

1240-F - HOME DELIVERED MEALS

EFFECTIVE DATES: 02/14/96, 12/11/19, UPON PUBLISHING¹

APPROVAL DATES: 10/01/01, 03/01/06, 3/01/07, 10/01/07, 07/01/12, 10/17/19, 04/29/24²

I. PURPOSE

This Policy applies to ALTCS E/PD and DES/DDD (DDD) Contractors³; Fee-For-Service (FFS) Programs including: <u>DES/DDD Tribal Health Program (DDD THP)⁴</u>, Tribal ALTCS; and <u>applicable</u>all FFS providers, excluding Federal Emergency Services (FES). (For FES, <u>see-refer to AMPM Chapter 1100</u>). This Policy establishes requirements for delivering meals to members living in their own home who are in jeopardy of not consuming adequate nutritious food to maintain good health.

This Policy does not apply to members living in an <u>a</u>Alternative <u>Home and Community Based Services</u> (HCBS) Setting.

II. DEFINITIONS

ALTERNATIVE HOME AND	A living arrangement where a member may reside and receive
COMMUNITY BASED SERVICE	HCBS. The setting shall be approved by the director, and either
<u>SETTING</u>	1. Licensed or certified by a regulatory agency of the state, or
	2. Operated by the IHS, an Indian tribe or tribal organization, or an
	urban Indian organization, and has met all the applicable standards
	for state licensure, regardless of whether it has actually obtained
	the license. The possible types of settings include:
	1. For an individual with an intellectual/developmental disability:
	a. Community residential setting,
	b. Group home,
	c. State-operated group homes,
	d. Group foster homes,
	e. Adult Behavioral Health Therapeutic Homes (ABHTH), and
	f. Behavioral health respite homes.
	2. For an individual who is Elderly and Physically Disabled (E/PD):
	a. Adult foster care homes,
	b. Assisted living homes or assisted living centers, units only,
	c. Adult Behavioral Health Therapeutic Homes (ABHTH), and
	d. Behavioral health respite homes ⁵ .

¹ Date Policy is effective

⁴ Updated for programmatic changes reflecting AHCCCS/DFSM manages responsibilities for Prior Authorization

(PA) and claims processing for acute physical/behavioral/Children's Rehabilitation Services for THP members, and including members with an SMI designation

⁵Adding term to more provide clarity exactly what is included in this setting

² Date Policy is approved

³ The Arizona Section 1115 Demonstration Wavier in October 2022 gave authority for DDD to provide these services.



AHCCCS MEDICAL POLICY MANUAL

CHAPTER 1200 - SECTION 1240 – HOME AND COMMUNITY BASED SERVICES

CONTACTLESS DELIVERY	When a package being delivered has reached its final destination and is left outside the doorstep of the member's home (or otherwise pre-designated location) without making any direct, in- person contact. ⁶
HOME AND COMMUNITY BASED SERVICES (HCBS)	Home and community-based services, as specified in A.R.S. § 36-2931 and A.R.S. § 36-2939. ⁷
HOME DELIVERED MEALS	A service that provides a nutritious meal containing at least one- third of the Federal recommended daily allowance for the member, delivered to the member's own home.
NUTRITIONIST	A person who has a bachelor's or master's degree in Food and Nutrition. ⁸
REGISTERED DIETICIAN	A person who meets all the requirements for membership in the American Dietetic Association, has successfully completed the examination for registration and maintains the continuing education requirements ⁹
MODIFIED ATMOSPHERE PACKAGING	A packaging system that involves changing the gaseous atmosphere surrounding a food product inside a pack and employing packaging materials and formats with an appropriate level of gas barrier to maintain the changed atmosphere at an acceptable level for preservation of the food. ¹⁰
NUTRITIONIST	An individual who has a Bachelor's or Master's degree in Food and Nutrition from an Accreditation Council for Education in Nutrition and Dietetics (ACEND) accredited institution. ¹¹

For additional terms see the AHCCCS Contract and Policy Dictionary¹².

H.III. POLICY

All providers that prepare Home Delivered Meals shall have documentation that they are currently in compliance with local fire <u>codes</u>, and sanitation <u>codes and</u> regulations, and have a food handling/food preparation operating permit issued by the local regulatory authority.

⁶ Added definition to align with the new model proposed for delivery

⁷ Adding term to more accurately provide revised statutes that align with this program

⁸ Moved below for alphabetical order

⁹ <u>Removing from definitions due to policy not referencing a registered dietician</u>

¹⁰ Modified to atmosphere packaging versus food that can be chilled for up to 24 hours.

¹¹ Term expanded upon to meet standards for quality of care

¹² Added to provide hyperlink to the AHCCCS Contract and Policy Dictionary



In lieu of these aforementioned codes and regulations, providers may instead maintain a current Grant of Inspection issued by the U.S. Department of Agriculture.¹³

Each individual preparing or delivering meals shall successfully complete training regarding food preparation and proper storage to ensure maximum nutrition and minimum spoilage. Training shall be documented in each individual's personnel file.

All food contributions to the provider shall be received from a source approved by Arizona Department of Health Services and meet required inspection standards. For example, venison may be received from the Arizona Department of Game and Fish after a meat inspection indicates it meets health standards.

A. SERVICE DELIVERY

One unit of service equals one meal. No more than one unit of service may be provided to a member for any given day. Members may not receive Home Delivered Meals within the same day that attendant care is provided, unless the case manager provides special justification, and it is approved by the Contractor or AHCCCS Tribal ALTCS Unit for Tribal ALTCS members.

