HOUSE COMMITTEE AMENDMENTS

2021 Regular Session

Amendments proposed by House Committee on Health and Welfare to Original House Bill No. 204 by Representative Turner

1 AMENDMENT NO. 1

- 2 On page 2, at the end of line 25, insert "in certain circumstances"
- 3 AMENDMENT NO. 2
- 4 On page 2, delete lines 26 and 27 in their entirety and insert in lieu thereof the following:
- "In unforeseen situations when the scheduled direct service worker becomes unavailable or the service recipient is not comfortable with multiple people in his home, the department shall not limit the number of individual and family support service hours that a direct service worker may work in a twenty-four-hour period as long as the direct service worker is willing and able to work."
- 10 AMENDMENT NO. 3
- On page 3, delete lines 3 through 6 in their entirety and insert in lieu thereof the following:
- "A.(1) No program which furnishes home- and community-based services
 shall prohibit a family member from being a direct service worker for the service
 recipient in order to qualify for payment through the waiver or LT-PCS program.
- 15 (2) A paid family caregiver who lives in the same setting as a service
 16 recipient may provide no more than forty hours of Medicaid-funded services to the
 17 recipient in a work week. After forty hours have been provided in a work week, the
 18 caregiver may provide additional units of Medicaid-funded services in that work
 19 week only in one or both of the following circumstances:
 - (a) When authorized by the service recipient's support coordinator.
- 21 (b) Due to an emergency.
- 22 (3) Service recipients and their direct service workers shall take all measures 23 necessary to achieve compliance with the forty-hour limit established in this
- 24 Subsection."
- 25 AMENDMENT NO. 4
- On page 3, line 23, after "Case management" and before the period "." insert "and support
- 27 coordination"

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- 28 <u>AMENDMENT NO. 5</u>
- 29 On page 4, at the end of line 3, insert the following:
- 30 "The department shall share with a service recipient's support coordination agency
- and provider agency documentation on synchronous interactions."