Service Plan Hourly Cap Exceptions for Providers Serving an Individual - APD OAR 411-030-0072				
Exception Reason	Example	Local Office Approval	Central Office Approval	
Provider Capacity Exception: In the individual's geographic area there is an insufficient number of homecare workers to meet the individual's service plan, and, despite efforts to find or identify providers, no other resources are available, including in-home agencies, to meet the need.	Sue lives in a rural area and there are no agencies or HCWs that are willing accept her referral to provide the attendant care above 40 hours per week. Sue is asking for an exception to allow her current HCW to work more than 40 hours per week.	No local level exceptions at this time.	Will review all requests submitted. All requests must have documentation of: 1. Referrals made to contract agencies or other local resources 2. An effort made by the individual/ employer to recruit additional providers	
Provider Unable to Work: A homecare worker has quit or has been terminated. The exception is valid for the specified time period in the notice of cap exception approval, or until a replacement homecare worker can be hired, whichever comes first.	Tom has two HCWs. HCW1 is working 30 hours per week; HCW2 is working 25 hours per week. HCW1 is terminated by APD. Tom is asking for an exception to allow the HCW2 to work all of the hours while he searches for a new HCW.	No local level exceptions at this time.	Will review all requests submitted. All requests must have documentation of: 1. Referrals made to contract agencies or other local resources 2. An effort made by the individual/ employer to recruit additional providers	
Out-of-Town Situations: The individual is traveling out of town and needs just one of the homecare workers to accompany them.	Tyler is going on a trip starting Monday through Saturday. He has an assessed need of support 16 hours per day. It is only feasible for Tyler to bring one of his HCWs on his trip. Tyler is asking for an exception to allow the HCW that he is bringing on his trip to work 30	No local level exceptions at this time.	Will review all requests submitted. All requests must have documentation of: 1. Dates must be defined	

	hours more than the 50 hour		
	limit during the trip.		
Relief or Substitute Care:	HCW1 called in sick for her	Local offices may approve	Will review requests when there
A homecare worker does not	shift. Tiffany needs assistance	up to 8 additional hours per	is more than 24 hours per
show up when scheduled due	with taking her medications.	month*	quarter.
to weather, illness, or any	HCW2 has already worked 40	*The consumer's critical	Requests must have
reason and needs are time-	hours this week; however,	need must be documented	documentation of:
sensitive and would risk harm	HCW2 is the identified back-up	in case narration.	1. Reassessment (if need is due to
to the individual if a delay in	provider for Tiffany if HCW1 is	* See <u>APD-PT-15-028</u>	a change in support needs) OR
services occurs. The	unavailable. Tiffany is asking for		2. Referral to or development of
circumstance meets criteria in	an exception to allow HCW2 to		additional resources (if need was
OAR 411-030-0070(7).	exceed 40 hours to provide		due to not having sufficient back
, ,	services critical to her health		up providers that do not exceed
	and safety.		the limits or increased support
	,		needs) OR
			3. Counseling with employer &
			provider as needed (if the
			employer needs more training to
			manage their employer duties or
			the provider needs support to
			provide only the authorized
			amount of service).
Emergent Need:	Charles broke his leg on Friday	Local offices may approve	Will review requests when there
An urgent need for care arises	evening; he usually does not	up to 16 additional hours	is more than 48 hours per
and exceeding the limit is	need paid supports on the	per month. This can be	quarter.
unavoidable without risking	weekends. His HCW has already	approved no more than four	Requests must have
the health and safety of the	worked 40 hours this week.	times per year without	documentation of:
consumer.	Part of Charles's back-up plan is	central office approval*	1. Reassessment (if need was due
Consumer.	to call his HCW in an	*The consumer's critical	to a change in support needs) OR
	emergency. Charles is asking for	need must be documented	2. Referral to or development of
	an exception to allow his HCW	in case narration.	additional resources (if need was
	to work more than 40 hours to		due to not having sufficient back
	to work more than 40 hours to	* See <u>APD-PT-15-028</u>	due to not having sufficient back

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	provide supports for an		up providers that do not exceed
	emergent need.		the limits or increased support
			needs) OR
			3. Counseling with employer &
			provider as needed (if the
			employer needs more training to
			manage their employer duties or
			the provider needs support to
			provide only the authorized
			amount of service).
Unique / Complex Needs:	Danielle has a fragile immune	No local level exceptions at	Will review requests submitted.
The individual has specific ADL	system and a complex medical	this time.	All requests must have
or IADL needs requiring care	regiment that requires a		documentation of:
from a trained existing	specially trained provider to		1. Complex care needs that
provider until additional	provide services in her home.		cannot be met by additional
providers are found and	Danielle is asking for an		providers; AND
trained.	exception to allow her specially		2. Back-up plan; AND
	trained HCW to provide all of		3. An effort to develop a service
	her supports to mitigate her		plan that does not exceed the
	risks of contracting life-		limitations.
	threatening infections and		
	maintain her medical regiments		
	until additional workers can be		
	properly trained.		
	p. sps/		