terms of the agreement between the provider and AHCCCS; and
    - iii. Signature of the applicant.
  - b. A completed declaration of criminal history as prescribed in R6-6-1504(B)(6) on a Division form which contains the following information:
    - i. Name of the applicant,
    - ii. Social security number,
    - iii. Date of birth,
    - iv. Applicant address,
    - v. A declaration of whether or not the applicant has committed any of the crimes listed in R6-6-1514, and
    - vi. Dated signature.
  - c. Documentation showing that fingerprints have been taken as prescribed in R6-6-1506;
  - d. Documentation showing current CPR training as prescribed in R6-6-1520;
  - e. Documentation showing current First Aid training as prescribed in R6-6-1520;
  - f. Documentation showing Article 9 review as prescribed in R6-6-1520;
  - g. Documentation showing that the applicant has a current driver's license, vehicle registration, and liability insurance as prescribed in R6-6-1520(D);
  - h. Copies of any applicable professional license or certification as prescribed in R6-6-1504(C); and
  - i. AHCCCS provider registration form as prescribed in R6-6-1503 which contains the following information:
    - i. Name, social security number, and Federal Employer Identification (FEI) number of the applicant;
    - ii. Physical and mailing address of the applicant;
    - iii. Telephone number and telefacsimile number, if applicable for the applicant;
    - iv. Categories of service provided;
    - v. Changes from the prior year, if necessary;
    - vi. AHCCCS provider identification number;
    - vii. Districts and counties served;
    - viii. Place and date of birth; and
    - ix. Dated signature.
- 3. From sources other than the applicant, the documents listed on the application form as follows:
  - a. Three letters of reference as prescribed in R6-6-1504(D), and
  - b. Documentation showing that the applicant's home or office has passed:
    - i. A fire inspection as prescribed in R6-6-1505, and
    - ii. A health and safety inspection as prescribed in R6-6-1505.

**Historical Note**

Adopted effective February 1, 1998 (Supp. 98-1).

**R6-6-1504.04. Contents of a Complete Application Package - Renewal Certificate**

A renewal application is complete when the Division has all the following information:

1. From the applicant, the following items:
  - a. AHCCCS provider registration form;
  - b. Documentation of current CPR and First Aid training, current driver's license, and applicable professional licenses and certifications, if prior documentation has expired;
  - c. A completed declaration of criminal history every three years since the date of initial certification; and
  - d. Documentation that fingerprints have been taken at three-year intervals.
2. From sources other than the applicant, documentation that the applicant's home or office has passed a fire inspection every two years since the date of initial certification.

**Historical Note**

Adopted effective February 1, 1998 (Supp. 98-1).

**R6-6-1504.05. Contents of a Complete Request for an Amended Certificate**

A request for an amended HCBS certificate is complete when the Division has the following information:

1. AHCCCS provider registration form, and
2. Documentation to support the requested change.

**Historical Note**

Adopted effective February 1, 1998 (Supp. 98-1).

**R6-6-1505. Setting Requirements for HCBS Service Providers**

- A. Except as provided by R6-6-1521, the applicant shall cooperate with an initial health and safety inspection by ensuring the residence or facility which the applicant owns, rents, or leases, and in which the services are to be provided, if other than the client's home is fully accessible to an inspector approved by the Division. The health and safety inspection focuses on such areas as general appearance and cleanliness of the residence or facility, heating and cooling, ventilation, lighting, safety hazards, swimming pools, yard, and the storage of toxic materials and medicines.
- B. Except as provided by R6-6-1521, the applicant shall have a fire department or individual approved by the Division perform a fire inspection at the time of initial application and every two years after, on each residence or facility which the applicant owns, rents, or leases, and in which services are to be provided, unless the services are provided in the client's home. The applicant shall maintain the results of the fire inspection on file.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1506. Fingerprinting Requirements**

