WAC 388-106-0305 What services may I receive under COPES if I live in a residential facility? If you live in one of the following residential facilities: A licensed assisted living facility contracted with the department to provide assisted living, enhanced adult residential care, enhanced adult residential care-specialized dementia care, or an adult family home, you may be eligible to receive only the following services under COPES:

1. Specialized medical equipment and supplies under WAC 182-543-1000, when the items:
   (a) Are necessary for:
      (i) Life support;
      (ii) To increase your ability to perform activities of daily living; or
      (iii) To perceive, control, or communicate with the environment in which you live; or
   (b) Are directly remediably beneficial to you;
   (c) Do not replace any medical equipment or supplies otherwise provided under either medicaid or medicare; and
   (d) Do not replace the services required by the department's contract with a residential facility;

2. Training needs identified in the CARE assessment that are in addition to and do not replace the services required by the department's contract with the residential facility and that meet a therapeutic goal such as:
   (a) Adjusting to a serious impairment;
   (b) Managing personal care needs; or
   (c) Developing necessary skills to deal with care providers;

3. Transportation services, when the service:
   (a) Provides access to community services and resources to meet a therapeutic goal;
   (b) Is not diverting in nature;
   (c) Does not replace the medicaid-brokered transportation or transportation services available in the community; and
   (d) Does not replace the services required by DSHS contract in residential facilities;

4. Skilled nursing, when the service is:
   (a) Provided by a registered nurse or licensed practical nurse under the supervision of a registered nurse;
   (b) Beyond the amount, duration or scope of medicaid-reimbursed home health services as provided under WAC 182-551-2100; and
   (c) In addition to and does not replace the services required by the department's contract with the residential facility (e.g. intermittent nursing services as described in WAC 388-78A-2310);

5. Nursing services from a registered nurse based on your individual need as determined by your CARE assessment, when you are not already receiving this type of service from another resource, which may include any of the following activities:
   (a) Nursing assessment/reassessment;
   (b) Instruction to you and your providers;
   (c) Care coordination and referral to other health care providers;
   (d) Skilled treatment in the event of an emergency, which requires authorization, prescription, and supervision by an authorized practitioner prior to its provision by a nurse, for example, medication administration or wound care such as debridement;
   (e) File review; or
(f) Evaluation of health-related care needs affecting service plan and delivery.

(6) Adult day health services as described in WAC 388-71-0706 when you are:

(a) Assessed as having an unmet need for skilled nursing under WAC 388-71-0712 or skilled rehabilitative therapy under WAC 388-71-0714, and:

(i) There is a reasonable expectation that these services will improve, restore or maintain your health status, or in the case of a progressive disabling condition, will either restore or slow the decline of your health and functional status or ease related pain or suffering;

(ii) You are at risk for deteriorating health, deteriorating functional ability, or institutionalization; and

(iii) You have a chronic or acute health condition that you are not able to safely manage due to a cognitive, physical, or other functional impairment;

(b) Assessed as having needs for personal care or other core services, whether or not those needs are otherwise met; however

(c) You are not eligible for adult day health if you:

(i) Can independently perform or obtain the services provided at an adult day health center;

(ii) Have referred care needs that:

(A) Exceed the scope of authorized services that the adult day health center is able to provide;

(B) Do not need to be provided or supervised by a licensed nurse or therapist;

(C) Can be met in a less structured care setting;

(D) In the case of skilled care needs, are being met by paid or unpaid caregivers;

(E) Live in a nursing home or other institutional facility; or

(F) Are not capable of participating safely in a group care setting;

(7) Wellness education, as identified in your person centered service plan to address an assessed need or condition;

(8) Community choice guiding are services to help you establish or stabilize your living arrangement in your own home or a residential setting if:

(a) You have frequent institutional contacts;

(b) You have frequent turn-over of caregivers; or

(c) You are in imminent jeopardy of eviction or loss of your current community setting; and

(9) Community support: Goods and services are nonrecurring set-up items and services to assist with expenses if you choose to move from a residential setting to an in-home setting and may include:

(a) Security deposits that are required to lease an apartment or home;

(b) Activities to assess need, arrange for, and obtain needed resources, including essential household furnishings;

(c) Set-up fees or deposits for utility or services access, including telephone, electricity, heating, water, and garbage;

(d) Services necessary for your health and safety such as pest eradication, and one-time cleaning prior to occupancy;

(e) Moving expenses; and

(f) Necessary home accessibility adaptations.