HOME HEALTH AGENCY (HHA)

DELAWARE HOME CARE LICENSURE MATRIX

See regulations links for more information.	Skilled Home Health Agency (HHAS) 3350 Skilled Home Health Agencies (Licensure)	Aide Only Home Health Agency (Unskilled) (HHAAO) 3351 Home Health AgenciesAide Only (Licensure)	Personal Assistance Services Agency (PASA) 3345 Personal Assistance Services Agencies
Model	Medical	Medical	Social
Licensure Fees	\$500 Initial	\$500 Initial	\$250 Initial
	\$300 Annual	\$300 Annual	\$100 Annual
Services Provided	Nursing, Therapies, Social Work, Aides, Companions, Homemakers	Aides, Companions, Homemakers	Direct care workers (DCW), Companions, Homemakers
Director/full-time on	Full-time	Full-time	Full-time
site	Bachelor's Degree or RN PLUS 5 years healthcare experience PLUS 1 year supervisory experience with home health care	Bachelor's degree in a health related field.	At least an Associate's degree plus two (2) years healthcare or homecare supervisory experience.
Clinical Director	Full-time RN, PLUS 1 year home health and supervisory experience	Full-time RN, PLUS 1 year home health and supervisory experience	N/A
Supervision of Services/In-Home Visits	Every 14 days skilled; Every 60 days for pts who require aide-only services RN supervises services	Every 60 days RN supervises services	Every 90 days Director or designee supervises the service plan
Review of Plan of Treatment or Service Plan	Every 60 days	Every 60 days	Every 90 days
Physician Orders	Required	Not required	Not required
Business License	Required	Required	Required
Independent Contractor Business License	Required	Required	Required
Training of aides/direct	75 hour course	75 hour course	Orientation;
care workers – min.	Orientation;	Orientation;	Competency test at hire and
requirements	Training – 12 hours annually; Competency test at hire and annually	Training – 12 hours annually; Competency test at hire and annually	annually
Adult Abuse Registry check	Required	Required	Required
Child Abuse Registry check	Required	Required	Required
Criminal Background check and fingerprinting	Required	Required	Required
Drug Testing	Required	Required	Required
Service Letters	Required	Required	Required
Service Location	Primarily in patient's place of residence Geographic Area Served: county of office location plus adjacent	Primarily in patient's place of residence Geographic Area Served: county of office location plus	Primarily in consumer's place of residence Geographic Area Served: county of office location plus adjacent county
Insurance	Appropriate coverage to compensate patients from injury or loss	Appropriate coverage to compensate patients from injury or loss	Appropriate coverage to compensate patients from injury or loss (See Reg. #7.0)