

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGING AND DISABILITY SERVICES DIVISION
POLICY MANUAL**

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POLICY

To promote structure and standards for Developmental Services (DS) Shared Living providers who currently do not fall under an Administering Agency, and who have been providing Residential Support Services (RSS) in Shared Living Arrangements prior to January 2013.

PURPOSE

To provide specific guidelines for the protection, health, and welfare of individuals with developmental disabilities, through the formation, implementation, and enforcement of minimum requirements for providers of RSS in an independent Shared Living Arrangement.

SCOPE

This policy applies to all Developmental Services (DS) Shared Living providers who were contracted with the Regional Centers prior to January 2013.

DEFINITIONS

Administering Agency: A DS Regional Center certified provider organization of supported living services that provides essential administrative oversight and support services to Shared Living providers, such as recruitment, approval to become a provider, quality assurance, training and other such functions.

Legally Responsible Individuals (LRI): Is a legal guardian appointed by the court who has the legal responsibility to manage the affairs of an adult recipient 18 years and older. This does not include minor children under the age of 18.

Natural Supports: Natural supports are the relationships and activities that occur in everyday life. Natural supports usually involve family, household members, friends, co-workers, neighbors, and acquaintances who provide unpaid assistance as part of the natural relationship. Examples include supervision and support with activities of daily living.

Person Centered Plan (PCP): A document and working tool that identifies the individual's interests, personal goals, health and welfare needs; and agreed upon supports and services that are provided through a variety of programs to include Medicaid State Plan, Medicaid Home and Community Based Services (HCBS) Waiver, natural and informal supports, generic community resources and contracted services.

Personal Care Services (PCS): Services that assist the individual with activities of daily living and help them remain in their homes and communities. Examples of PCS include (not all-inclusive): bathing, dressing, light housework, money management, meal preparation, and transportation.

Relative/Immediate Family: Biological or adoptive family members, including but not limited to stepparents, grandparents, great grandparents, siblings, aunts, uncles, nieces, nephews, cousins, and children.

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Residential Support Services (RSS): Individually planned and coordinated services designed to ensure the health and welfare of the individual, and to assist in the acquisition, retention, and improvement in skills necessary to support the person to successfully reside in the community. Residential Support Services are not a substitute for natural and informal supports provided by family, friends, or other available community resources; however, are available to supplement those support systems.

Shared Living Arrangement: An arrangement in which a person, a couple, or a family in the community and an individual with a disability choose to live together and share life experiences.

Shared Living Provider: A self-employed person that provides RSS to an individual with disabilities when both parties have chosen to live together in a Shared Living arrangement. A provider who brings an individual into their existing home in a Shared Living arrangement may not be an employee of the individual or the individual's representative.

Total Family Gross Household Income: The income of everyone (family members, grandparents, relatives, significant others, and any other individuals) residing in the home.

REFERENCES

[NRS 435](#)

[NAC 435](#)

[Nevada Medicaid Services Manual \(MSM\) Chapter 100](#)

[Nevada MSM Chapter 2100](#)

PROCEDURE

A. PROVIDER QUALIFICATIONS AND CONTRACTING

1. Persons providing RSS in independent Shared Living arrangements must meet all qualifications outlined in [NRS 435](#), [NAC 435](#), the [Nevada MSM 100](#) and [Nevada MSM 2100](#), which include, but are not limited to:
 - a. Compliance with State and Federal regulatory requirements, including but not limited to, pertinent requirements as set forth by:
 - 1) Centers for Medicare and Medicaid Services (CMS)
 - 2) Division of Health Care Finance and Policy (DHCFP)
 - 3) Aging and Disability Services Division (ADSD) policies and procedures
 - 4) Disability Services Regional Center policies and procedures

