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LTCR IDD/PI Quarterly Webinar

Date 10/31/2024

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Agenda

- HHSC Alerts
- FAQs
- Q&A



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HHSC Alerts

QSO-24-21-NH

CMS Emphasizes Compliance with Residents' Rights Requirement related to NF Residents' Right to Vote

The Centers for Medicare and Medicaid Services (CMS) published QSO-24-21-NH, informing state regulatory agencies and nursing home providers that a resident's rights, including the right to vote, must not be impeded in any way by the nursing home and its facility staff.

For more details and applicable regulatory requirements, read the [QSO-24-21-NH \(PDF\)](#).



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PL 2024-15

Temporary Initial Licensure for DAHS-Individualized Skills and Socialization Only Providers

During the 2022 implementation of the DAHS-Individualized Skills and Socialization Only license, HHSC issued a temporary initial license prior to conducting a health survey for this specific license to implement the program efficiently and effectively.

For applications received September 1, 2023, or later, the provider had to admit one to three individuals, have a successful health survey completed, and then be issued a license to provide services to capacity. This aligned the process with the current DAHS statutory requirements ([Chapter 103, Human Resources Code](#)).



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PL 2024-15

Beginning September 9th, HHSC resumed issuing temporary initial licenses to DAHS-Individualized Skills and Socialization Only providers prior to conducting a health survey.

For more information, read [Provider Letter 2024-15 Temporary Initial Licensure for DAHS-Individualized Skills and Socialization Only Providers](#), available, along with other relevant information and resources regarding Individualized Skills and Socialization, on the [Individualized Skills and Socialization Provider Portal](#).



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Revised PL 2023-01

New Regulatory Rules for Long-term Care Regulation (LTCR) Individualized Skills and Socialization Services

HHSC published revised Provider Letter 2023-01 on October 17th.

Revisions include:

- information regarding the issuance of temporary initial licenses to applicants for DAHS-Individualized Skills and Socialization Only licensure,
- clarification on capacity, LTCR surveys, Form 3613-A requirements, emergency response plan requirements, and
- updates to contact information for TULIP Support.



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FAQs

Individualized Skills and Socialization

Is HHSC no longer issuing temporary licenses for DAHS-Individualized Skills and Socialization Only?

HHSC recently published PL 2024-15. Effective 09/09/2024, HHSC resumed issuing temporary initial licenses to DAHS-Individualized Skills and Socialization Only providers prior to conducting a health survey. Traditional DAHS and DAHS with Individualized Skills and Socialization providers will continue to be required to have a successful Life Safety Code (LSC) survey, admit one to three individuals, and have a successful health survey prior to licensure.

If HCS and TxHmL providers contract with other day habilitation sites right now, do we need to make sure they are DAHS providers and if so, how?

Providers who subcontract with Individualized Skills and Socialization providers will need to check the DAHS Directory on the HHSC Website to ensure that the provider is licensed. The directory can be found on the DAHS provider page. (<https://www.hhs.texas.gov/providers/long-term-care-providers/day-activity-health-services-dahs>)



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Individualized Skills and Socialization

What are the requirements to be the head of Individualized Skills and Socialization?

The Individualized Skills and Socialization provider must employ an administrator who is responsible for the oversight of Individualized Skills and Socialization services, staff training, staff supervision, and record maintenance. The administrator may oversee multiple Individualized Skills and Socialization locations. The specific job title of this employee does not have to be "administrator;" however, the provider must employ someone who serves this function and have a policy regarding the delegation of responsibility in the administrator's absence.

Would the ANE allegation fall under the Individualized Skills and Socialization provider or the program providers responsibility?

If the ANE involves the Individualized Skills and Socialization provider, then the ANE allegation would be reported to HHSC Complaint and Incident Intake (CII). The ANE investigation will be conducted by the Individualized Skills and Socialization survey team. Anyone who suspects alleged ANE by an Individualized Skills and Socialization provider should report ANE to HHSC CII. If the allegation of ANE involves the HCS waiver program provider employee, then the HCS provider follows their program's regulations and reports ANE to DFPS.



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Individualized Skills and Socialization

A DAHS-Individualized Skills and Socialization provider received an email from a third-party entity requesting sensitive information about the Individualized Skills and Socialization provider. Does HHSC request sensitive information from a third-party entity?

HHSC is aware that an unauthorized third party impersonating the agency sent an e-mail requesting the verification/update of information related to Long-term Care licensure. This is not a legitimate request from HHSC. HHSC does not request verification or information update via third party e-mail addresses or websites. If you encounter an email like this, please do the following:

- ▶ Report the Email: Use your email reporting feature to report phishing attempts. In Outlook, for example: you can report phishing by clicking on "Junk" and then "Report Phishing."
- ▶ Delete the Email: After reporting, delete the email from your inbox.
- ▶ Change Your Password: If you suspect you may have been compromised, change your password immediately.
- ▶ Never respond to the email.



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HCS/TxHmL

What type of mattress cover must be used to comply with rule?

HCS rule only stipulates that a mattress cover is utilized. The type of mattress cover utilized may include, but is not limited to, a mattress protector or a fitted sheet; however, HCS rules do not specify the type of cover.

Compliance with 565.23(4) will be determined by the survey team while on-site and should there be a concern, the provider will be given the opportunity to correct the area of non-compliance.

Can an HH/CC inspection be conducted electronically such as via Telehealth or FaceTime?

