

CHAPTER 4-000 (Reserved)

CHAPTER 5-000 DEFINED SERVICES

5-001 through 5-010 (Reserved)

5-011 Homemaker Service for Families

5-011.01 Introduction: This section contains directions for -

1. The authorization and provision of Homemaker Service for Families; and
2. The evaluation and approval of homemaker providers.

5-011.01A Homemaker Need: Homemaker service is not provided based on the demand of the client. The instruction provided by the homemaker must maintain or strengthen the family's capacity to function as independently as possible.

5-011.01B Homemaker Goals: The goals relating to Homemaker Service for Families are -

1. Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency (Goal 1);
2. Achieving or maintaining self-sufficiency, including reduction or prevention of dependency (Goal 2); and
3. Preventing or remedying neglect, abuse, or exploitation of children unable to protect their own interests (Goal 3).

5-011.02 Homemaker Definitions

Homemaker Service for Families: In-home assistance and instruction provided by a homemaker to maintain and strengthen families and alleviate stresses in the home.

In-home or out-of-home supervision and care of children may be provided for up to 24 hours per day due to temporary absence of the parent or usual caretaker due to hospitalization; or the parent or usual caretaker's need for assistance during recovery from illness.

Out-of-home instruction may also be provided by homemaker providers or services workers in foster care or child protective services cases to -

1. Maintain and strengthen families and alleviate stresses in the home; or
2. Prepare the natural family for the return of the child to the home.

Homemaker Tasks: The worker and the homemaker shall work together to identify areas of inadequate family functioning and need for training or assistance in -

1. Management, supervision, training, and proper care of children or incapacitated family members;
2. Organization of household activities and time management;
3. Management, maintenance, arrangement, cleaning, and care of home appliances, equipment, eating utensils, furniture, and supplies;
4. Obtaining, storing, planning, preparing, and serving nutritious food for self or family (including any necessary special diets);
5. Obtaining and properly caring for clothing, household supplies, and sundry needs of self or family (including laundry tasks of sorting, carrying, washing, drying, and ironing);
6. Maintenance of sanitation within the home;
7. Maintenance of personal hygiene and health practices for self or family members;
8. Obtaining any necessary medical care and treatment;
9. Management and proper use of income and resources; and
10. Maintaining proper relationships and communication with family members.

5-011.03 Clients Served

5-011.03A Homemaker Eligibility Status: The worker shall authorize homemaker service only for parents or usual caretakers who are eligible -

1. As current ADC recipients;
2. As Low Income Family; or
3. Without regard to income.

5-011.03B Homemaker Need: Eligible clients must -

1. Have an identified service need (see 474 NAC 2-004.02);
2. Be unable to adequately manage the family or household due to lack of knowledge, skills, or ability; and
3. Agree with the service plan.

5-011.04 Maximum Rate and Unit Authorization

<u>Service Description</u>	<u>Unit</u>	<u>Max. Unit Rate</u>	<u>Authorization Max. Units/Mon.</u>	<u>Service Code</u>
Homemaker (Hospitalization/ Recovery)	Day	\$12.00	5	1101
Homemaker	Hour	Federal Min. Wage	65	1103

5-011.05 Authorization Procedures: When authorizing homemaker service, the worker shall -

1. List specific instruction and assistance to be performed by the homemaker; or
2. Set time frames within which the client is to learn to perform each authorized homemaking task.

5-011.06 Homemaker Provider Requirements: (See also 474 NAC 3-002.02) Both contracted providers and staff-provided homemakers must -

1. Have experience in performing homemaker tasks;
2. Be free of communicable disease, have the physical capability to provide service, and be willing to provide a physician's verification statement if, based upon the prudent person principle, the worker requests one;
3. Exhibit good grooming and personal hygiene practices;
4. Demonstrate acceptance of, respect for, and a positive attitude toward other people;
5. Exhibit emotional maturity in assuming responsibility, maintaining schedules, and adapting to new situations;
6. Possess the necessary skills to demonstrate, complete (if necessary), and instruct individuals in performing identified homemaker tasks;
7. Observe and report all changes to the worker;
8. Participate in (or show proof of past participation in) training related to the abuse and neglect of children and demonstrate an understanding of this problem before providing service in child protective service cases; and
9. Participate in (or show proof of past participation in) training related to permanent planning for children before providing service to natural parents in foster care cases.

5-011.07 Forms and Instructions: Forms necessary for providing homemaker service are -

1. Form DSS-1151, "Homemaker Provider Check List" (474-000-100).
2. Form DSS-1153, "Homemaker Weekly Time Sheet" (474-000-101); and
3. Form DSS-1154, "Homemaker Service Task List" (474-000-102).

5-011.10 Family Support Service for Families:

5-011.10A Introduction: This section contains directions for -

1. The authorization and provision of Family Support Service for Families; and
2. The evaluation and approval of family support providers.

5-011.10A1 Family Support Purpose: Family Support Service is not provided based solely upon the request of the client. The instruction and support provided by the Family Support provider must maintain or strengthen the family's capacity to function as independently as possible, and enable them to provide minimum parenting (see 474 NAC 5-011.10B).

Services provided must be for the purpose of -

1. Maintaining and strengthening the family, preventing out-of-home placement of children, and alleviating stresses in the home; or
2. Preparing the natural family, including the child(ren) in placement, for the return of the child(ren) to the home.

5-011.10A2 Family Support Service Goals: The goals relating to Family Support Service for Families are -

1. Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency (Goal 1);
2. Achieving or maintaining self-sufficiency, including reduction or prevention of dependency (Goal 2); and
3. Preventing or remedying neglect, abuse, or exploitation of children unable to protect their own interests (Goal 3).