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- b. Meet all the requirements to be enrolled and are in good standing as a Medicaid Provider (Type 38), including maintaining required training and criminal clearance checks pursuant to [Nevada MSM Chapters 100](#) and [Nevada MSM 2100](#);
 - c. Maintain certification by Nevada Developmental Services pursuant to [NRS 435](#), [NAC 435](#) and ADSD Policy and Procedure.
2. All adults residing in the independent Shared Living arrangement who provide RSS to the individual must have at least the following training prior to providing services to the individual:
- a. Intellectual and Developmental Disabilities (ID/DD) (required at orientation and on an as needed basis thereafter);
 - b. Prevention Recognition and Reporting of Mistreatment of Individuals receiving services to include Abuse, Abandonment, Exploitation, Isolation, Neglect, Mistreatment and Serious Injury of Unknown Origin; (required at orientation and on an annual basis thereafter);
 - c. Mental Health as a Co-Occurring Disorder in Individuals with ID/DD (required at orientation and on an annual basis thereafter);
 - d. Incident and Accident Reporting (required at orientation and on an annual basis thereafter);
 - e. Personal Rights/Responsibilities, Dignity, Respect and Due Process (required at orientation and on an annual basis thereafter);
 - f. Disaster and Emergency Preparedness to include fire evacuation, emergency protocols, pool/spa safety as applicable (required at orientation and on an annual basis thereafter);
 - g. Medical Support and Identifying and Managing Medical Emergencies (required at orientation and on an annual basis thereafter);
 - h. Medication Supports, based upon support needs of the individual, up to and including Medication Administration Certification in a DS approved program (required at orientation and on an annual basis thereafter);
 - i. Standard Precautions and Infection Control to include Safe Food Handling (required at orientation and on an annual basis thereafter);
 - j. Person Centered Planning, Person Centered Goals, Plan Implementation and Reporting on Progress (required at orientation and on an annual basis thereafter);
 - k. HIPAA and Confidentiality (required at orientation and on an annual basis thereafter);
 - l. Handling conflict and complaints/grievance procedure (required at orientation and on an annual basis thereafter);
 - m. Positive Behavior approaches and supports based on the needs of the individual, up to and including Crisis Prevention/Intervention Certification through a DS approved program (required at orientation and on an annual basis thereafter);

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- n. Ethics, boundaries and professional behavior (required at orientation and on an annual basis thereafter);
 - o. Documentation and billing requirements (required at orientation);
 - p. "Hands On" job orientation specific to the special needs of the individuals the Shared Living provider will be supporting (required at orientation); and
 - q. HCBS Settings Requirements (required at orientation and on annual basis thereafter);
3. The Shared Living provider must maintain evidence of the type of training, content, dates, length of training, and/or copies of certificates for all adults providing service.
 4. Shared Living providers must demonstrate and maintain ability to fully utilize ADSD's information management technology and must have a computer and hardware that is compatible with the ADSD information management system. It is the responsibility of the Shared Living provider to purchase the requisite equipment.
 5. Shared Living providers must enter into the Provider Service Agreement for Residential Support Services and maintain all State Purchasing and ADSD Contract Office requirements.
 6. Failure to meet these requirements may result in revocation of provider certification and thereby termination of the Provider Service Agreement or application of sanctions, including requiring the Shared Living provider to subcontract with a DS Certified Administering Agency.

B. PERSON CENTERED PLANNING

1. Nevada DS utilizes the person-centered planning process to develop supports and services to all individuals. Shared Living providers are required to participate in the person-centered planning process.
2. At least annually, the Person-Centered Support Team, including the individual served, people chosen by the individual (i.e. family/friends), DS Service Coordinator, Shared Living provider, Jobs Day Training (JDT) provider, and/or guardian will develop a PCP that will identify all the paid and natural supports and services the individual needs and desires in order to achieve their desired outcomes.
 - a. RSS are not a replacement for the natural supports provided by family, friends, household members, etc.
3. All paid supports provided by the Shared Living provider will be included in the individual's PCP and will include the scope and frequency of services and supports to be provided.
4. The Shared Living provider will work with the individual to develop integrated daily life routines and schedules within the home. The Shared Living provider is expected to exercise control over their work.
5. The Shared Living provider is responsible to make investments to obtain home modifications and maintain their home in a manner to meet the needs of the individual. This includes the installation of environmental modifications such as ramps, grab bars, etc.

