

MyNursePal Inc

Module 5 Types of Healthcare Settings

HOME AND COMMUNITY-BASED
SERVICE PROGRAMS

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Objectives

By the end of this module, learners will be able to:

1. Describe what HCBS is and identify key service types and care settings
2. Explain HCBS operations, staffing, and regulatory requirements
3. Apply HCBS technical and compliance requirements in software development

What is Home and Community- based Service Program

Home and Community-Based Services (HCBS) help people with disabilities, chronic illnesses, or developmental conditions live in their own homes or community settings instead of institutions or nursing homes. Such persons are referred to as members/consumers, depending on the program. The goal is independence, inclusion, and quality of life, enabling individuals to remain close to their families and communities while receiving the support they need.

These programs serve both adults and children, focusing on support rather than medical treatment.

Direct care staff, often referred to as DSPs (Direct Support Professionals), assist with daily activities, skill development, community engagement, and personal care.

Types of HCBS Programs

- Residential Habilitation
- Supported Living
- Group Home
- Host Home / Shared Living
- Independent Living Support (ILS)
- Adult Foster Care (AFC)
- Community Living Support (CLS)
- Intellectual & Developmental Disabilities (IDD) Residential
- Family Home Provider

Types of HCBS Programs for MyNursePal

1. Independent Supported Living (ISL) – Individualized supports that allow people with disabilities to live independently.
2. Residential Group Homes – Shared homes for individuals who need round-the-clock supervision and care.
3. Adult Day Services – Day programs focused on socialization and skill development.
4. Adult Foster Care (AFC) – Family-style care for adults who can't live alone safely.

HCBS Setting Types

Setting	Description
Individual Homes	Care is provided in the person's own home, often for older adults or people with physical disabilities.
Group Homes / Supported Living	Small shared residences (usually 3–6 people) where staff help with cooking, cleaning, transportation, and personal care.
Adult Day Programs	Daytime community centers offer activities, meals, and basic health support — clients return home at night.
Adult Foster Care (AFC)	Individuals live in a caregiver's private home and receive room and board, as well as assistance with their daily needs.

Reasons Why People Participate in HCBS Programs

- 1.To maintain independence
- 2.To avoid institutional care
- 3.To receive personalized, flexible support
- 4.To stay connected to family and community
- 5.For a better quality of life
- 6.For safety and stability at home

Who works in HCBS ?

- Direct Support Professionals (DSPs) – provide daily support and skill-building
- Program Coordinators / Case Managers – oversee care plans and services
- Nurses (RNs/LPNs) – provide limited medical oversight when required
- Behavior Specialists / Therapists – support behavior, social skills, or communication
- Administrators – manage compliance, billing, staffing, and operations
- Transportation Staff (in some programs) – assist with community access

What Services Are Provided in HCBS? (1/2)

- Personal care assistance (bathing, grooming, dressing)
- Activities of Daily Living (ADLs) support
- Homemaker services (cleaning, cooking, laundry)
- Skill development (social skills, communication, self-care, budgeting)
- Community integration support (outings, social activities, employment support)

What Services Are Provided in HCBS? (2/2)

- Respite care for families
- Medication reminders (not skilled nursing unless authorized)
- Behavior support services
- Transportation assistance
- Adult day services (activities, meals, supervision)
- 24/7 supervision in group homes or supported living

What Happens After HCBS?

Individuals may:

- Continue long-term with HCBS
- Transition to independent living
- Move to LTC if needs increase
- Enter home health for skilled medical episodes

HCBS is often a long-term support model.

Regulations Impacting HCBS

- HCBS is governed by the 21st Century Cures Act, requiring EVV for personal care and home health services funded by Medicaid.
- Documentation must show:
 - What service was provided
 - Who provided it
 - When and where it occurred
 - That it matched the client's approved service plan (ISP)
- Missing or inaccurate EVV data can cause payment denials or compliance penalties.

How it is Paid for

HCBS is primarily funded through Medicaid Waiver Programs, which enable states to utilize Medicaid funds for community-based care rather than institutional settings.

Each state designs its own waiver system, resulting in varying rules, payment methods, and documentation requirements.

Common Billing Models:

- Unit-based billing: Pay per 15-minute unit, per hour, or per task completed.
- Per-diem or monthly billing: Fixed daily or monthly payments for ongoing services (like residential care).
- Every visit or service must be verified using Electronic Visit Verification (EVV) — GPS and time-based proof that the service occurred.

**Please Review the full HCBS
Nomenclature with the Course
Handout!**

HCBS Nomenclature

HCBS Nomenclature Considerations

Because HCBS occurs across community locations, naming conventions vary widely.

Common identifiers include:

- Program type (ISL, Residential group home, AFC, Day Hab)
- Home or site code (e.g., "ISL-12")
- Geographic labels (e.g., "Region 3 South")
- House names (e.g., "Oak House," "Pine Residence")

Developer Insights

If You're Building HCBS Software
You will typically need modules for:

- Intake & eligibility
- Assessments
- Person-centered planning(ISP)
- Scheduling & EVV
- Documentation (progress notes, DSP notes)
- Incident management
- Case management
- Service authorizations
- Billing & claims
- Reporting dashboards

Developer Notes for HCBS

Systems must support:

- EVV (GPS + time verification)
- Flexible, customizable location labels
- Person-centered plan tracking
- Task/checklist workflows
- Incident/behavior documentation
- Role-based permissions for DSPs



Coming Up

Module 6

PAYMENT STRUCTURES IN HEALTHCARE

Stay tuned