5-011.10A3 Authorized Family Support Tasks: The case manager, family support provider, and family shall work together to identify the areas of family functioning that require training, support, and assistance in -

1. Management, supervision, training, and proper care of children;
2. Basic daily living and survival skills;
3. Role modeling;
4. Facilitating relationship building and bonding between family members;
5. Providing needed emotional support and developing alternative support systems;
6. Seeking needed information or resources;

7. Management of the home;
8. Arranging for and obtaining necessary medical care and treatment;
9. Management and proper use of income;
10. Maintaining communication between family members; and

5-011.10A4 Duties: To accomplish assigned tasks a family support provider shall -

1. Provide parents with information and techniques for working with children to enable them to meet minimum parenting standards;
2. Visit assigned families as agreed upon by the family support team (on call and/or on a regular basis);
3. Work with families to assess their own strengths and resources and guide them in problem-solving techniques;
4. Work cooperatively with casemanager, parent, and involved professionals in meeting goals designed to strengthen the family and allow the child/children to remain in or return to the home;
5. Have knowledge of community and program resources and make appropriate referrals to assist families;
6. Maintain confidential records of home visits and community contact;
7. Develop and participate in group activities of interest to parents, including support groups;
8. Attend meetings, training sessions, workshops, and classes to further knowledge, leading to more effective job performance; and
9. Observe and report progress and strengths to the casemanager.

5-011.10B Definitions

Family Reports: Information provided by families receiving Family Support Service on Form DSS-1158 indicating -

1. Family-identified goals addressed during visits by the family support provider;
2. Tasks completed together; and
3. Other comments or items of concern to the family.

Family Support Service for Families: Components of this service are -

1. In-home assistance and instruction provided by a family support provider to maintain and strengthen families and alleviate stresses in the home;
2. In-home supervision, observation and modeling of the care of children; and
3. Out-of-home support in conjunction with transportation to aid families in getting to and using needed services (see 474 NAC 5-011.10D1).

Minimum Parenting: Considering ethnic and cultural differences, an action whereby a parent/parent substitute or caregiver ensures that the child is adequately fed, clothed appropriately for the weather conditions, provided with adequate shelter, protected from severe physical, mental, and emotional harm, and provided with necessary medical care as required by law. A parent/parent substitute or caregiver may have personal and situational problems but meet minimum parenting standards.

5-011.10C Clients Served

5-011.10C1 Family Support Eligibility Status: The worker shall authorize family support service only for parents who are eligible -

1. As current ADC recipients;
2. As Low Income Family; or
3. Without regard to income.

5-011.10C2 Family Support Need: Eligible clients must -

1. Have an identified service need (see 474 NAC 2-004.02);
2. Agree with the service plan; and
3. Be a family with a Department ward who is in risk of out of home placement or whose case plan is reunification;
4. Be a family with a former Department ward who is a minor who is at risk of out-of-home placement;
5. Be a family with an open CPS investigation or family service case (474 NAC 5-016.14 AND 5-016.15ff); or
6. Be a pregnant or parenting minor.

Exception: A Department ward who is in out-of-home placement may be eligible for family support services to maintain/stabilize his/her current placement. In this situation, the worker shall submit Form DSS-2A, "Social Service Exception" (see 474 NAC 2-007).

5-011.10D Maximum Rate and Unit Authorization: The worker shall determine whether family support service will be provided by the hour (five hours or fewer per day) or by the day, and authorize either service code 1120 or 1121, accordingly.

<u>Service Description</u>	<u>Unit</u>	<u>Maximum Unit Rate</u>	<u>Authorization Max. Units/Mon.</u>	<u>Service Code</u>
Family Support	Day	\$24.00 (over 5 hours per day)	16 per family	1120
Family Support	Hour	6.00 (up to 5 hours per day)	65 per family	121
Family Support *(Indirect/ Adm.)	Hour	3.35	10% of units billed**	1122

*Indirect/Administration is limited to the writing of reports, appearance in court, and liaison work with non-Department of Social Services agencies on behalf of the client.

**Hourly Example: The provider bills for 37 hours of family support under service code 1120: $37 \times 10\% = 3.7$. Rounding to the nearest whole number, this provider may bill a maximum of 4 units under service code 1122.

Daily Example: The provider bills for 9 days of family support under service code 1121 (a daily rate is equal to 5 units): $9 \times 5 = 45 \times 10\% = 4.5$. Rounding to the nearest whole number, this provider may bill a maximum of 5 units under service code 1122.

5-011.10D1 Transportation: The Department shall contract with family support providers as transportation providers when the main purpose of their service is to transport clients to needed services (see 474 NAC 5-018). If support is provided during transportation and that is the purpose authorized by the casemanager, family support may be authorized in lieu of transportation. The worker shall not authorize family support and transportation for the same event.

The worker shall encourage client independence by ensuring that transportation service is not authorized when the client is able to make his/her own transportation arrangements (e.g., friends, relatives, or volunteers). The worker shall not authorize transportation by a family support provider if public transportation is available and appropriate.

The Department does not pay a provider for transportation to the client's home. The Department may consider exceptional transportation costs when negotiating a provider's rate.

5-011.10D2 Time Limits: The worker may authorize Family Support Service for a maximum of six months to be effective during the time the family service case is open. (Initial authorization of three months or less is encouraged.) Form DSS-2A must be submitted to Central Office to request an extension. (See 474 NAC 2-007.04.)

5-011.10D2a Time-Limited Service Exceptions: Central Office staff shall not grant approval for extension beyond six months for the exclusive purpose of ongoing advocacy or follow up.

When service provision requires a time-limited service to continue beyond an initial six-month authorization period in order for the client to meet his/her service goal, the worker shall

1. Develop a plan which will -
 - a. Avoid increased or continued dependency on services;
 - b. Assist the client to advance toward achievement of his/her program goal; and
 - c. Clearly outline client and worker responsibilities in implementing the plan;
2. Document -
 - a. What services have been provided during the previous six-month authorization period;
 - b. What positive steps have been taken toward client goal achievement;
 - c. What components of service remain to be provided through future service authorization, in order for the client to meet his/her service goal; and
 - d. Other significant changes in the client's situation.
3. Determine how much service authorization extension is needed;
4. Explore other resources for service provision; and
5. Document other agencies/resources working with the client; and
6. Initiate Form DSS-2A documenting need and requesting a specific number of additional units for a specific time period.

Note: An exception is not required to continue service beyond six months for a child protective service case when supervision has been ordered by a court of competent jurisdiction.

5-011.10D2a(1) Record Maintenance: Local staff shall maintain the completed Form DSS-2A in the appropriate client or provider case file.