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C. AUTHORIZATION, SERVICE DELIVERY AND PAYMENT

1. The DS Service Coordinator will authorize all RSS pursuant to the PCP.
2. All service authorizations are individualized and based on a person's tiered level of support as determined by the PCP team per ADSD policy 41-14 (Attachment A) Developmental Services Supported Living Tiered Supports.
 - a. Shared Living is not an appropriate service setting for individual's requiring paid 24-hour supports.
 - b. If identified service needs exceed that of a Tier 3 Shared Living home, then the individual's team must reevaluate the person's appropriateness for Shared Living Services and consider transitioning the person to a higher level of care.
 - c. Activities of Daily Living (Personal Care) needs are not solely a justification for Tier 2 or 3 supports.
3. RSS are not a replacement for natural supports. Natural supports are informal supports and not reimbursable.
4. Shared Living providers must provide services in accordance with the PCP, Social Assessment, and written Habilitation Plans. This includes the completion of due process procedures prior to the restriction of any individual rights.
5. The rate for RSS provided by a Shared Living provider are posted on the [provider rates](#)
6. Shared Living providers must report all incidents as required by policy. This includes incidents that occur during times of natural support.
7. Shared Living providers are required to maintain a daily attendance log per Policy 41-14 Developmental Services Supported Living Tiered Supports (Attachment A).
 - a. Supporting documentation must be submitted each month to show progress towards habilitation goals.
 - b. Billing may not exceed authorized number of days per fiscal year.
 - c. Quarterly progress reporting should include a summary of natural support activities and time.
8. Shared Living providers must disclose if they are providing Personal Care Services (PCS), to the individual they are living with, funded through the Medicaid State Plan to the DS Service Coordinator.
 - a. DS will not contract for services that are covered by PCS. A copy of the current PCS plan and authorization must be kept in the individual record as part of the individual's PCP to ensure there is no duplication of services.
9. The Shared Living providers are responsible for accurate and timely billing to the DS Regional Center for services provided. DS Regional Center will only provide payment for services accurately billed and justified with accurate daily attendance records.
10. Family Shared Living Arrangements must meet financial eligibility criteria as determined by the Regional Center to qualify for a Room and Board supplement. As of April 1, 2024, all Family Shared Living providers must meet financial eligibility criteria as outlined below.

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- a. The total family gross household income is less than 300% of Federal Poverty Level (FPL) Guidelines. This includes earned and unearned income for all individuals living in the household excluding the individual's Supplemental Security Income (SSI). SSI benefits received by other members of the household are not excluded.
 - b. If, at any time, a family's income exceeds the current 300% of FPL Guidelines, the individual is no longer eligible to receive a Room and Board supplement. The Administering Agency is responsible for informing the DS Regional Center immediately of any changes in the household composition that could potentially impact financial eligibility requirements, when and if such changes occur. Failure to notify the DS Regional Center may result in the establishment of a payback agreement with the family to return any funds to the state that were provided when ineligibility was established.
11. Individuals in independent Shared Living arrangements may qualify for respite funding, refer to the DS Policy 36-2 Respite Services (Attachment B). When respite services are utilized, the provider of Shared Living may not bill the DS Regional Center for RSS.
12. Room and Board in non-family Shared Living and applicable Family Shared Living settings will be determined as follows:
- a. Prior to move-in and at least annually, the PCP team must establish a reasonable total cost for the individual's monthly Room and Board per ADSD Policy 41-4 Residential Services Cost of Living Allocations (Attachment C).
 - b. All resources of the individual served, including, but not limited to, Social Security benefits, trust funds, retroactive benefits, food stamps and employment earnings, will be the total resources available for Room and Board costs. Room and Board supplements are only utilized if the resources as described above are not sufficient to cover basic costs and must be approved by the DS Regional Center Program Manager.
 - 1) Individuals will receive the current standard allotment for food and personal needs monies, as determined annually by the DS Regional Centers.
 - 2) Individual's Retained Earnings will match the current Nevada DS Room and Board, Program Rates and Federal Poverty Guidelines. This document is updated annually.
 - 3) The DS Regional Center will not provide funding for furnishing the home or costs for damages incurred, unless prior authorized by the DS Regional Center Program Manager or designee per ADSD Policy 41-13 One-Time Cost Allocations (Attachment D).
 - 4) The DS Regional Center will not provide funding for the purchase or leasing of vehicles.
 - 5) The Housing and Urban Development (HUD) fair market value and local rental pricing will be reviewed to determine if requested rent amounts are reasonable. Housing costs are split between all adults living in the home.

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D. MONITORING SHARED LIVING PROVIDERS

