



Community Alternatives Program 1915 (c) HCBS Waiver July 2017 Department of Health and Human Services Consumer-Direction Training for CAP Beneficiary



## **Training objectives**

- Overview of consumer-direction
- Role and responsibilities of key players in consumerdirection
- Purpose of the self-assessment questionnaire
- Ensuring the health, safety, and well-being while directing care
- How to complete the self-assessment questionnaire and understand the results
- Enrollment steps



Consumer-direction is an option in the CAP waiver that allows the CAP beneficiary or designee to act in the role of employer by:

- $\odot \mbox{Freely choosing who will provide care;}$
- oRecruiting, hiring, and firing employee(s);
- Negotiating the wages to pay employee(s);
- **OSelecting the hours of care that best meet family needs; and**
- Creating a schedule and a task list that best meet family needs.



**5** Principles of consumer-direction:

- 1. <u>Freedom</u> to determine a meaningful life by identifying the amount, frequency, and duration of needed services
- 2. <u>Authority</u> to control budget with assistance and support
- 3. <u>Support</u> in obtaining formal and informal resources to achieve goals and meet needs
- 4. <u>Responsibility</u> in using public funds wisely
- 5. <u>Confirmation</u> by embracing a leadership role



**Benefits of consumer-direction:** 

- Control over care plan and service provisions
- Greater access to care
- Reduction of unmet needs
- Freedom to select relatives, neighbors, church members, and friends to provide care
- Increased satisfaction of care
- Ability to negotiate wages to maximize available hours of care



#### **Employer of record:**

#### • Develops a job description that includes:

- ○Task list
- **Time schedule**
- **Other job requirements**

#### • Maintaining confidentiality in the areas of:

- Wages
- O Personnel issues

#### Conducting performance evaluations to monitor:

- **OPerformance of tasks**
- ${\scriptstyle \odot}$  What is working and not working
- **O** Areas of improvement



**Compliance with Fair Labor Standards Act Final Rule** 

Minimum wage protection

- All employees must be paid at least the current state minimum wage

Overtime protections

 Any time worked over 40 hours must be compensated at time and half of the pay rate

• Live-in domestic service employees

 Individuals who reside in the home of a beneficiary are exempt from overtime protection

#### **Overview of consumer-direction** *Provider-Directed care verses Self-Directed care*

#### **Provider-directed care**

Hired staff is managed by in-home care agency

Job description & recruitment is routine and not person-centered

Pay rate based on market rates

In-home aide agency manages payroll, performance evaluations, and rescheduling of staff

The case manager takes lead coordinating the care needs

#### **Self-directed care**

Beneficiary is the employer

Beneficiary develops a personcentered job description and recruits the right employee(s)

Beneficiary negotiates rate of pay

Beneficiary supervises, manages, and trains employee(s)

Beneficiary takes lead in coordinating care needs



**Eligibility Criteria:** 

- Approved for enrollment in the CAP waiver
- Completion of a self-assessment questionnaire that identifies ability to direct care
- A display of cooperativeness with current plan of care
- Participation in and completion of consumer-directed orientation and training sessions



Beneficiaries who elect the consumer-direction model have the option to direct the following CAP services:

- In-home aide services
- In-home respite
- Pediatric personal care services
- Pediatric personal care respite

#### Role and responsibilities of key players in consumer-direction



# Overview of Consumer-Direction Key players



Key player; CAP beneficiary is the employer of record and responsible for:

- Recruiting, hiring, training, supervising, and terminating the employee(s)
- Negotiating rate of pay for employee(s)
- Developing job description and work schedule for employee(s)
- Maintaining records of timesheets and task sheets
- Assisting in the development of the consumer-directed person-centered service plan
- Creating an emergency back-up and disaster plan to ensure care needs during an emergency or unplanned occurrence
- Monitoring care expenditures to ensure alignment with plan of care in terms of pay rate and approved hours
- Collectively collaborating with the care advisor and the financial manager to manage health, safety, and well-being

Key player; Care advisor is a person assigned to support the beneficiary in completing consumer-direction tasks such as:

- Facilitating trainings and orientation sessions
- Assisting with referral to financial manager and obtaining financial documents
- Assisting in creating plan of care and emergency and disaster back-up plan
- Assisting in managing health care expenses
- Coordinating traditional services in the event of an emergency or unplanned occurrence

Key player; Division of Medical Assistance (DMA) is the agency designated to manage the CAP waiver programs. The agency oversees the management and operation of CAP providers by:

- Developing and managing CAP programs policies and processes
- Making initial and ongoing trainings available to direct service providers and the beneficiaries
- Monitoring critical incident reports to ensure health safety and wellbeing of beneficiaries in consumer-direction
- Creating technical guide for the administration of consumer-direction
- Providing oversight to CAP providers
- Reviewing plans of care