5-011.10E Authorization Procedures: When authorizing Family Support Service, the case manager shall -

1. List specific instruction and assistance to be performed by the family support provider;
2. Set time frames within which the client is to be independent of the need for family support service;
3. Establish a written agreement with the family which includes -
 - a. Identifying family information;

- b. Family-identified strengths;
 - c. Family-planned goals;
 - d. Services identified to assist the family in meeting its own goals;
 - e. Tasks to be assumed by the family; and
 - f. Time limits; and
4. Provide Form DSS-1158, "Family Report," to the family.

Note: See also 474 NAC 2-005ff (Documentation) and 474 NAC 5-016.14ff and 5-016.15ff (Family Service Plan), as appropriate.

5-011.10F Reporting Requirements

5-011.10F1 Provider Reports: Family support providers shall -

1. Provide a monthly billing document (Form DSS-5B) listing each family and including the number of units of service provided by service code.
2. Provide Form DSS-1157, "Family Support Provider Monthly Report," to the family support district coordinator including -
 - a. Number of families served;
 - b. Number of cases in which the goal was placement prevention;
 - c. Number of cases in which the goal was Reunification; and
 - d. Number of days of direct contact with families.
3. Keep individual case narratives for each family served and provide a copy to the family's casemanager monthly. The narrative must include -
 - a. Date/time spent with the family;
 - b. Goals and strengths addressed during each session;
 - c. Tasks accomplished together;
 - d. Where contact occurred; and
 - e. Who was present.

5-011.10F2 Worker Reports: The worker shall -

1. Maintain a case record as stated in 474 NAC 2-010ff;
2. Maintain a copy of the written agreement with the family (see 474 NAC 5-011.10E, item 3);
3. Maintain a copy of any family reports (Form DSS-1158) received; and
4. Maintain a copy of the family support provider's individual family case narratives.

5-011.10G Family Support Provider Requirements

5-011.10G1 Initial Requirements: To become contracted, providers must -

1. Meet the general provider requirements in 474 NAC 3-002.02:
2. Have experience in performing tasks similar to those of a family support provider;
3. Be free of communicable disease, have the physical capability to provide service, and be willing to provide a physician's verification statement if, based upon the prudent person principle, the worker requests one;
4. Demonstrate acceptance of, respect for, and a positive attitude toward other people;
5. Exhibit emotional maturity in assuming responsibility, maintaining schedules, and adapting to new situations;
6. Possess the necessary skills to demonstrate, complete, instruct, and support individuals in performing identified family support tasks;
7. Participate in (or show proof of past participation in) basic family support service training provided by the Department;
8. Agree to meet transportation provider requirements when providing transportation as a part of the delivery of family support;
9. Be cleared with the Child Abuse/Neglect Central Registry and not be abusive or neglectful toward children;
10. Possess reading and writing skills necessary for contracting, reporting, and delivery of service; and
11. Sign a statement to ensure the confidentiality of client information.

5-011.10G2 Additional Requirements: In addition to the initial requirements, providers must meet the following requirements while providing family support service:

1. Observe and report progress and strengths to the casemanager;
2. Participate in (or show proof of past participation in) training related to the abuse and neglect of children and demonstrate an understanding of this problem before providing service in child protective service cases;
3. Participate in (or show proof of past participation in) training related to permanent planning for children before providing service to natural parents in Department ward cases; and
4. Participate in on-going family support service training provided by the Department.

5-011.10G3 Compliance Documentation: The worker responsible for resource development shall use Form DSS-1156, "Family Support Provider Checklist," to document compliance with provider requirements. The worker shall complete and sign the form and instruct the provider to review and sign it before contracting.

5-011.10H Forms and Instructions: Forms necessary for providing family support service are -

1. Form DSS-1156, "Family Support Provider Checklist" (474-000-97);
2. Form DSS-1157, "Family Support Provider Monthly Report" (474-000-98);
3. Form DSS-1158, "Family Report" (474-000-99); and
4. Form DSS-1154, "Homemaker Service Task List" (474-000-102).

5-012 through 5-016 (Reserved)

5-018 Transportation or Escort Service for Families

5-018.01 Introduction: The guidelines contained in this section provide directions for:

1. The authorization and provision of Transportation or Escort Service for Families; and
2. The evaluation and approval of transportation providers, including individual providers as authorized by Neb. Rev. Stat. § 75-303.03.

5-018.01A Outcomes: The Title XX Social Services Block Grant goals which relate to transportation service are:

1. Achieving or maintaining economic self-support (Goal 1);
2. Achieving or maintaining self-sufficiency (Goal 2); and
3. Preventing or remedying neglect, abuse, or exploitation of children (Goal 3).

5-018.02 Transportation Definitions:

Common Carrier means any person who transports passengers by motor vehicle for hire- and is licensed as such with the Public Service Commission (PSC).

Department means the Department of Health and Human Services (DHHS) as established by the Health and Human Services Act (Laws 2007, LB296).

Department staff means employees of the Department of Health and Human Services or contractors of the Department of Health and Human Services assigned those responsibilities.

Escort Services means an attendant or caregiver accompanying a minor or persons who are physically, mentally, or developmentally disabled and unable to travel or wait without assistance or supervision.

Exempt Provider means carriers exempted from Public Service Commission licensure by law including those that:

1. Transport for hire persons who are aged and their spouses and dependents under a contract with a municipality or county;
2. Are owned and operated by a nonprofit organization which has been exempted from the payment of federal income taxes as provided by Section 501(c)(4), Internal Revenue Code, and transporting solely those persons over age 60, their spouses and dependents, and/or persons experiencing disabilities;
3. Are operated by a municipality or county as authorized by law in the transportation of the persons who are aged;

4. Are operated by a governmental subdivision or a qualified public purpose organization having motor vehicles with a seating capacity of 20 or less and are engaged in the transportation of passengers in the state;
5. Are engaged in the transportation of passengers and are operated by a transit authority created under and acting pursuant to the laws of the State of Nebraska; and
6. Provide escort service under contract with the Department of Health and Human Services or with any agency organized under the Nebraska Community Aging Services Act.

Individual Provider means a person who is not in the business of providing transportation for hire; for example, a friend, neighbor, or non-legally responsible relative.

Medical Escort means an attendant or caregiver accompanying a minor or persons who are physically, mentally, or developmentally disabled and unable to travel or wait without assistance or supervision to receive a Nebraska Medicaid coverable service.

