Consumer-Directed Care

Principles of Consumer Directed Care

Definition of Consumer Directed Care

Truly being in charge of one’s own provision of services by selecting one’s own services and supports and actively planning and managing these services and supports independently

Definition of Consumer Directed Care

- Consumer-direction offers people choice and control over the types of services provided and when, where, and by whom those services are delivered
- The consumer takes responsibility for planning and controlling services
- The consumer necessarily takes on risks that were previously assumed by provider agencies and case managers
Five Principles of Consumer Directed Care

- **Freedom** to lead a meaningful life in the community
  - Consumers will be able to control resources through individual budgets, make decisions about kinds of support they receive and the people who will provide that support, and alter the configuration of their supports as their life situations change or as they gain more experience in making choices.

- **Authority** Consumers will have meaningful control over a specific amount of funds that make their supports possible. When consumers need assistance in controlling dollars and planning their lives, they themselves will decide who will provide that assistance.

- **Support** - The arranging of resources and personnel – both formal and informal – that will assist consumers to live a life in the community that is rich in social associations and contribution. Consumers will have the assistance they need to plan and live their lives. Much of that assistance should come from an informal network of family and friends. The consumers should receive the help they need to develop informal relationships and thereby increase their participation in the social, economic, cultural, and spiritual dimensions of their community.
Five Principles of Consumer Directed Care

- **Responsibility** – Consumers accept responsibility for giving something back to their communities, for developing their unique gifts and talents, and for assuming the risks associated with the choices they make. People in support roles have a responsibility to insure that the risks taken by the consumer are reasonable, safe, and will lead to further growth.

- **Confirmation** – the importance of empowering the new leadership role

Main Emphasis of Consumer Direction

- More choices
- More control
- Greater flexibility
- More responsibility
Goals of Consumer Directed Care

- To give individuals choice and control over their services, as much as possible
- To be flexible in the use of public funds to meet each individual’s needs
- To use public money wisely and appropriately
- To support individuals in their homes and communities

Goals of Consumer Directed Care

- Consumer directed care offers opportunities for professionals to focus their skills on those who need them most
- Consumer directed care also increases their ability to make a good impact on people’s lives by enabling them to do more for themselves and have more personalized supports

Features of Consumer Directed Care

- Participant-centered plan
- Participant budget
- Participant directions of services
- Personal Assistant
- Financial Manager
- Care Advisor
Features of Consumer Directed Care

- Participant-centered plan
  - Evolves from a process led by a participant
  - Reflects on participants chosen goals, preferences, needs, strengths, and desired outcomes
  - Identifies paid and unpaid people and supports in participants life
  - Identifies services, equipment, and supplies needed
  - Specifies time, place and ways to receive services

- Participant budget
  - Involves participant, case advisor and others
  - Identifies participant’s resources, including funding allocations, employment income and other sources
  - Outlines how funds will be spent on services, supplies, equipment and other needs
  - Receives funding agency approval for public funds
  - Must follow funding agency rules

- Participant directions of services
  - Within funding source rules, the participant decides...
    - Whom to hire to provide supports
    - How, when and where supports are provided
    - What equipment and supplies to buy
    - From which supplier, store or vendor to purchase items
Features of Consumer Directed Care

- Personal assistant
  - Works under the direction of the participant
  - Works when and where the participant chooses
  - Uses material, equipment and methods selected by the participant

Features of Consumer Directed Care

- Financial Manager
  - Processes checks for personal assistant wages and other expenses
  - Withholds state and federal taxes from wages
  - Files required state and federal documents
  - Gives participant updates on budget and expenses

Features of Consumer Directed Care

- Care Advisor
  - Helps people to think through how much help, if any, they require to plan and organize their support plan, and help people find the necessary help
  - Provides support directly by helping people to plan and organize their support and services
Features of Consumer Directed Care

- Both informal and formal supports can assist with services as needed, including family members and professional staff members chosen by the participant.
- An emergency plan to assure adequate coverage is implemented to ensure health, safety and well-being.

Key Players of Consumer Directed Care

- The participant (CAP client)
- The representative/Care Director – the person acting on behalf of the participant
- The Personal Assistant - hired person to assist with care
- The Case Advisor (CA) – similar to Case Manager
- The Financial Manager (FM) - fiscal intermediary

Why Consumer Directed Care?