B. MENU STANDARDS

Providers of Home Delivered Meals shall comply with the following menu standards. Menus shall:

- 1. <u>Be Pp</u>lanned as hot meals, and allow for an occasional cold meal to provide variety and change.
- Be pProvided for a minimum of four consecutive weeks and <u>considerations should be made to</u> rotated <u>menu</u> three items and offer new menu options when planning menus for the next <u>month</u>times before changing menus for another four weeks.¹⁴
- 3. Provide food choices to accommodate ethnic and cultural preferences.¹⁵ when necessary.
- 4. Written in the dominant language or languages of the <u>member's served.¹⁶participant group</u>.
- 5. Approved by the service provider's Registered Dietitian or Nutritionist prior to posting or disseminating¹⁷.
- 6. Adhere to as written with, substitutions approved by the Registered Dietitian or Nutritionist and documented on the menu.

¹³ Added language for Grant of Inspection issued by United States Department of Agriculture, in lieu of inspection standards

¹⁴ Clarified language

¹⁵ Removed unnecessary content

¹⁶ Clarify reference to participant group

¹⁷ Clarification.



- 7. <u>Be</u> <u>F</u>filed and available for audit inspection at the service provider's place of business for at least one year after the meals have been served.
- 8. <u>Be Pp</u>repared considering the availability of foods during seasons when they are most plentiful.

C. MEAL REQUIREMENTS

- 1. All meals shall be packaged and delivered in a safe and sanitary manner.
- 2. All meals shall be delivered to the member directly or the member's representative (e.g., not left on doorsteps, mailboxes or porches). As an alternative, members may elect for meals to be provided by a vendor that utilizes contactless delivery after being educated by their case manager about the advantages and disadvantages of each option including individualized considerations as they relate to the member's needs and preferences. The case manager shall document a summary of the discussion in the member's case management file and following service verification requirements outlined in AMPM Policy 1620-D to follow up with the member after the initiation of a new service to ensure the service is meeting the member's needs as intended.¹⁸
- Frozen/dried foods for meals are acceptable, <u>including foods delivered in modified atmosphere</u> packaging¹⁹, for use on days when no delivery is available, <u>or, if the member has elected a</u> <u>vendor that utilizes contactless delivery²⁰</u> provided that:
 - a. The meal and meal preparation meet all the standards within this Policy,
 - b. It is verified and documented in the provider's²¹ case record that the member has the ability to properly store and prepare frozen or dried meals, and
 - <u>c.</u> The reason for receipt of multiple meals is documented in the member's <u>provider's</u> case record.
- 4. Upon receipt of a written order from the member's primary care provider or attending physician, meals shall be prepared and served for members who require a therapeutic diet, such as diabetic or sodium-restricted diets. All special diets shall be approved by a Registered Dietitian or nNutritionist.

¹⁸ Clarify members have a choice of a vendor that has contactless delivery versus once the vendor is selected choosing between hand-to-hand delivery or contactless delivery, changes made throughout Policy.

¹⁹ To account for common practice with meals that are packaged for contactless delivery.

²⁰ Recognizing the introduction of the new contactless model; changes made throughout Policy.

²¹ Clarified provider's case record, changes made throughout Policy



- 5. The member's signature and delivery date of each meal shall be obtained and maintained in a central file. If a member is unable to sign <u>his/hertheir</u> own name, due to a physical or cognitive disability, it shall be noted in the <u>provider's case record</u> <u>member's file</u> and one of the following procedures shall be followed:
 - a. The member may sign with <u>his/hertheir</u> mark<u>ed</u> "X," witnessed by a spouse, relative, or friend. The witness shall then write <u>his/hertheir</u> name and relationship, or
 - b. Another <u>person individual</u> (conservator, spouse, relative or friend) may sign for the member only if so designated within the <u>provider's case record</u> member file.
- 6. If the member has chosen a vendor that uses contactless delivery, the following procedures shall be followed to document service delivery.
 - a. The provider, no less than once per month, shall make direct contact with the member to confirm delivery dates and time windows, review member satisfaction and report any behavior/condition change of the member to the case manager. If meals are unable to be left on the member's doorstep, the provider shall have standards and timelines for redelivery that are reviewed during the monthly contact,
 - b. Document delivery through one or more of the following methods:
 - i. Time-stamped photo of the delivery and its location,
 - ii. Driver attestation²², and/or
 - <u>i.iii. Text message or phone call to the member or other designated individual (conservator, spouse, relative or friend) documented within the provider's case record.²³</u>

D. DOCUMENTATION REQUIREMENTS

- <u>Hard copy c</u> ase records shall be <u>kept in the provider's offices in maintained in</u> locked files to ensure confidentiality or filed electronically with only appropriate staff having access²⁴ and kept in the provider's offices.
- 2. If services are not provided as authorized, reasons for non-provision are recorded in provider's case record.
- 3. Printed educational materials regarding a variety of nutrition and health-related topics shall be provided by the Home Delivered Meals provider at least two times per quarter to members who receive these services.
- 4. The provider shall respond to and initiate appropriate corrective action within three weeks to of written concerns/reports from the provider's consulting Registered Dietitian or Nutritionist.

²² Allowing for any of the methods to accommodate providers who utilize third party delivery services.

²³ Requiring two methods for service delivery verification for contactless model

²⁴ Clarify expectations for both hard copy or electronic files