Nebraska Medicaid Coverable Services means a medical service that could be covered by the Nebraska Medical Assistance Program (NMAP) as specified in the Nebraska Administrative Code (NAC) Title 471 (see 474-000-503).

Public, Contracted Transportation means public transportation such as a taxi, bus, train, or plane.

Tariff means the geographic and rate parameters of operation assigned to a particular carrier by the Public Service Commission.

Transportation/Escort Service for Families means service which enables:

1. Children to travel to:
 - a. Child care;
 - b. Health-related treatment or care; or
 - c. Department or other community resource to receive services as a part of a child protective services safety plan and/or case plan;
2. Parents or usual caregivers to travel to:
 - a. Health services;
 - b. Department or a community resource to receive services as a part of a child protective services safety plan and/or case plan; or
 - c. Visit a hospitalized child included in the family unit or in foster care; and
3. Biological parents or usual caregivers with children in foster care to receive services directed toward returning the child home.

5-018.03 Clients Served

5-018.03A Eligibility Status: Local staff may authorize transportation or escort service for clients who are:

1. Current ADC recipients;
2. Current SSI and State Supplemental recipients age 18 or younger;
3. State wards;
4. Low-income families; or
5. Families eligible without regard to income.

5-018.04 Transportation or Escort Need: Department staff must determine a client has the need for transportation services. Transportation services are not provided based on the demand of the client. Need for a service implies that the provision of that service will assist the client in achieving program goals. Eligible clients must:

1. Have no access to a working licensed vehicle, or a valid driver's license;
2. Be unable to drive due to physical or cognitive limitation;
3. Be unable to secure transportation from relatives, friends, or other organizations at no cost;
4. Require transportation in relation to a defined area of need (see 474 NAC 5-018.05);
5. Have a current safety plan or case plan; or
6. Accept the authorized case plan.

5-018.04A Medicaid Managed Care Enrollees: If the client is enrolled in one of the Medicaid Managed Care HMO plans, the HMO is responsible for authorizing transportation for the client's medical services and Department staff must not authorize medical transportation. Exception: Department staff may authorize transportation for adult day care or mental health day rehab services and for dental-related appointments and pharmacy services under Medical Transportation codes. Staff may authorize non-medical transportation for Medicaid Managed Care enrollees if the client meets the Social Services Block Grant program guidelines. If the client is enrolled in one of the Medicaid Managed Care "Primary Care" plans then the responsibility for transportation authorizations remain with Department worker.

5-018.04B Medicaid Mental Health Managed Care Enrollees: If the client is enrolled in the Medicaid Mental Health/Substance Abuse Managed Care Plan, the Mental Health/Substance Abuse Plan is responsible for authorizing transportation for mental health/substance abuse services and Department staff must not authorize mental health or substance abuse related transportation. Exception: Department staff may authorize transportation for adult day care or mental health day rehab services, and for other medical appointments under Medical Transportation codes, unless the client is enrolled in the Medicaid Managed Care HMO Program. Staff may authorize non-medical transportation for Medicaid Mental Health Managed Care enrollees if the client meets the Social Services Block Grant program guidelines.

5-018.04C Residents of Nursing Facilities or ICF/MR's: Residents of nursing facilities or ICF/MR's are not eligible to receive transportation through Social Services Block Grant Programs, except discharge transportation. All other transportation is the responsibility of the nursing facility or ICF/MR. Transportation, including moving the client's household goods or personal property, may not be authorized for these clients.

5-018.05 Defined Areas of Transportation Need: Staff may authorize transportation or escort service for families only to meet client needs as described in the definition of Transportation/Escort Services for Families, see 474 NAC 5-018.02.

5-018.05A Child Protective Services Transportation/Escort: Transportation or Escort may be authorized as part of a child protective safety plan and/or case plan.

5-018.05B Child Care Transportation or Escort: The worker may authorize transportation or escort:

1. When the child care is necessary for any of the reasons listed in 392 NAC 3-007.01 and 474 NAC 5-011.02;
2. When transportation costs are not included in the total child care rates (for guidelines see 392 NAC 4-003.05); and
3. When the child care is licensed or license-exempt.

5-018.05C State Ward and Foster Care Transportation or Escort: The worker may authorize transportation to allow biological parent(s) or usual caregivers with a child who is a Department ward to receive services directed toward the return of the child to the home or the maintenance of the child in the home. For authorized public or contracted transportation for foster care see 479 NAC 2.

5-018.05D Medical Transportation or Escort: The worker may authorize transportation or escort to enable the eligible child to receive a Nebraska Medicaid-coverable service. This includes transportation for a child to receive services identified through HEALTH CHECK. For Medicaid-coverable services see 474-000-503.

5-018.05E Transportation for Visit: The worker may authorize transportation or escort to enable a family member or caregiver to visit a hospitalized child who is included in the family unit or in foster care as specified in 479 NAC 2-002.03E3e.

5-018.06 Transportation Services Provider Standards: Department contracts annually with common carriers, exempt providers, escort providers, and individual providers. Providers must meet all general provider standards in addition to the service specific standards.

5-018.06A Common Carrier Standards: The Public Service Commission certifies common carriers. Taxis, van companies are certified by the Public Service Commission (PSC) as common carriers. Staff must:

1. Verify that the carrier is certified by the Public Service Commission;
2. Request and receive a copy of the carrier's tariff; and
3. Verify that the carrier has a special Department designation.

Transportation provided by child care providers, family support providers, and foster parents is exempt from PSC certification requirements since it is incidental to the service provided.

5-018.06B Exempt Provider Standards: Exempt providers must ensure that their employees meet the individual provider standards in 474 NAC 5-018.06D.

5-018.06C Escort Provider Standards: The provider must:

1. Be an individual age 19 or older;
2. Have training or experience in working with children;
3. Have training or experience in providing personal assistance;
4. Agree to have his/her driving records reviewed, if the escort will drive;
5. Maintain information on specific needs of each client served; and
6. Report all changes observed to the client's services coordinator.

Escort providers who personally drive the client must also meet all individual provider standards in 474 NAC 5-018.06D. The escort provider must complete the individual transportation provider self-certification.

If the client requires an escort and the escort will not drive (for example, handi-bus, taxi, or travel agency for airfare), Department staff must authorize sufficient transportation units for both the client and the escort.