- Supreme Court decision on L. C. & E.W. v. Olmstead
- Under the ADA and Olmstead - Consumers must be given the opportunity, support and authority to make decisions about their services and how they are provided
- Quality improvement - consumer is frontline
Protections for Participant
- Resources and training for participants
- Oversight by Care Advisor
- Option to return to traditional services

Consumer Directed Care

Comparison of CAP/C and CAP-C/Choice

What is CAP-C/Choice?
- CAP Choice is an additional option within the traditional CAP/C program
- The program allows families the opportunity to direct and have increased control over how, when, and in what amount services/resources are provided.
Assessment completed to determine client needs.

Plan of Care is developed based on needs discovered during the assessment.

Client gives input regarding their choice of service providers.

Services are arranged based on client need, client choice, availability of Provider Agency staff & community resources.

Participant plans services based on assessed needs, lifestyle needs, service options & budgetary limitations.

Participant Develops an Emergency Plan for times when services do not happen as planned.

Participant communicates desired service arrangements with Care Advisor.

Participant makes a job description, recruits & hires the Personal Assistant

<table>
<thead>
<tr>
<th>Traditional Service</th>
<th>Choice Service</th>
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<tbody>
<tr>
<td>Case Manager</td>
<td>Care Advisor</td>
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<tr>
<td>Financial Manager</td>
<td></td>
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<tr>
<td>Nurse, Pediatric Nurse Aide, or Personal Care Aide</td>
<td>Personal Assistant</td>
</tr>
<tr>
<td>Respite (Institutional or In-Home)</td>
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</tr>
<tr>
<td>Home Mods, Vehicle Mods, CTF</td>
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<tr>
<td>Palliative Care</td>
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<td>Caregiver training and Education</td>
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<td>Waiver Supplies</td>
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**Consumer Directed Care**

**CAP-C/Choice**

**Personal Assistant Services**

<table>
<thead>
<tr>
<th>Traditional CAP</th>
<th>CAP-C/Choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Home Care Provider is the employer of the aide/nurse.</td>
<td>The Participant is the Employer of record for the Personal Assistant.</td>
</tr>
<tr>
<td>Home Care Provider develops a job description &amp; recruits the aide/nurse.</td>
<td>The Participant develops a job description and recruits the Personal Assistant.</td>
</tr>
<tr>
<td>Home Care Agency offers rate of pay and benefits.</td>
<td>The Participant negotiates the rate of pay and other benefits for the Personal Assistant (after consultation w/ the Financial Manager).</td>
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</table>

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<tr>
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<th>CAP-C/Choice</th>
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<tr>
<td>Home Care Provider completes background checks for the aide/nurse and determines if they want to hire.</td>
<td>The Financial Management Agency completes both criminal background checks and registry/license verification.</td>
</tr>
<tr>
<td>The Participant reviews the results of the background checks with the Care Advisor to assure understanding of results.</td>
<td>The Participant makes an informed decision about hiring prospective Personal Assistant.</td>
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</tbody>
</table>
Traditional CAP

Home Care Provider hires, supervises and manages the aide/nurse.

Case manager is responsible for communicating needed tasks and work schedules to the Home Care Agency.

CAP-C/Choice

Participant supervises, manages & trains the Personal Assistant.

The Participant prepares an outline of duties and a work schedule for the Personal Assistant & communicates this to the Care Advisor.

What supports are given to the personal assistant?

- Training for participants on how to manage supports
- Hiring agreement between the participant and personal assistant
- State and federal laws and regulations for employers

Basic Qualifications

- At least 18 years of age
- Not legally responsible for the consumer
- Not acting as the Care Director
- At the nurse level, must have an active and unrestricted RN or LPN license from the NC Board of Nursing or compact state
- Satisfactory criminal background check
- Other requirements as specified by the participant
People with the following findings on their criminal background check may not work as a Personal Assistant

- Felonies related to manufacture, distribution, prescription or dispensing of a controlled substance.
- Felony health care fraud.
- More than one felony conviction Felony for abuse, neglect, assault, battery, criminal sexual conduct (1st, 2nd or 3rd degree), fraud or theft against a minor or vulnerable adult.
- Felony or misdemeanor patient abuse.
- Felony or misdemeanor involving cruelty or torture.

- Misdemeanor health care fraud.
- 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.