- A. Except as otherwise provided by R6-6-1521, each applicant shall be fingerprinted by:
  1. Filing a request with the Department on a form prescribed by the Department and paying the applicable fees; or
  2. Filing a request with an agency authorized by state or federal statute to obtain fingerprints, paying the applicable fees, and having the fingerprints forwarded to the Department of Economic Security's Office of Special Investigations, located in Phoenix, Arizona.
- B. Except as otherwise provided by R6-6-1521, the following individuals shall be fingerprinted for a criminal record check at the time of initial application or initial employment, and every three years from the date of clearance, thereafter:
  1. All applicants, including individuals and agency administrators;
  2. Direct-care staff;
  3. Supervisors of direct-care staff; and
  4. All individuals age 18 and above who reside in the home when services are to be delivered in the applicant or service provider's home.
- C. Each applicant who has been fingerprinted shall maintain a file which includes:
  1. A clearance letter from the Department dated within six months of the date the fingerprints were taken; or
  2. A copy of a letter sent by the service provider to the Division stating that the clearance letter was not received within the required six months.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1507. Application for an HCBS Certificate Renewal**

- A. The Division shall send a notice of renewal to the service provider 60 days prior to the expiration of the HCBS certificate.
- B. Not more than 30 days and not less than 10 days prior to the expiration date of a current HCBS certificate, an applicant shall apply to the Division for renewal on a form provided and prescribed by the Division. The form shall contain the following information:
  1. Name;
  2. Home and business address;
  3. Social security number or tax identification number;
  4. AHCCCS registration number;
  5. Phone number; and

6. Any services which the applicant wishes to:
  - a. Provide in addition to services currently on the HCBS certificate; or
  - b. Delete from services currently on the HCBS certificate.
- C. The applicant shall include a copy of current licenses and training as required by this Article.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1508. Issuing an HCBS Certificate**

- A. The Division shall issue a new or renewal HCBS certificate to the applicant when it determines that:
  1. The applicant meets the fingerprinting requirements provided by R6-6-1506;
  2. Each applicant and the direct-care staff of a contracted agency possess any license, have completed any training, and have the professional experience required by this Article; and
  3. The applicant demonstrates the ability, knowledge, experience, and fitness through personal references and past history to provide these services.
- B. The HCBS certificate shall specify the services the applicant is certified to provide.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1509. Duration of an HCBS Certificate**

- A. An initial HCBS certificate is valid for one year from the date of issuance or a lesser period if so specified on the HCBS certificate.
- B. A renewal HCBS certificate is valid for one year from the date of issuance or a lesser period if so specified on the HCBS certificate.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4). Amended effective June 4, 1998 (Supp. 98-2).

**R6-6-1510. Amending an HCBS Certificate**

- A. A service provider shall request an amendment to the HCBS certificate when any of the following information or circumstances change:
  1. Name, address, or telephone number;
  2. Addition of a service to the Division's service contract;
  3. Deletion of a service to the Division's service contract;
  4. Change in the Tax ID#; or
  5. Change in AHCCCS provider type.
- B. The service provider shall file a request for amendment not more than 30 days after the change by sending a written request to the Division.
- C. The Division shall mail the service provider written notice of amendment approval or denial within 30 days of receipt of the written request.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1511. Maintenance of an HCBS Certificate**

During the term of the HCBS certificate, each service provider shall keep the following requirements current:

1. Fingerprinting as provided by R6-6-1506;
2. Licensure, training, and professional experience as required in this Article; and
3. Records, as provided by R6-6-1519.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1512. Compliance Audit of HCBS Service Providers**

- A. The Division shall conduct a compliance audit of each HCBS service provider's records at least every two years. The Division shall schedule with the service provider the record audit at least two business days in advance.
- B. The Division may conduct an unscheduled compliance audit as a result of a complaint or noncompliance issue.
- C. The individual or contracted agency shall cooperate with the compliance audit conducted by the Division by:
  1. Making available the following information to the Division:
    - a. Fingerprint clearance letters for each individual as provided by R6-6-1506(B);
    - b. Written documentation of completion of a current Cardiopulmonary Resuscitation (CPR) certificate for each individual service provider and direct-care staff as provided by R6-6-1520(A)(1)(b);
    - c. Written documentation of current First-aid training for each individual service provider and direct-care staff as provided by R6-6-1520(A)(1)(c);