5-018.06D Individual Provider Standards: Department staff is authorized to contract with individual providers by Neb. Rev. Stat. § 75-303.03, only if the following driver and vehicle standards are met at all times when the individual is providing transportation for a client .

5-018.06D1 Driver Standards: The individual provider must:

1. Have been chosen by the client or by the usual caregiver to provide transportation;
2. Be age 19 or older;
3. Possess a current and valid driver's license;
4. Have no more than three points assessed against his/her Nebraska driver's license, or meet a comparable standard in the state where s/he is licensed to drive;

5. Currently have no limitations that would interfere with safe driving;
6. Personally drive his/her own vehicle to transport the client;
7. Use seat belts and child passenger restraint devices as required by law;
8. Not smoke while transporting the client;
9. Not transport the client while under the influence of alcohol or any drug that impairs the ability to drive safely;
10. Not provide transportation if s/he has a communicable disease which may pose a threat to the health and well-being of the client;
11. Have and maintain the minimum automobile liability and medical insurance coverage as required by law; and
12. Report disqualification from any Department program for intentional program violation.

5-018.06D2 Vehicle Standards: The individual provider's vehicle must be:

1. Currently licensed and registered as required by law;
2. Kept at all times in proper physical and mechanical conditions;
3. Equipped with operable seat belts, turn signals, lights, and horn;
4. Equipped with proper child passenger restraint devices as required by law when transporting children; and
5. Equipped to provide comfortable temperature and ventilation conditions.

5-018.06D3 Registry Checks and Criminal Background Checks:

Department staff must complete and document registry checks and criminal background checks on each potential individual provider.

5-018.06D3a Registry Checks: Department staff must check:

1. Adult Protective Services Central Registry;
2. Central Register of Child Protection Cases; and
3. Nebraska State Patrol Sex Offender Registry.

If the potential provider does not reside in Nebraska or has resided in Nebraska for less than one year, Department staff must check registries in the state of residence or previous residence, if possible.

5-018.06D3a(1) Department staff must not contract with a potential individual provider if a report of abuse or neglect concerning the individual provider has been determined to be "Court Substantiated" or "Department Substantiated" on the APS Central Registry or "Court Substantiated", "Court Pending" or "Inconclusive" on the Central Register of Child Protection Cases.

5-018.06D3a(2) Department staff must not contract with a potential individual provider if the individual's name appears on the Nebraska State Patrol Sex Offender Registry.

5-018.06D3b Criminal Background Checks: Department staff must:

1. Obtain a criminal history statement from the potential individual provider; and
2. Perform a criminal history check of the potential individual provider.

5-018.06D3b(1) General Criminal History: Department staff must not contract with a potential individual provider if a history of convictions for misdemeanor or felony actions that endanger the health and safety of any client is indicated. This includes crimes against a child or vulnerable adult, crimes involving intentional bodily harm, crimes involving the illegal use of a controlled substance, crimes involving moral turpitude on the part of the potential provider, or any major traffic violations.

5-018.06D3b(2) Specific Criminal History: Department staff must deny or terminate service provider approval when conviction has occurred in the following areas:

1. Child pornography;
2. Child or adult abuse;
3. Driving under the influence: a DUI conviction within the past eight years; -
4. Domestic assault;
5. Shoplifting after age 19 and within the last three years;
6. Felony fraud within the last 10 years;
7. Misdemeanor fraud within the last five years;
8. Termination of provider status for cause from any Department program within the last 10 years;
9. Possession of any controlled substance within the last five years;
10. Possession of a controlled substance with intent to deliver within the last 10 years;
11. Felony or misdemeanor assault without a weapon in the last 10 years;
12. Felony or misdemeanor assault with a weapon in the last 15 years;

13. Prostitution or solicitation or prostitution within the last five years;
14. Felony or misdemeanor robbery or burglary within the last 10 years;
15. Rape or sexual assault; or
16. Homicide.

Pending charges must be reviewed by Department, Resource Development to determine whether the client's safety is in jeopardy. Other convictions must be considered using the guidance in 474 NAC 5-018.06D3b(1) and weighted to similar offenses included in this list.

5-018.06D4 Individual Provider Approval Process: Department staff must obtain a copy of the individual's current driver's license, insurance card, and vehicle registration. The provider must complete and sign the provider self-certification and the provider agreement. In addition to having no more than three points assessed against his/her driver's license, each provider's past eight-year driving history must be considered. If a license has been suspended or revoked, the provider must not be approved for eight years from the date of suspension or revocation.

5-018.06D4a Renewal: The provider self-certification and the provider agreement must be renewed annually. The registry checks and criminal history checks required under 474 NAC 5-018.06D3 must be completed for each renewal. Department staff must obtain a copy of the individual's current driver's license, insurance card, and vehicle registration. Department staff must not renew any contract with a provider whose name appears on the registries or whose criminal history check indicates a history of any convictions as specified in 474 NAC 5-018.06D3.

5-018.06D4b Termination: Department staff must terminate the provider agreement if the individual provider is found to be in violation of any of the standards in 474 NAC 5-018.06D1 and D2. Department staff must terminate any contract with a provider whose name appears on the registries or whose criminal history check indicates any convictions as specified in 474 NAC 5-018.06D3.

5-018.07 Authorization Procedures: Before authorizing transportation/escort services, Department staff must explore with the client the use of family, neighbors, friends, or community agencies that will provide this service without charge whenever possible. Department staff must discuss types and options of providers with the client before authorizing transportation services. Department staff must assure the client is aware of the associated costs.

5-018.07A Medical Transportation: Department staff must offer the client choice of providers for medical Transportation/escort services.

5-018.07B Transportation for Out-of-State Medical Treatment: Medicaid may cover transportation for out-of-state medical treatment for Medicaid-eligible clients.

If out-of-state treatment is approved by Medicaid, Department staff may authorize transportation. The client is not eligible for transportation assistance if the client is driving him/herself.

If out-of-state treatment is not approved because of a non-medical reason such as the out-of-state provider refusing to participate in Medicaid, transportation for out-of-state treatment may be approved. If out-of-state treatment is not approved for lack of medical necessity, transportation for out-of-state treatment must not be approved.

If prior authorization for out-of-state treatment is not required,(for example, receiving services in a border state), Department staff may authorize transportation under the usual procedures.