1. DS ensures compliance with this policy, Supported Living Services Standards of Service Provision, Nevada Medicaid Home and Community Based Services Waiver, and current ASD and DS policies and procedures.
2. DS Service Coordinators are responsible to complete Qualified Intellectual Disabilities Professional (QIDP) tasks on behalf of the independent Shared Living provider. These tasks include but are not limited to providing quality oversight of services to ensure maximum positive outcomes for the individual through the creation and updating of habilitation plans and documents and to ensure the consistency of supports across all environments.
3. The DS Service Coordinator will meet the current requirements as outlined in the DS policy 41-8 Administering Agencies and Shared Living Arrangements (Attachment E) regarding monthly contact and quarterly home visits and oversight requirements. These interactions will be to ensure the health, safety and welfare and progress toward the PCP, as well as ensuring the individual has the opportunity to engage in meaningful activities of their choosing.
 - a. The DS Service Coordinator will complete an environmental review at least quarterly.
4. The DS Service Coordinator will conduct a home visit at least every three (3) months to monitor the individual's progress and ensure the Shared Living provider is delivering the supports in accordance with the PCP. The Shared Living provider will be reviewed by the DS Service Coordinator who will document the following:
 - a. Available supports, care, and treatment. This includes, but is not limited to the needs addressed in the PCP;
 - b. Human and Civil Rights are maintained;
 - c. Oversight of self-administration of medication (if applicable) or that the administering of medication follows applicable laws, rules and regulations;
 - d. Person Centered focus is evident;
 - e. Attendance logs are completed timely and accurately;
 - f. Information and documentation management is protected, secure, organized and confidential;
 - g. The Shared Living provider and other family or household members, as applicable, will demonstrate respect for the individual(s) served and include the individual in the day to day family routines;
 - h. Assessment of the physical environment, review of disaster and fire safety plan, required training, community inclusion, personal funds, and vehicle transportation; and
 - i. Discussion of natural support and meaningful activities.
5. Independent Shared living providers will be reviewed by the DS Regional Center Quality Assurance (QA) Unit who will complete certification and other quality reviews.
 - a. DS QA will complete a comprehensive environmental review of the Shared Living provider's home at least annually. A copy of the review results and a

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written summary of corrections implemented will be kept in the Shared Living provider's file for at least one (1) year.

- b. DS QA will conduct certification reviews that will include, but is not limited to, environmental reviews of Shared Living environments, review of records, and interviews with independent Shared Living providers, individuals served, guardians and DS Service Coordinators.
6. DS Regional Center staff may conduct unannounced home visits and investigations at any time. DS Regional Center staff have the authority to examine quality of care and support delivery, the individual's records, physical premises, including the condition of the home grounds, equipment, food, water supply, sanitation, maintenance, housekeeping practices, and any other areas necessary to determine compliance with standards.
 7. In the event there is an allegation of abuse, neglect, exploitation, or mistreatment and the Shared Living provider is the alleged perpetrator, the DS Regional Center will immediately place the individual(s) served in a respite setting until the completion of the investigation to ensure the health, safety and welfare of the individual(s) served.
 - a. The Shared Living provider will not be provided reimbursement for services while the individual(s) is placed in respite.

E. TERMINATION OF CONTRACT BETWEEN THE SHARED LIVING PROVIDER, THE ADMINISTERING AGENCY, OR THE INDIVIDUAL

1. When a provider of a Shared Living arrangement no longer wants to provide services to the individual and/or wants to end its agreement with the DS Regional Center, the Shared Living provider must give a 30-calendar day written notice to:
 - a. The individual(s) served and guardian, as applicable;
 - b. The DS Regional Center;
2. When a Shared Living provider initiates termination and ends the agreement with DS, the provider must assist the DS Regional Center in efforts to facilitate a successful transition.
3. The Shared Living provider is expected to continue working for 30 calendar days unless otherwise determined by the DS Regional Center.
4. Once an individual moves from the Shared Living arrangement, the Shared Living provider must apply through a DS certified Administering Agency if they wish to continue to provide RSS in a Shared Living arrangement.
5. If an emergency occurs and services require immediate termination, the Shared Living provider must give immediate notice to the DS Regional Center.
6. If the Shared Living provider is unable to meet required standards, DS may initiate sanctions, up to and including requiring the Shared Living provider to subcontract with a DS certified Administering Agency.
7. The DS Regional Center may terminate a service agreement for cause at any time.

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ATTACHMENTS

- Attachment A – Policy 41-14 Developmental Services Supported Living Tiered Supports
- Attachment B – Policy 36-2 Respite Services
- Attachment C – Policy 41-4 Residential Services Cost of Living Allocations
- Attachment D – Policy 41-13 One-Time Cost Allocations
- Attachment E – Policy 41-8 Administering Agencies and Shared Living Arrangements

Approved By		
Title	Signature	Date
Deputy Administrator		
Division Administrator or Designee		
Document History		
Revision	Date	Change
original	6/30/2016	Initial policy creation
		Updated language & section C.11 added
Revised	6/7/2024	Added definitions, new section for guidance regarding training needed by adults residing in the independent Shared Living Arrangement providing Residential Support Services, daily attendance log requirements for Shared Living Provider, new guidance for service authorizations based on a person's tiered level of support and guidance for service authorizations based on a person's tiered level of support and DS Service Coordinator responsibilities for monitoring the Shared Living Provider.