- d. Written documentation that each individual service provider and direct-care staff has reviewed Article 9, except as provided by R6-6-1521;
  - e. Copies of three references for each direct-care staff as provided by R6-6-1504(D);
  - f. Written documentation showing that each individual service provider and direct-care staff has completed training in client intervention techniques as provided by R6-6-1520(C);
  - g. Written documentation showing that the individual providing service has received an orientation to the specific needs of each client served prior to the delivery of service, as provided by R6-6-1520(A)(1)(a);
  - h. A copy of a current valid driver's license, valid registration, and current liability insurance coverage as required by A.R.S. Title 28, Chapter 3, 4, and 7 for each individual providing transportation for a client;
  - i. Written documentation of any other training required by this Article; and
  - j. Written documentation of the date of hire for each direct-care staff of a contracted agency.
2. Allowing the Division to interview employees; and
  3. Participating in the compliance audit entrance and exit conferences with Division employees.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1513. Complaints**

- A. Any person who has a complaint about an HCBS service provider may register an oral or written complaint with the Division.
- B. If the complainant provides his or her name and address at the time the complaint is registered, the Division shall, within 30 days, send the complaining party notice that the complaint was received and of the action to be taken on the complaint.
- C. The Division shall investigate complaints about the HCBS service provider within 10 calendar days of the receipt of the complaint. The Division shall notify the service provider that an investigation is in progress and provide an opportunity for the service provider to relate any information known regarding the complaint. If the Division has reasonable cause to believe that imminent danger exists, the Division shall conduct the investigation immediately, report to the appropriate authorities, if applicable, and provide notice to the service provider that an investigation is in progress.
- D. The Division shall notify the service provider of the results of an investigation through a summary of the investigative findings conducted pursuant to this rule and any corrective action. The Division may release the summary investigative findings by request to the responsible person or client, unless prohibited by A.R.S. §§ 41-1959 and 36-568.01.
- E. Complaints are not considered a formal grievance. A grievance may be filed with the Division pursuant to R6-6-1801 et seq.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1514. Denial, Suspension, or Revocation of an HCBS Certificate**

- A. The Division may deny, suspend or revoke an HCBS certificate or an amendment to an HCBS certificate for any one or a combination of the following:
  1. An applicant or service provider refuses to cooperate in providing information as required in this Article; or
  2. An applicant or service provider violates applicable provisions of Articles 1, 9, 15, and 16.
- B. The Division may deny or revoke an HCBS certificate if an applicant, individual service provider, or agency administrator has been convicted of, pled no contest to, or is currently awaiting trial on any of the following criminal acts:
  1. Sexual abuse of a child or vulnerable adult,
  2. Incest,
  3. First- or second-degree murder,
  4. Kidnapping,
  5. Arson,
  6. Sexual assault,
  7. Sexual exploitation of a child or vulnerable adult,
  8. Commercial sexual exploitation of a child or vulnerable adult,
  9. Felony offenses within the previous 10 years involving the manufacture or distribution of marijuana or dangerous or narcotic drugs,
  10. Robbery,
  11. Child prostitution as defined in A.R.S. § 13-3206,
  12. Child abuse or abuse of a vulnerable adult,
  13. Sexual conduct with a child,
  14. Molestation of a child or vulnerable adult,
  15. Voluntary manslaughter, or
  16. Aggravated assault.
- C. Upon notification that an agency employee is found to have been convicted of, awaiting trial on, or pled no contest to any of the criminal acts listed in R6-6-1514(B), an agency shall immediately take the following actions:
  1. Remove the employee from direct contact with clients; and
  2. Notify the Division, unless the agency initially received notice from the Division.
- D. If an agency fails to comply with R6-6-1514(C), the Division may deny or revoke the agency HCBS certificate.

- E. Upon notification that an individual service provider has been convicted of, pled no contest to, or is currently awaiting trial on any of the criminal acts listed in R6-6-1514(B), the Division shall immediately take the following action to assure that the individual service provider has no direct contact with the client:
1. Prohibit the service provider from rendering services to the client,
  2. Notify the responsible person, and
  3. Prevent further authorization for service with the service provider.
- F. If the criminal records check pursuant to R6-6-1506(B) indicates that an individual service provider, agency administrator, a direct-care staff person or the supervisor of a direct-care staff person has been convicted of or found by a court to have committed, or is reasonably believed to have committed, the offenses listed in A.R.S. § 36-594, other than those listed in R6-6-1514(B), the Division shall consider the following factors when determining what action to take regarding HCBS certification:
1. The extent of the individual's criminal record;
  2. Length of time since the commission of the offense;
  3. Nature of the offense;
  4. Mitigating circumstances surrounding commission of the offense;
  5. The degree of the individual's participation in the offense;
  6. The extent of the individual's rehabilitation, including but not limited to:
    - a. Completion of all terms of probation, and
    - b. Payment of all restitution or compensation for the offense, and
    - c. Evidence of positive action to change criminal behavior such as completion of a drug treatment program or counseling,
    - d. References attesting to the individual's rehabilitation;
  7. The individual has the burden of providing evidence of mitigating factors listed in subsection (F).
- G. If the reason for denial, suspension, or revocation of a certificate involves a threat to the health, welfare, or safety of clients, the service provider shall not render services to a client.