5-018.07B1 Medicare (Primary) and Medicaid (Secondary): If the client has Medicare as his/her primary insurance and Medicaid is secondary, the client does not require out-of-state treatment approval from Medicaid. The Department central office transportation coordinator will determine if out-of-state transportation assistance is approved. The coordinator must use components of the definition of medical necessity found in 471NAC 1-002.02A to determine whether out-of-state transportation may be authorized. If out-of-state transportation assistance is disapproved because the client is requesting routine medical services (for example, using a distant out-of-state clinic as the primary care provider), Department staff must deny the transportation service.

5-018.07B2 Private Health Insurance (Primary) and Medicaid (Secondary): If the client is using private insurance as his/her primary insurance and Medicaid is secondary, Medicaid prior authorization of the out-of-state medical treatment is required.

If out-of-state treatment is approved by Medicaid, Department staff may authorize transportation. The client is not eligible for assistance if the client is driving him/herself.

If Medicaid denies prior authorization of payment for out-of-state treatment because of a non-medical reason such as the out-of-state provider refusing to participate in Medicaid, Department staff must request prior authorization from the Department Central Office Coordinator. If the Coordinator denies out-of-state transportation, Department staff must deny the transportation service. If the Coordinator approves the out-of-state transportation, Department staff must approve the transportation service.

If Medicaid denies prior authorization for out-of-state treatment due to lack of medical necessity, transportation for out-of-state treatment must also be denied.

5-018.07C Non-Medical Transportation: For areas where exempt providers are available or the client has chosen to use an individual provider, the client may only use a common carrier when the exempt provider or individual provider cannot provide the service.

5-018.07D Authorization of Exempt Providers: Department staff may contract with and authorize services for a provider who is exempt from PSC licensure as appropriate to meet a client's needs. The availability of a common carrier does not limit the use of an exempt provider.

5-018.07E Medical Escort: Department staff must use the following criteria to determine when to authorize an hourly rate for medical escort services:

1. The escort is not a legally responsible member of the client's family;
2. The client is not able to secure an escort at no cost; and
3. The escort is not receiving payment from another source.

5-018.07E1 Utilization of Exempt Providers as the Driver: When transportation is provided by an exempt provider, Department staff may authorize the cost of the escort's transportation only if there is an extra charge for the escort's transportation, such as air fares, rural transit system, city bus systems, etc.

5-018.07E2 Utilization of Common Carrier: When transportation is provided by common carrier provider, the provider may not charge an extra cost for transporting the escort.

5-018.07E3 Utilization of Individual Providers as the Driver: When transportation is provided by an individual provider, the provider may not charge an extra cost for transporting the escort.

5-018.07F Individual Providers: Department staff must authorize an individual provider if the following criteria are met:

1. The client has chosen the individual provider;
2. The individual will personally drive the vehicle; and
3. The individual meets provider standards in 474 NAC 5-018.06D.

5-018.08 Transportation Services Rates, Frequency, and Maximum Allowable Units:

5-018.08A Conditions for Payment: The Department will pay for transportation services only:

1. When the client is actually in the vehicle; and
2. Using the most direct and logical route from the client's residence to the service location.

5-018.08B Upper Limits: DHHS Central Office establishes transportation rates according to the following limits. Department staff assigned resource development responsibilities may negotiate rates lower than the established rates.

5-018.08B1 Common Carriers: Neb. Rev. Stat. § 75-303.02 limits the distance rates for common carriers at a rate no greater than three times the state employee mileage rate. The maximum reimbursement rate does not apply when the carrier:

1. Transports the client wholly within the corporate limits of the city or village where the transportation of the client originated; or
2. Transports a disable person as defined by the federal Americans with Disabilities Act of 1990 in a vehicle that is compliant with the regulations for the transportation of the disabled person.

5-018.08B2 Taxis: Taxi rates may be no greater than 95% of published rates.

5-018.08B3 Exempt Providers: DHHS Central Office will establish rates for exempt providers.

5-018.08B4 Escort Providers: The mileage rate for escort providers must not exceed the state employee mileage rate unless the escort is a certified carrier. The hourly rate is set by Department Central Office.

5-018.08B5 Individual Providers: As provided in Neb. Rev. Stat. § 75-303.03, the Department of Health and Human Services will reimburse the individual provider for costs incurred in transportation at a rate no greater than that paid for reimbursement of state employees under Neb. Rev. Stat. § 81-1176 only for mileage.

5-018.08C Frequency: The frequency for medical and non-medical transportation is by miles or trip. The frequency for medical escort services is by the:

1. Hour(s) and miles; or
2. Hours and trip.

Department staff must authorize time and miles traveled separately.

5-018.08D Maximum Allowable Units: Department staff must authorize transportation units based on client need not to exceed the following limits:

1. Non-medical Transportation:
 - a. To and from child care; and;
 - b. To and from community services based on child protective services safety plan and/or case plan; and
2. Medical Transportation: Based on needed treatment and care.

5-018.09 Transportation Exceptions: The worker must document in the client's case file and on N-FOCUS when a need exists for more units.

5-018.10 Transportation Forms and Instructions: In addition to forms for general provider approval (Forms MC9-LTC and MILTC-1700, Provider Self Certification Checklist, the worker must use forms required by the Public Service Commission for exempt providers.-

5-019 Domestic Abuse Program

5-019.01 Introduction: The Nebraska Department of Social Services (NDSS) is responsible for the administration and supervision of a Domestic Abuse Program.

5-019.01A Legal Basis: Sections 42-901 through 42-927, Reissue Revised Statutes of Nebraska, 1943, requires the Department to -

1. Establish and maintain comprehensive support services to aid victims of domestic abuse; and
2. Provide prevention and treatment programs to aid victims of domestic abuse, their families, and abusers.

5-019.02 Definitions

Domestic Abuse: Abuse is the occurrence of one or more of the following acts between spouses, persons living as spouses, or adult members of the same household:

1. Attempt to cause or intentionally, knowingly, or recklessly causing bodily injury or serious bodily injury with or without a deadly weapon; or
2. Placing another person, by physical menace, in fear of imminent serious bodily injury.

Domestic Abuse Project Personnel: The staff, either paid or volunteer, involved in the activities of a domestic abuse project.