Consumer Directed Care

CAP-C/Choice
Care Advisement Services
Role of the Care Advisor

- Assesses the consumer for strengths and needs and the ability to direct his/her own care
- Empowers consumers to define and direct their own personal assistance needs and services
- Provides orientation and training on consumer-directed care to the Care Director

Role of the Care Advisor

- Assists the Care Director in developing a plan of care that contains paid services, unpaid services, and supports needed by the participant to live successfully in the home and community. Guides and supports the Director, rather than directs and manages the Director through this process.

Role of the Care Advisor

- Coordinates and authorizes traditional in-home aide services when the participant-directed personal assistant or other informal supports are not available.
- Monitors the provision of care and expenditures
- Maintains contact with the participant and Director to assure that the needed care is being provided
Challenge for the Care Advisor

- Shifting from doing to empowering
  - Overcome deficit thinking
  - Realize that doing more than is really necessary fosters undue dependence

Qualifications

- Same as CAP/C case manager
- The Care Advisor is a specialized case manager from a CAP/C case management agency with an understanding of consumer-directed care and the ability to facilitate rather than direct care planning and service delivery.

Consumer Directed Care

CAP-C/Choice
The Consumer/Care Director
Role of the Care Director

- Makes decisions about the best way to meet their needs
- Select services, supplies and equipment
- Determines the level of help needed from others and care advisor
- Is the “employer of record”
- Select, hire and train their personal assistant(s)
- Determine rate of pay for personal assistant

Anyone can potentially self-direct

- What skills are needed?
  - Advocating to assure health, safety and well-being
  - Understanding a budget
  - Realizing limits or caps to Medicaid
  - Manipulating the budget to gain all needed services/supports
  - Negotiating services
  - Assigning personal care tasks and monitoring the personal assistant

Skills Needed

- Understanding the involvement with the IRS and being an employer
- Understanding the need to make financial adjustments when necessary
- Realizing and understanding a need and planning to meet that need
- Understanding how Medicaid funding works and the accountability for public funding
- Ability to work independently as well as work collaboratively with CA and FM
Skills Needed

- Overseeing the quality of services received and keeping the CA informed when services are inadequate for need
- Enforcing personal care compliance by disciplining or firing an inadequate personal assistant
- Troubleshooting and make plans for emergencies

The Self-Assessment Checklist

These skills will be identified through a Self-Assessment Checklist.

The Self-Assessment checklist enables a person to identify their own understanding, needs and ability to self-direct.

Self-Assessment Checklist

The checklist will answer questions of:
- Readiness and ability to self-direct
- What are training needs
- Informal support network
- Ability to advocate for self and make sound choices/decisions
- It has a readiness scale. The scale is fluid which allows a potential care director to float and build competencies
Training Needs

- Care Advisor will use self-assessment checklist to determine gaps to provide training that assures needs are met and good outcomes are achieved
  - Competencies – build on these areas to empower
  - Areas of inadequacies – focus closely to build competencies

Training Needs

- Care Advisor will provide the consumer educational and training materials to set the stage of awareness of core tasks of consumer-directed care:
  - Developing a POC and managing a budget
  - Obtaining services from vendors and hiring employees
  - Drafting tasks and timesheets
  - Writing job descriptions, etc.

Training Needs

- A Director will not immediately grasp all skills needed.
- This process may take up to 3 to 6 months for semi-independence and autonomy.
- The Care Advisor will need to be more actively involved during this learning stage to guide, teach and counsel
Care Director Qualifications

- Has the necessary skills as determined by the readiness assessment
- May be the legal guardian
- May not be the Personal Assistant or other paid caregiver

Consumer Directed Care

Administering CAP-C/Choice

Admission
Inquiry and Referral

- During screenings/referrals inform participant of the two options of CAP/C
- Those interested in Choice send Choice manual and brochure along with other information normally sent to the potential participant.

**CAP Choice Participant**

- Directs the services that they want to receive.
- Communicates with Care Advisor.

**Care Advisor**

- Completes the assessment plan of care, service authorizations and participation notices, etc...
- Forms in e-CAP.