Key player; personal assistant is a person hired by the CAP beneficiary to carry out the health care tasks to meet needs by completing and maintaining responsibility for the following tasks:

- Assisting the beneficiary with ADL's, IADL's, and limited home maintenance tasks
- Adhering to the required tasks identified in the beneficiary's plan of care
- Completing tasks and timesheets correctly; signing and submitting to the beneficiary for approval by the agreed upon date
- Discussing job related concerns with the beneficiary when they occur to seek and implement a resolution
- Notifying the beneficiary of any changes in personal information such as name, address, and telephone number, as soon as they occur
- Maintaining confidentiality

Key player; Financial manager is an agency to assist in managing financial administrative functions of consumer-direction such as:

- Providing training to educate on financial aspect of consumerdirection
- Establishing an IRS Employee Identification Number (EIN) for the purpose of establishing employer of record
- Establishing the pay rate based on the preferred rate and Medicaid maximum limits
- Completing criminal background and NC Health Care Registry checks
- Processing payroll
- Maintaining financial records

#### **Purpose of the self-assessment questionnaire**



#### **Purpose of the self-assessment questionnaire**

- Determine if consumer-direction is the right fit
- Identify total care needs of the beneficiary to assist in the development of a care plan and task list
- Identify if availability of time is sufficient to commit to the tasks required to be an employer
- Identify informal network to ensure availability of potential employee(s)
- Determine training needs for the individual responsible for directing care as well as the employee(s)



## **Completing the self-assessment questionnaire**

• The individual responsible for directing care will complete the self-assessment.

– Parents of a minor, legal guardians, and representatives

- Questions related to health and services needed will be answered from the perspective of the beneficiary.
- Questions related to consumer-direction responsibilities will be answered from the perspective of the individual responsible for directing care.



#### **Ensuring the health, safety, and well-being**



## Ensuring the health, safety, and well-being

An emergency back-up and disaster plan is used to communicate the special care needs in times of a crisis or unavailability of the personal assistant.

- Emergency plan should include:
  - Primary caregiver name and contact number
  - Name and number of an emergency contact person
  - Evacuation plan
  - Doctor's name and contact information
  - Poison control contact information
  - Medication list
  - Allergies
- Emergency plan should be used when:
  - Regularly scheduled employee(s) is unavailable
  - Care needs changes
  - Primary caregiver is unavailable
  - Emergency situations

#### **Ensuring the health, safety, and well-being**

- Disaster plan must include the following:
  - Important people to contact
  - Nearest community shelter
  - Type of shelter that may meet special needs
  - Need for special equipment at a shelter
  - Special care needs requirements
  - Displacement contact number so check of well-being may be verified and to arrange for the continuation of services
  - Evacuation plan
- Disaster plan should be used in event of:
  - -fire
  - -hurricane
  - -tornado
  - flood
  - other natural disaster



#### **Ensuring health, safety, and well-being**

- Hiring the right employee(s) to meet care needs
- Writing specific and person-centered classified ads to recruit the right person
- Recruiting the right person based on the self-assessment questionnaire skill validation assessment
- Identifying training needs and coordinating participation in training
- Building a network from friends and family to assist with additional care coverage as needed
- Negotiating the right pay rate based upon skill level and to ensure commitment and longevity

#### **Ensuring health, safety, and well-being**

Asking the right questions during recruitment:

- What is your experience working with medically fragile, disabled, or aged individuals?
- Do you have time restrictions?
- What are your strengths as an employee?
- Describe the duties and responsibilities of your previous job.
- Do you have limitations or require any accommodations?

#### **Ensuring the health, safety and well-being**

Developing a solid person-centered plan of care to outline the following:

- Health care and personal goals
- Preferences
- Likes and dislikes
- Type of services in the amount, frequency, and duration
- Cost of services as negotiated
- Specific tasks to meet needs

# **Ensuring health, safety, and well-being**

Understanding criminal history to select the right employee(s)

Lifetime Ban List

The following convictions restrict an individual from employment as a personal assistant:

- Felonies related to manufacture, distribution, prescription, or dispensing of a controlled substance
- Felony or misdemeanor health care fraud
- More than one felony conviction
- Felony for abuse, neglect, assault, battery, criminal sexual conduct (1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> degree), fraud or theft against a minor or vulnerable adult
- Felony or misdemeanor patient abuse
- Felony or misdemeanor involving cruelty or torture
- Misdemeanor for abuse, neglect, or exploitation of a minor or disabled adult
- Substantiated allegation of abuse, neglect or exploitation listed with the N.C. Health Care Registry
- Any substantiated allegation listed with the NC Health Care Registry that would prohibit an individual from working in the health care field in the state of NC