Local Office: A unit of the Nebraska Department of Social Services (i.e., welfare staff).

Project: A local domestic abuse program which contracts with NDSS.

5-019.03 Clients Served: Domestic abuse services may be provided for victims of domestic violence and their family members. Services are available without regard to income.

5-019.04 Local Office Responsibilities: Local office staff shall -

1. Provide public assistance and social services as appropriate; and
2. Provide information and referral to a local domestic abuse project.

5-019.05 Emergency Services: Domestic abuse project personnel shall provide the following emergency services:

1. A 24-hour telephone service to assist victims of domestic abuse;
2. Immediate transportation to enable victims of domestic abuse and their dependents to -

- a. Leave a violent or potentially violent home situation;
 - b. Travel to health-related treatment or care;
 - c. Receive legal, housing, employment, welfare, food stamps, or counseling assistance; or
 - d. Receive temporary or permanent shelter;
3. Immediate access to medical personnel and/or facilities;
 4. Access to legal system personnel;
 5. An emergency financial fund for purchasing tangible items;
 6. Short-term crisis intervention counseling and referral to other support systems; and
 7. Safe living environments that will provide a supportive, non-threatening shelter to victims, their families, and household members.

5-019.05A Constant Access and Intake to Services: Project personnel shall -

1. Answer domestic abuse phone lines on a 24-hour basis;
2. Complete a crisis intervention training program conducted by a qualified professional; and
3. Have knowledge of community resources and access to appropriate names and phone numbers for referral.

Central Office staff shall approve crisis intervention training.

5-019.05B Immediate Transportation: Domestic abuse project personnel shall -

1. Ensure that necessary transportation is available for victims and their dependents to and from community facilities and resources (Victims should be encouraged to use their own vehicles or public transportation when available and appropriate.);
2. Never go to the home of a victim;
3. Request assistance from law enforcement personnel when elements of danger exist or may exist; and
4. Have adequate liability insurance, and a valid driver's license when transporting victims for non-emergency purposes. The vehicle must be equipped with seat belts and have passed any required inspection guidelines.

Interstate and intrastate transportation is an allowable expense. Financial guidelines are determined by each domestic abuse project.

Children age 17 and younger must be accompanied by a parent or legal guardian. Staff shall obtain written consent from the parent or guardian if the parent or guardian will not be present.

Vehicles owned by domestic abuse project personnel must not be driven by victims.

5-019.05C Immediate Medical Services or First Aid: Domestic abuse project personnel must have knowledge of community medical facilities, medical personnel and emergency medical services, and shall establish written procedures for immediate access to medical resources.

5-019.05D Emergency Legal Counseling and Referral: Staff shall -

1. Be familiar with representatives of the legal system in their community (e.g., law enforcement personnel, county attorney, and private attorneys);
2. Establish written procedures to provide access to legal resources; and
3. Not interpret, assume, or suggest legal remedies. Domestic abuse project personnel may inform victims of possible legal options and make appropriate referrals.

5-019.05E Emergency Financial Aid: Project staff shall -

1. Establish policies and procedures for use of funds in emergency situations; and
2. Use existing community resources (e.g., food, clothing, personal hygiene supplies, and baby articles) before using emergency financial funds.

5-019.05F Crisis Counseling: Domestic abuse project personnel who provide crisis counseling shall complete a crisis intervention training program approved by Central Office before counseling independently. Referral to appropriate community support systems is recommended.

5-019.05G Safe Living Environments: Safe living environments which provide a supportive, non-threatening shelter to victims, their families, and household members include -

1. Residential facilities (staffed 24 hours per day) that provide an in-house program of individual and group counseling;
2. Motels and hotels (with support services provided by domestic abuse project personnel, as needed);
3. Private homes (with support services provided by domestic abuse project personnel and/or hosts);
4. Family, friends, relatives; and
5. Independent agencies or facilities providing shelter.

Each domestic abuse project must develop written shelter policies and procedures for the following: telephone use; visitors; informing spouses; law enforcement knowledge of shelter; care and supervision of victims' children; public knowledge of shelter location; length of stay; protection of victim and/or host's personal possessions; and location of identifiable (client or volunteer) vehicles.

The shelter must meet applicable local or state building, health and fire safety requirements.

5-019.06 Contractual Agreements: Each project shall submit a proposal to Central Office, indicating a willingness and ability to provide the services described in 474 NAC 5-019.05. The project's program will be developed specifically in accordance with this proposal. The proposal must -

1. Include a budget; and
2. Be approved by Central Office staff.

Following approval, Central Office staff and project staff shall sign a contract for the provision of domestic abuse emergency services.

5-019.07 Monthly Reports: Projects shall maintain expenditure statements and client activity reports. Reports must be submitted to the Central Office by the 15th day of the following month.

5-019.08 Access to Records: Each project shall -

1. Maintain complete records regarding client contact and the expenditure of funds provided by the Department; and
2. Allow free access at reasonable times by authorized representatives of the Department.

5-019.09 Confidentiality: Any information gathered either independently or through the Department must be held in the strictest confidence and must be released to no one other than Department staff without the prior written authorization of the Department.

5-024 Interstate Correspondence and Placement

5-024.01 Introduction: The Nebraska Department of Social Services (NDSS) receives requests from other states to approve homes and place children. This section defines the service elements and policies for acceptance of a child from another state into Nebraska and initiation of requests for placement of a Nebraska child in another state. Guidelines are provided for staff responsible for the study and approval of foster homes, supervision of placement, importation of children, and administration of the Interstate Compact on Placement of Children.

5-024.02 Legal Basis: Nebraska has adopted the Interstate Compact on Placement of Children as Section 43-1101, Reissue Revised Statutes of Nebraska, 1943. NDSS cooperates with Immigration and Naturalization Services in respect to inter-country adoption by certifying that Nebraska's pre-adoption requirements have been met and laws concerning importation of children have been observed. NDSS is required by Section 43-503, R.R.S., 1943, to cooperate with other departments and bureaus, both state and national, to promote child welfare and health.