#### **Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).  
Typographical correction made to subsection reference in R6-6-1514(F)(7) (Supp. 96-4).

#### **R6-6-1515. Corrective Action Plan**

- A. In lieu of revocation or suspension, the Division may require a service provider to implement a corrective action plan to correct HCBS certification deficiencies when:
1. Allowing the service provider to continue services is in the best interest of the clients; and
  2. The client's health, safety, or welfare will not be jeopardized.
- B. The following conditions may result in a request for corrective action:
1. Certificate in CPR or training in First Aid for an individual service provider or direct-care staff is not current;
  2. Written documentation of an orientation to the specific needs of each client is not available;
  3. Required training is not documented or not completed; or
  4. Fire inspection cannot be obtained within the time provided by R6-6-1505(B). The burden is on the service provider to document the inability to obtain a fire inspection.
- C. The Division shall notify the service provider in writing of each deficiency, the corrective action to be taken, and the deadlines for all corrective action.
- D. The service provider shall develop a corrective action plan and submit it to the Division.
- E. If the service provider does not provide the Division with written documentation showing the completion of corrective action by the deadlines in the notice of deficiency, the Division may revoke or suspend the HCBS certificate pursuant to R6-6-1514.
- F. The Division's decision to require a corrective action plan is not subject to administrative review pursuant to R6-6-1516.

#### **Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

#### **R6-6-1516. Right to Administrative Review**

- A. An applicant or service provider may request an administrative review pursuant to R6-6-1801 et seq. when the Division denies, suspends or revokes an HCBS certificate.
- B. The Division shall provide written notice at the time of the action to the applicant or service provider of the right to an administrative review.
- C. An appeal of any decision rendered in an administrative review shall be conducted in accordance with R6-6-2201 et seq., "Appeals and Hearings."
- D. An appeal of the decision of a hearing officer is conducted in accordance with A.R.S. § 41-1992.
- E. When a service provider timely appeals the decision to suspend or revoke an HCBS certificate, pursuant to R6-6-2201 et seq., revocation or suspension shall not become effective until the final administrative or judicial decision is rendered, except for suspensions made under A.R.S. § 41-1064(C).

#### **Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4). R6-6-1516(C) and (E) references to R6-6-2001 corrected to R6-6-2201 at request of the Department, Office File No. M10-461, filed December 6, 2010 (Supp. 10-1).

**R6-6-1517. Reporting Obligations of HCBS Service Providers**

- A. If the following types of incidents occur while a client is in the direct care of a service provider, the service provider shall immediately report to the Division:
  - 1. The death of a client;
  - 2. Alleged neglect or abuse of a client;
  - 3. An incident related to a client that involves law enforcement personnel, emergency services, emergency medical care, the media, or emergency medical techniques;
  - 4. Suicide attempts by a client; and
  - 5. Community complaints about a client.
- B. The service provider shall report a missing client to law enforcement officials and the Division as soon as the service provider determines that the client is missing.
- C. The service provider shall cooperate in any investigation by obtaining and providing any available information related to the incident to the Department or a law enforcement agency conducting the investigation.
- D. The report shall include at a minimum:
  - 1. The full name of the client,
  - 2. The name and phone number of the individual making the report, and
  - 3. A summary of the circumstances.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1518. Rights of Clients**

All service providers shall observe the rights of clients listed in A.R.S. § 36-551.01 and A.A.C. R6-6-102.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1519. Records**