**FLOWCHART FOR NF LOC**

- FL2 for NF LOC
- FL2 Approved by HP
- Interested in Traditional CAP/C
- Assessment Completed For CAP/C Participation

**FLOWCHART FOR CAP Choice**

- Interested in CAP Choice
- Provide CAP/C/Choice Training Materials
- Assessment Completed For CAP/C Participation
- Assessment of ability to direct care.
After the Assessment, if Person seems Eligible for CAP/C:

**Traditional CAP/C**
- Person or Responsible Party able to direct care
- Referral made to Financial Intermediary
- Participant Recruits a Personal Assistant
- Participant chooses the services they want in POC & Develops Emergency Back-up Plan
- Care Advisor enters Plan of Care into e-CAP.

**CAP/C/Choice**
- Person or Responsible Party not able to direct care
- Use results of Skills Assessment to build person’s skills & work toward goal of directing care.
- Referral made to Financial Intermediary
- Participant Recruits a Personal Assistant
- Participant chooses the services they want in POC & Develops Emergency Back-up Plan
- Care Advisor enters Plan of Care into e-CAP.

CM Develops Plan of Care based on assessed needs.

**After the Plan of Care is Entered into e-CAP**

**Traditional CAP/C**
- Care Advisor & Participant consult with Financial Intermediary to determine range of pay rate to be negotiated with Personal Assistant
- Participant negotiates rate of pay with the Personal Assistant
- Once rate of pay is negotiated, the cost of Personal Assistant services can be finalized in e-CAP.
- CM reviews Plan of Care with the client & obtains their signature.
- CAP/C paperwork is submitted to DMA approval.

**CAP Choice**
- Care Advisor enters Plan of Care with the participant & obtains their signature.
- Care Advisor reviews Plan of Care with the participant & obtains their signature.
- CAP-C/Choice paperwork is submitted to DMA for approval.

**After CAP/C Approval**

**Traditional CAP/C**
- CM sends approval letter & necessary documentation to Medicaid worker & client.
- The CAP/CM / Care Advisor arranges for various services listed in the Plan of Care on behalf of the client to meet the client’s needs.
- Selected providers receive Service Authorizations or Participation Notices to begin services.

**CAP Choice**
- Care Advisor sends approval letter & necessary documentation to Medicaid worker & client.
- Care Advisor indicates to Medicaid that this is a CAP-C/Choice participant.
What about the people already on CAP-C?

- They can transition to Choice
- Forward the Choice participant manual and brochure, request that the self-assessment checklist be completed and returned
- Upon receipt of the self-assessment checklist, identify competencies/areas of need to implement a training series

What about the people already on CAP-C?

- Once the training is completed and the client as well as the Care Advisor feel confident that the consumer is ready to self-direct:
  - Arrange a convenient time with the Participant to initiate the Choice process of identifying care needs, hiring personal assistants and working with the FM
  - Inform FM for coordination of financial management

What about the people already on CAP-C?

- Revise the POC
- Seek final approval from the FM of the pay rate of the PA prior to approval of the POC
- Continue to provide case management, but under the guidance & directive of the consumer
Traditional CAP/C
The case manager monitors all services listed in the Plan of Care to assure that they are being provided per Plan of Care and are meeting their intended purpose.
The client & the staff sign the staff's timesheet to verify that the tasks and time documented were actually provided.
The provider sends claims to CCME for review and approval before billing Medicaid.

CAP-C/Choice
The Care Advisor monitors all services listed in the Plan of Care to assure that they are being provided to meet participants needs.
The Participant takes responsibility to verify the accuracy of timesheets and services provided by their personal assistant and submits accurate documentation, as appropriate to the Financial Intermediary to bill Medicaid.
Participant sends the verified and approved timesheets to Financial Intermediary to bill Medicaid. Only authorized time will be billed.

Traditional CAP
The IHA Provider bills Medicaid for only services that have been authorized by the Case Manager.
The IHA Provider pays the Aide for providing care.

CAP Choice
The Financial Intermediary will review timesheets for accuracy & bills Medicaid for only services that have been authorized through Care Advisor.
The Financial Manager pays the Personal Assistant after billing Medicaid and deducting taxes from the employees’ paychecks.
The Financial Intermediary will give a monthly report to the Care Advisor indicating specific services billed to Medicaid for the month.
Consumer Directed Care

Key Points

Most importantly
- The Choice participant is in charge of services and choices that will meet needs.
- The consumer will consult with the Care Advisor and the Financial Manager to seek assistance/guidance in achieving their desired goals.
- The Care Advisor’s role is very important in assisting, teaching and counseling.