5-024.02A Member States: The following states have adopted the Interstate Compact on Placement of Children:

Alabama	Indiana	Montana	Rhode Island
Alaska	Iowa	Nebraska	South Carolina
Arizona	Kansas	New Hampshire	South Dakota
Arkansas	Kentucky	New Mexico	Tennessee
California	Louisiana	New York	Texas
Colorado	Maine	North Carolina	Utah
Connecticut	Maryland	North Dakota	Vermont
Delaware	Massachusetts	Ohio	Virginia
Florida	Minnesota	Oklahoma	Washington
Georgia	Mississippi	Oregon	West Virginia
Idaho	Missouri	Pennsylvania	Wisconsin
Illinois			Wyoming

5-024.03 Definitions

Child: A person who, by reason of minority, is legally subject to parental, guardianship, or similar control.

Interstate Compact on Placement of Children: A multi-lateral law permitting child placement activities to be uniformly conducted throughout the country.

Interstate Correspondence: Letters of inquiry and replies to or from another state in regard to placement and supervision of children.

Placement: Placement means the arrangement for the care of a child in a free home or boarding home, or in a child caring agency or institution. It does not include any institution caring for the mentally ill, mentally defective, or epileptic; any institution primarily educational in character; or any hospital or other medical facility.

Receiving State: The state to which a child is sent, or brought by public authorities or private persons or agencies for placement with state or local public authorities or with private agencies or persons.

Sending Agency: A state, officer, or employee thereof; a subdivision of a state, or officer, or employee thereof; a court of a state; a person, corporation, association, charitable agency or other entity which sends, brings, or causes to be sent or brought, any child to another state.

5-024.04 Central Office Responsibilities: The deputy compact administrator, Central Office, shall -

1. Administer the Interstate Compact on the Placement of Children as defined by state statute;
2. Request home studies and supervision of placement from local units, or area offices, to expedite the interstate and intercountry placement of children; and
3. Provide technical assistance to local units.

5-024.05 Local and Field Office Responsibilities: Local and field office staff shall respond to requests for home studies and supervision of interstate placements from the deputy compact administrator to expedite the interstate placement of children.

5-024.06 Requests: Any agency, institution, court, or person wishing to bring a child into Nebraska for adoption, foster home care, or into the home of a relative shall first obtain the approval of the Nebraska Department of Social Services. The Department reserves the right to refuse permission in order to safeguard the best interests of the child, the foster parents, or the State of Nebraska and its local subdivisions.

5-024.07 Bringing a Child into the State: The agency wishing to place a child in Nebraska shall -

1. Notify NDSS in writing;
2. Furnish a social history of the child, including complete identifying information, family background, developmental history, physical examination, social adjustment, education, psychological test results if any, legal custody, and reason for placement; and

3. Furnish identifying information about the proposed foster family, the address, and a clear statement of the request for home study, personal interview, or supervision of proposed placement. A copy of the home study prepared in the other state, if any, must be included.

Central Office staff shall file one copy of the out-of-state correspondence.

5-024.08 Preparation of Replies

5-024.08A Replies to an Out-of-State Agency: The local unit receiving an out-of-state request from the deputy compact administrator shall compile the information requested; address the reply to the agency requesting the information; and forward all copies of replies and materials to the administrator in triplicate.

Local or area office staff shall send copies of requests received directly from out-of-state agencies which involve a home study or supervision of a placement of a child from another state to the deputy compact administrator. The requested action must be initiated promptly as though the request had been received from the administrator.

The deputy compact administrator shall -

1. File a copy of the material;
2. Forward the appropriate number of copies, as required by the particular requesting state according to the American Public Welfare Association Directory, to the state office of the requesting state; and
3. Sign and attach Form DSS-ICPC-100A, "Interstate Compact Application to Place Child."

5-024.08B Replies to Other States: The worker shall -

1. Use the identifying information given in the original inquiry, noting any correction;
2. Indicate what persons, agencies, or other sources of information were used and give information obtained from each source;
3. Answer specifically each of the questions in the letter of inquiry or give reasons for lack of answers;
4. Supply copies of home studies or other materials compiled;
5. Answer letters promptly. If answers will be delayed more than two weeks, the inquiring agency should be notified of the delay; and
6. Complete home studies within 30 days (two weeks is recommended) following the home studies guideline.

5-024.09 Sending a Child to Another State: A Nebraska agency wishing to place a child in another state shall -

1. Write a letter of request containing complete identifying information about the child to be placed, the family who will receive the child, social history of the child, available medical, psycho- logical, and school records, birth certificate, copy of the custody document (court order or relinquishment), and copy of the home study for the family, in cases of a former Nebraska family;
2. Forward these materials to the deputy compact administrator in triplicate for transmittal to the out-of-state state office;
3. Submit these materials for importation approval for the child by the out-of-state agency before placement of the child in the other state; and
4. Complete and route Form CWI-10.

5-024.10 Inquiries to Other States: The worker shall -

1. Prepare letters of request or inquiry in triplicate;
2. Provide important identifying information (i.e., surname, first names of all persons in family under care, ages, sex, and race). When inquiry is made with reference to children, the names of both parents, whether or not they are with the children, should be given for purposes of identification;
3. Give information about the immediate situation, the reason for the inquiry, length of time known to the agency, and special problems such as physical or mental illness which may require special handling;
4. State the exact addresses of persons or agencies to be interviewed, giving specific direction or clues for seeking information when exact direction cannot be given; and
5. Ask specific questions as to the kind of information desired, and explain agency standards or policies that are involved.

5-024.11 Report on Placement Status: The local unit shall initiate Form DSS-ICPC-100B, "Interstate Compact Report on Placement Status of Child," at the time a child is placed in another compacting state. The form is used to indicate the actual date the placement occurred, changes in address, closing of the case due to cancellation of placement, finalization of adoption, or changes in custody.

5-024.12 Inter-Country Adoptions: The deputy compact administrator shall forward requests for home studies (see 474 NAC 5-022.05C) and supervision of adoptive placements received from out-of-state agencies authorized to place foreign children to the local unit according to the residence of the family. Requests for home studies of families currently served by area social service units must be forwarded to the area office for reply. The completed home study must be forwarded to the deputy administrator in quadruplicate for transmittal to the out-of-state agency.

REV. SEPTEMBER 20, 1995
MANUAL LETTER # 69-95

NEBRASKA DEPARTMENT OF
SOCIAL SERVICES MANUAL

S.S./FAMILY-CHILD-YOUTH
474 NAC 5-025

5-025 through 5-029 (Reserved)