

What Caregivers Need to Know about Consumer Directed Home Care

Consumers, Case Managers, Home Care
Workers & Fiscal Intermediaries

William C. Lane Ph.D.

William Lane Associates, LLC
P. O. Box 368
Delmar, NY 12054
518-475-9605
lanewc@verizon.net
www.williamlaneassociates.com

Some Basic Principles of Consumer Directed Home Care

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Sorting Out the Terminology

- **Programs** – consumer directed, participant directed, self-directed
- **Individuals** – consumers, participants
- **Professionals** – case managers, counselors, consultants, support broker, care coordinators

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“The term consumer direction (CD) describes programs that offer **maximum choice and control** for people who use services or other supports to help with daily activities. In consumer directed programs, people with disabilities can choose to select, manage, and dismiss their workers. They can decide which services to use, which workers to hire, and what time of day they will come and arrive.

Source: NCOA & NASUA (2004)

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The Consumer Orientation of the Aging Network

“Freedom, independence, and the free exercise of individual initiative in planning and managing their own lives, full participation in the planning and operation of community-based services and programs for their benefit, and protection against abuse, neglect, and exploitation.”

Source: Title I, Objective 10 of the *Older Americans Act* (AoA, 2003)

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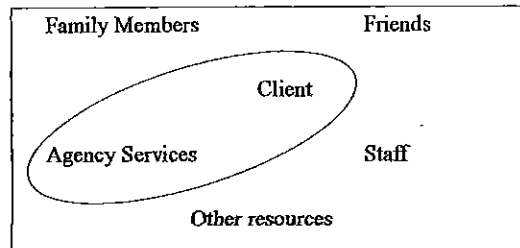
Roles and Assumptions in all Consumer Directed Models

- **Consumers and their families** know best how to manage the care they need
- **Programs** know how to conduct assessments, support consumers and access other services
- **Fiscal Agents** understand IRS regulations, employment law, benefit management, workers compensation and insurance
- **Strength-based approach**

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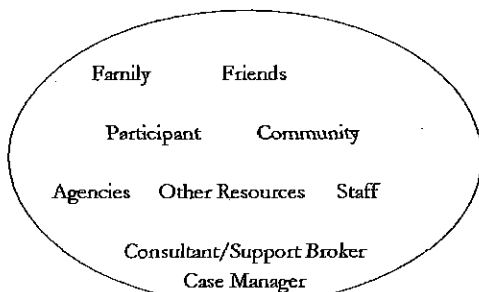
Traditional Home Care



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Consumer Directed Home Care



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Comparing Traditional and Consumer Directed Home Care

Traditional

- Conduct an MDS assessment
- Determine Program eligibility
- Develop a care plan with the client

Consumer Directed

- Conduct an MDS assessment
- Determine Program eligibility
- Offer appropriate consumers a CD option
- Develop a care plan with the consumer

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Comparison Continued

Traditional

- Authorize and arrange all services
- On-going client monitoring and services follow-up
- Conduct reassessment
- Revise the care plan

Consumer Directed

- Authorize CD services
- Authorize other services
- Support the consumer in hiring, training and supervising their worker
- On-going support, monitoring and follow-up
- Conduct reassessment
- Revise the care plan

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Consumer's Role and Responsibilities

- Recruit, interview, hire, train, schedule, supervise, and, if necessary, discharge their In-home Services Worker or Personal Assistant.
- Develop a back-up plan
- Process the employment paperwork
- Select a representative to assist them if appropriate

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The Role of Consumer Representatives

- Representatives can ensure the consumer's preferences are known and respected
- Representatives are used with persons with cognitive impairment, a severe illness or by those who simply feel the need for additional support

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General Guidelines on who can be a Home Care Worker in CD Programs

- Must be at least 18 years old
- Must be a US citizen or legal to work in the US
- May be a family member, friend or neighbor
- Cannot be legally or financially responsible
- Cannot be a consumer representative
- Cannot be known to have been convicted of elder abuse or Medicaid fraud

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Role of the Home Care Worker

- Must recognize the authority of the consumer in all matters related to supervision and employment
- Perform the level of tasks allowed under the program as trained by the consumer to perform

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Fiscal Intermediary

- Facilitates the employment of workers
- Fiscal accounting and making expenditure reports
- Other functions as specified by the requirements of the program model

Source: Adapted from the Centers for Medicaid & Medicare Services (2008)

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Consumer Directed/Participant Directed Programs

EISEP, Nursing Home Diversion and Cash & Counseling

EISEP Consumer Directed Option

- Non-Medicaid program
- Serves older people who need ADL and IADL assistance
- It is a case managed program
- Uses In-home Service Workers
- Supplements care provided by friends and family
- Pays for a range of ancillary services

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Nursing Home Diversion (Community Living Program)

- Non-Medicaid program – EISEP based
- Aged 60 or over
- High risk of nursing home placement
- Self-directing or have a consumer representative
- In danger of spending all their income and assets to the Medicaid level
- Works in conjunction with the VA

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Differences Between NHD (Community Living Program) & EISEP

- Care coordinators, not case managers
- Consumer clearly takes the lead in care planning with the care coordinator
- Individual budgeting – more flexibility
- Original Counties: Broome, Oneida, Onondaga
- New counties: Albany, Cayuga, Dutchess, Orange, Otsego, Tompkins & Washington

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Cash & Counseling

- Began in 1998 as a 3-state demonstration (Arkansas, New Jersey & Florida)
- 2009 12 states were added (Alabama, Illinois, Iowa, Kentucky, Michigan, Minnesota, New Mexico, Pennsylvania, Rhode Island, Vermont, Washington & West Virginia)

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Cash & Counseling Model

- Serves people with disabilities as well as older people
- It is a Medicaid program
- Uses a flexible budget
- Consumers decide on the mix of goods and services that best meets their needs
- Use their budgets to hire personal care workers, purchase items and make home modifications

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For more information on Cash & Counseling

National Resource Center for Participant-Directed Services at Boston College
<http://www.bc.edu/schools/gssw/nrcpds/>

Consumer Directed Personal Assistance Program (CDPAP)

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William Lane, Ph.D.

Regional Outreach and Education Specialist

Capital District New York Region

PH: (518) 475 – 9605

lanewc@verizon.net

and

Bryan O'Malley, MSW

Executive Director, CDPAANYS

PH: (518) 813-9537

bryan@cdpaanys.org