- A. Each service provider shall maintain, as required in this Article, the applicable records listed in subsection (B). Each individual service provider shall maintain his or her own records and may do so by making arrangements with the Division to keep current records on file with the Division. Each agency service provider shall maintain these records for all agency employees as required by this Article.
- B. The records shall include the following items:
  - 1. Verification of fingerprints taken as provided by R6-6-1506, a copy of the clearance letter provided by R6-6-1506(C)(1) and the declaration regarding criminal history provided by R6-6-1504(B)(6);
  - 2. Written documentation of a current certificate for CPR and training in First Aid;
  - 3. Current license and any other certificate required by this Article;
  - 4. Written documentation that any training required in this Article has been completed;
  - 5. Proof that each employee is at least 18 years old;
  - 6. Reference letters for each direct-care staff and supervisor of direct-care staff of an agency;
  - 7. Written documentation that each service provider or direct-care staff has the experience required in this Article; and
  - 8. Copies of all other documents required by this Article.
- C. Each individual making a written entry into personnel or client records shall initial the entry. All entries shall be:
  - 1. Legible,
  - 2. Typed or written in ink,
  - 3. Dated, and
  - 4. Factual and correct.
- D. All training documentation shall be signed and dated by the trainer or individual designated to confirm training documentation.
- E. If required records are kept in more than one location, the service provider shall maintain a list indicating the location of the records.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1520. Basic Qualifications, Training, and Responsibilities**

- A. The following minimum requirements apply to all agency service providers:
  - 1. When a Home and Community-based Service is delivered, a direct-care staff who has completed the following required training and orientation shall be present, except as provided by R6-6-1521:
    - a. Orientation to the specific needs of the client being served;
    - b. CPR to meet the needs of the client and provided by a certified instructor;



- c. First aid, provided by a certified instructor unless the direct-care staff is a licensed registered nurse (R.N.), LPN, Certified Nursing Assistant, or a Physical, Occupational, Respiratory, or a Speech/Hearing therapist; and
  - d. Article 9 review.
2. A direct-care staff shall complete the following training before working alone with clients. The training shall occur no later than 90 calendar days from the date of hire with the agency, except as provided by R6-6-1521:
- a. CPR, provided by a certified instructor to meet the needs of the client served;
  - b. First aid, provided by a certified instructor, unless the direct-care staff is a licensed R.N., LPN, Certified Nursing Assistant, or a Physical, Occupational, Respiratory, or a Speech/Hearing therapist; and
  - c. Article 9 Review.
- B. All individual service providers providing direct care to clients shall complete the training and orientation listed in R6-6-1520(A)(1) prior to delivering services, except as provided by R6-6-1521:
- C. Each individual service provider and direct care staff of an agency shall complete client intervention techniques training if indicated in the ISPP or requested by the parent or guardian. CIT training shall be provided by a certified instructor.
- D. Each individual service provider and direct-care staff of an agency who transports clients shall maintain a current valid driver's license, valid registration, and current liability insurance coverage as required by A.R.S. Title 28, Chapters 3, 4, and 7.
- E. When providing housekeeping services, an individual or direct-care staff is exempt from the requirements of R6-6-1520.
- F. Each service provider and direct-care staff shall comply with Article 9, except R6-6-902(B) does not apply when services are provided in the client's home.

#### **Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

#### **R6-6-1521. Additional Qualifications for Attendant Care Services**

- A. An individual who wishes to provide Attendant Care services and is not an immediate relative of the client shall comply with this Article in order to obtain an HCBS certificate.
- B. The Division shall not compensate a spouse to provide Attendant Care services to the other spouse.
- C. Immediate relatives may provide Attendant Care services except as required in subsection (B), and a client's natural, adoptive, or stepparent may only provide Attendant Care services to a client who is 21 years of age or older.
- D. When a client is age 21 years or older and a parent provides Attendant Care services, the parent shall apply for an HCBS certificate and shall have:
  - 1. A current CPR certificate,
  - 2. Current training in First Aid, and
  - 3. Training in such other subjects as indicated in the ISPP.
- E. When a client's immediate relative other than the client's parent, provides the client with Attendant Care services, the immediate relative shall apply for an HCBS certificate and shall have:
  - 1. Current CPR certificate,
  - 2. Current training in First Aid,
  - 3. Written documentation of a health and safety inspection unless the services are provided in the client's home,
  - 4. Written documentation of a fire inspection unless the services are provided in the client's home, and
  - 5. Such other training as indicated in the ISPP.
- F. An immediate relative shall comply with the fingerprinting requirements in R6-6-1506 when:
  - 1. The client is under age 18, and
  - 2. The client is age 18 or older and does not live with the immediate relative providing Attendant Care services.