### **Ensuring health, safety, and well-being**

Validating qualifications of the personal assistant to ensure that he or she meets the criteria

The personal assistant must:

- Be 18 years of age or older
- Be a U.S. citizen or legal alien authorized to work in the U.S.
- Have a state issued picture I.D. and Social Security Card
- Have the ability to successfully communicate needs and concerns
- Complete all required paperwork and trainings
- Have current CPR certification
- Be able to pass a criminal background and N.C. Healthcare Registry check
- The personal assistant cannot:
  - $\circ$  Be a representative, power of attorney, or legal guardian
  - $\odot$  Be a parent, parent's spouse, parent's significant other of a beneficiary under the age of 18 years old

## **Ensuring health, safety, well-being**

**Reporting critical incidents** 

- Any incident that has the potential of impacting the health, safety, or well-being must be reported. Examples include:
  - Hospitalizations
  - Emergency room visits
  - Falls
  - Accidents requiring care beyond first aid
  - -Abuse
  - -Neglect
  - Exploitation
- Critical incidents should be reported to your care advisor the day of or within 72 hours of the incident.
- Mandatory reporting is required for abuse, neglect, and exploitation. Reports shall be made to your local Department of Social Services.

## **Ensuring health, safety, and well-being**

Recognizing, preventing, and reporting Medicaid fraud, waste, and abuse

Examples of fraud, waste, and abuse include the following:

- Recording work hours on timesheet that was not worked
- Knowingly approving incorrect timesheets
- Providing medically unnecessary services
- Allowing unauthorized individuals to provide services

#### **Preventing Medicaid fraud, waste, and abuse**

- To not authorize a person or service that is not covered in the person-centered plan of care or has not met the qualifying criteria
- To list services on the task list that will assist in managing the ADLs or IADLs of the beneficiary and are medically needed
- To not allow a person to begin work until approval is granted and all required paper work has been completed and received by the financial manager

\*Suspected incidents of fraud, waste, and abuse must be reported immediately to:

Medicaid fraud, waste, and program abuse tip-line at 1-877-DMA-TIP1 (1-877-362-8471)

#### **Enrollment in consumer-direction**



#### **Enrollment in consumer-direction**

- Notify your case manager of your desire to consumer-direct
- Your case management entity will schedule a consumer-direction orientation (discussion and counsel) to provide an overview of consumerdirection
- Upon completion of the orientation; you will be provided with a consumerdirection technical guide, self-assessment questionnaire, and Department of Labor information
- Complete the self-assessment questionnaire; return to care advisor
- The care advisor will review the results of your self-assessment to determine readiness;
- Beneficiary will participate in consumer-direction training; if readiness is validated



#### **Enrollment in consumer-direction**

- Care advisor coordinates referral to the selected financial manager; financial manager will schedule an orientation/enrollment session with beneficiary
- Beneficiary begins to recruit personal assistant (if one has not already been identified)
- Notify your care advisor once your personal assistant is approved for hire and provide competency validation
- Beneficiary and the care advisor will create a personcentered consumer-direction plan of care and all other required forms for approval; when all eligibility steps are met,
- Consumer-direction services may begin



# Things to discuss with your financial manager

- Do you want one personal assistant to work the authorized in-home aide hours and respite?
- Does the beneficiary have an alternate schedule?
- When are timesheets due? How can timesheets be submitted?
- Who can I contact if there is an issue with my personal assistant's pay?

- How many personal assistants will you employ?
- What will the pay rate be for your employee(s)?
- Is the beneficiary authorized to receive over 40 hours of in home personal care?



#### **Person-centered consumer-direction plan**

The financial manager provides the negotiated rate to the case management entity to finalize the cost summary of the plan.

The consumer-direction plan of care will consist of:

- Person-centered goals
- Service needs in the amount, frequency, and duration
- Financial management services monthly fees
- Care advisement
- Cost of employee(s) pay rate of personal assistant, including state and federal taxes, if applicable

## **Tasks following consumer-direction approval**

- Monitoring and supervising personal assistant
- Collecting, providing, and submitting forms for the personal assistant to the financial manager
- Evaluating performance and skill level
- Identifying opportunities for training or the need for additional skills
- Submitting timesheets for the personal assistant
- Follow up to financial management agency to resolve issues of late or non-payment for the personal assistant

\*Because of joint employment restrictions, the care advisor is not responsible for these tasks nor can he or she provide assistance

## **Financial Management Agencies**

GT Independence 1-877-659-4500 https://www.gtindependence.com/

Outreach Health (888) 703-1316 http://www.outreachhealth.com/

Rayni Enterprise 704-492-1631

raynimarketing@gmail.com

(Rayni Enterprises is limited to the following counties: Mecklenburg, Gaston, Catawba, Iredell, Cleveland)

# **Questions?**