An inspection cannot be conducted via webcam or video call. Per 26 TAC 565.25(b)(1), the provider must conduct an on-site inspection.



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Services

HCS/TxHmL

Are in-site inspections for HH/CC completed quarterly?

Yes. Before providing services to an individual in a residence in which host home/companion care is provided, and quarterly thereafter, the program provider must conduct an on-site inspection to ensure that, based on the individual's needs, the environment is safe, accessible, and suited for the individual's abilities and needs, and complies with applicable federal, state, and local regulations for the community in which the individual lives.

Read 26 TAC 565.25(b) for further information.

What are the requirements related to fire marshal inspections?

In accordance with 26 TAC 565.23(i), before providing residential support in a four-person residence, the residence must be inspected by the fire safety authority, the fire marshal, or, in some cases, HHSC. Rule requires that the provider correct any items cited by the local fire safety authority to the satisfaction of those authorities.

HHSC does not have authority over the local fire marshal decisions, and as such, HHSC recommends that providers contact the local fire marshal to determine what requirements are necessary to pass the inspection, prior to requesting the fire marshal inspection. Also, HHSC recommends providers familiarize themselves with the local fire safety authority's process and resources for resolving concerns and appealing determinations.



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HCS/TxHmL

Do HCS providers have to complete quarterly environmental assessments?

For host home/companion care, a program provider must comply with 26 TAC 565.25(b), before providing services to an individual in a residence in which host home/companion care is provided and quarterly thereafter, the program provider must conduct an on-site inspection to ensure that, based on the individual's needs, the environment is safe, accessible, and suited for the individual's abilities and needs, and complies with applicable federal, state, and local regulations for the community in which the individual lives.



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HCS/TxHmL

Can an individual or LAR request to have a camera/video device in their bedroom?

HHSC rule does not prohibit the use of a camera in a 3 or 4-person residence. The LAR/guardian may be allowed to place their own camera if it is only in the individual's private bedroom and only if the individual or guardian are the sole persons who have access to it. Otherwise, this would violate the individual's right to privacy as described in 26 TAC 565.5, Rights of Individuals. If the use of camera/video monitoring infringes on an individual's rights, this is considered a rights restriction and must be included in a behavior support plan as outlined in 26 TAC 565.29.

The guardian's camera must not include camera/video monitoring of any other individual in the residence, as this would infringe on the other individuals' rights.

Are there exceptions to the requirement of a door lock in the HH/CC bedroom?

HCS Certification Standard 26 TAC 565.23(b)(14)(A) states that the individual does not require a lock if the individual lives in a host home/companion care setting and the service provider is the LAR.

The legally authorized representative may include, but is not limited to, a parent, guardian, or managing conservator of a minor, or the guardian of an adult. Please see IL 2023-15 for more detailed information.



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HCS/TxHmL

Is the program provider required to have a land line phone or is a Voice Over Internet Protocol (VOIP)/broadband internet connection phone service acceptable?

There is no explicit language in the HCS rules requiring service providers or program providers to have a landline phone, however, the program provider is expected to have a phone for these reasons:

- ▶ to promote the right of the individual to make and receive phone calls,
- ▶ to provide access for the individual or staff member to call the DFPS Abuse Hotline toll-free telephone number, if they choose to use that medium of reporting, in a situation that abuse, neglect or exploitation occurs in the home,
- ▶ to be able to contact emergency services in the event of a medical emergency, or an accident, etc., to assure the health, safety and welfare of the individual. Specifically for nurses, they are required to be able to secure emergency medical services for an individual.

Read 26 TAC 565.5 and 565.13 for additional guidance.

Additionally, the program provider must keep in mind that if the internet-based service is disrupted so will the VOIP service.



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ICF

Where to order ICF ANE Posters?

- Providers can submit their request for posters to RSLTCR.RecordsMgmt@hhs.texas.gov.
- Providers may also go to HHSC Pinnacle Cart and register online at <http://hhsc.mypinnaclecart.com/> to order posters.
 - After registered, select HHSC, Regulatory Services LTC and choose the provider type for the posters you need.





General Reminder

Winter and Extreme Freezing Weather Preparedness

Review and update emergency plans for freezing temperatures and snow.

Emergency plans for extreme weather should include the provider's plan to address:

- Power loss.
- Water and food needs.
- Communication to families and staff.
- Staffing shortages.
- Sheltering in place and evacuation, as applicable.



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Winter and Extreme Freezing Weather Preparedness

- Providers must follow emergency preparedness rules and their own internal emergency preparedness policies and procedures.
- Facilities with generators should perform any maintenance or needed testing while the weather is mild. This will ensure the equipment functions in case of extreme cold or power loss.
- It's important to review building integrity and identify any areas that may need repair, reinforcement or weatherproofing. Multi-story buildings should review any other needed measures should evacuation be required and have a plan in place for how to move residents around or out of the building if there's a loss of power.
- Preparing for disaster is the most important step in protecting the Texans we serve and reducing the risk for loss of life.



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Q&A

Upcoming LTCR Webinars

IDD/PI Quarterly Webinar - January 2025

Send your ideas for our upcoming quarterly webinars.

LTCRPolicy@hhs.Texas.gov

Subject: LTCR IDD/PI Quarterly Webinar Idea



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Thank you!

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The webinar recording and slides will be available on the provider portals, typically within 5-7 business days.