#### **Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

#### **R6-6-1522. Additional Qualifications for Day Treatment and Training Services**

- In addition to the general requirements in R6-6-1520, each individual who provides Day Treatment and Training services shall:
- 1. Have at least three months' experience in conducting group or individual activities related to specific developmental, rehabilitative, or recreational programs, or be supervised by an individual with such experience; and
  - 2. Have completed training, approved by the Division, in early childhood development when working with children who are under age 6.

#### **Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

#### **R6-6-1523. Additional Qualifications for Habilitation Services**

- In addition to the general requirements in R6-6-1520, each direct care staff of an agency and each individual service provider who provides Habilitation services shall:
- 1. Have at least three months' experience implementing and documenting performance in individual programs;
  - 2. Have both three months' experience in providing either respite or personal care, and have received training, approved by the Division, in implementing and documenting performance; or
  - 3. Perform three months of habilitation services under the direct supervision of an individual who is qualified to provide habilitation under subsection (1) or (2).

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1524. Additional Qualifications for Home Health Aide Services**

In addition to the general requirements in R6-6-1520, only a Medicare-certified home health agency shall perform Home Health Aide services.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1525. Additional Qualifications for Home Health Nurse Services**

- A. In this Section, "not available" means that the Division has made an effort to procure Home Health Nurse services through a Medicare-certified home health agency but one cannot be contracted with in the geographic location to provide these services.
- B. In addition to the general requirements in R6-6-1520, Home Health Nurse services shall be provided through:
1. A Medicare-certified home health agency; or
  2. A home health agency licensed by the state of Arizona which only allows an R.N. to provide nursing service, if a Medicare-certified home health agency is not available; or
  3. An independent R.N. currently licensed to practice professional nursing by the Arizona Board of Nursing, if a Medicare-certified home health agency is not available.
- C. An R.N. or an L.P.N. who is supervised by an R.N. shall provide home health nursing. Services may be provided through a Medicare-certified home health agency, a licensed home health agency, or by an independent nurse currently licensed to practice professional nursing by the Arizona Board of Nursing.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1526. Additional Qualifications for Hospice Services**

In addition to the general requirements in R6-6-1520, services shall be provided by a Hospice:

1. Licensed by the Arizona Department of Health Services, and
2. Certified by Medicare.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1527. Additional Qualifications for Housekeeping Services**

In addition to the general requirements in this Article, each individual who provides housekeeping services shall receive an orientation to the specific housekeeping needs of the client.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1528. Additional Qualification for Occupational Therapy Services**

In addition to the general requirements in R6-6-1520, each individual who provides Occupational Therapy services shall be currently licensed as an Occupational Therapist by the state of Arizona, Board of Occupational Therapy Examiners.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1529. Additional Qualifications for Personal Care Service**

In addition to the general requirements in R6-6-1520, each individual who provides Personal Care services shall:

1. Have at least three months experience in providing assistance to an individual to meet essential personal physical needs, such as showering, bathing, toileting, and eating; and
2. Complete training approved by the Division in home accident prevention.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1530. Additional Qualifications for Physical Therapy Services**

In addition to the general requirements in R6-6-1520, each individual who provides Physical Therapy services shall be currently licensed as a Physical Therapist by the state of Arizona, Board of Physical Therapy Examiners.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1531. Additional Qualifications for Respiratory Therapy Services**

In addition to the general requirements in R6-6-1520, each individual who provides Respiratory Therapy services shall be currently licensed as a Respiratory Therapist by the state of Arizona, Board of Respiratory Care Examiners.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1532. Additional Qualifications for Respite Services**

In addition to the general requirements in R6-6-1520, each individual who provides Respite services shall have at least three months' experience in providing assistance to an individual to meet essential personal physical needs as described in R6-6-1529.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).

**R6-6-1533. Additional Qualifications for Speech/Hearing Therapy Services**

In addition to the general requirements in R6-6-1520, each individual who provides Speech/Hearing Therapy services shall:

1. Have a Master's degree in speech-language pathology,
2. Have a Certificate of Clinical Competence from the American Speech and Hearing Association, and
3. Have a current membership card from the American Speech-Language Hearing Association.

**Historical Note**

Adopted effective February 1, 1996; filed in the Office of the Secretary of State December 26, 1995 (Supp. 95-4).