



Self-Direction of Home- and Community-Based Services: A Training Curriculum for Case Managers

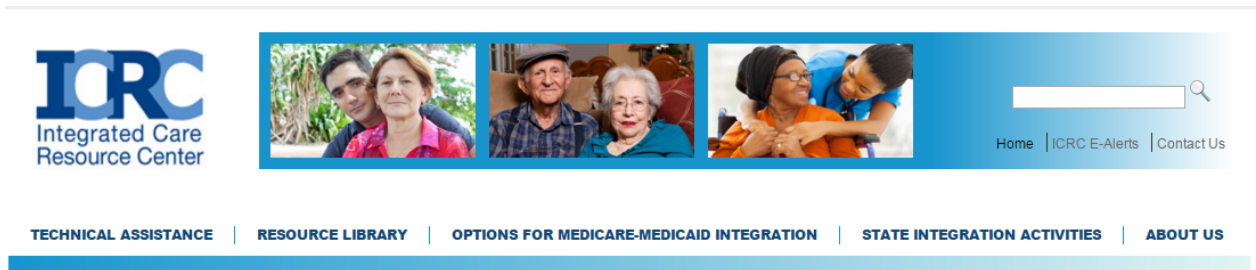
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Module 3: Implementing Self-Direction in a Managed Care Context: Special Considerations

The Complete Training Curriculum

Available at:

www.integratedcareresourcecenter.com



Self-Direction of Home- and Community-Based Services: A Training Curriculum for Case Managers

The ability to direct and manage their own services and supports is important to many individuals who need the home- and community-based services (HCBS) provided through state Medicaid programs. These self-directed models may also be known as “consumer direction” and “participant direction” when referring to specific states’ programs. In these models, individuals direct many or all of their own HCBS, including selecting and managing direct service workers and/or managing a budget for needed services. Self-direction allows

Curriculum Overview

- **Module 1: Introduction to Self-Direction**
 - Philosophy and practice of self-direction and person-centered planning
- **Module 2: Implementing Self-Direction**
 - Basic design elements and essential mechanics
- **Module 3: Implementing Self-Direction in a Managed Care Context: Special Considerations**
 - Observations about self-direction in managed care
 - Discussing self-direction with individuals
 - Making the enrollment process simple
- **Module 4: Operating and Managing Self-Direction in a Managed Care Context**
 - Managing risks and ensuring quality

Faculty



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Curriculum Learning Objectives

- Provide the foundation for a train-the-trainer model
- Increase understanding and appreciation for:
 - Benefits of self-directed practice
 - Role of individuals in choosing a self-directed model
 - Supports available to people who elect the option
 - Effectively providing those supports
- Incorporate principles of self-direction into current practice
- Identify measures to streamline the enrollment process through consistency and resources and ensure quality

This Module Will Cover:

- Design elements of Medicaid managed care and self-direction
- Observations about self-direction in managed care
- Introducing the option to individuals
- Screening for interest and capacity
- Identifying a representative
- Tips for a success and streamlined enrollment process

Design Elements of Self-Direction and Managed Care

- Substantial learning curve about self-direction and health plans
- Commitment to self-direction is often directly related to the state's expectations and guidance
- Implementing consistent standards and requirements across all health plans impacts the design, operation, evaluation, and success of self-directed programs and can reduce individuals' confusion
- Without state guidance, self-direction is delegated to health plans which may or may not understand the philosophy, benefits, and implementation of self-direction

Observations About Self-Direction in Managed Care

- The state provides guidance to the managed care organization through the contract negotiated between the state and the health plan(s)
- Information and Assistance – delegated to the “case management” role but confusion exists
- Training on self-direction (philosophy and operations) typically happens internally and generally is inconsistent
- During research reviews, service coordinators (case managers) complained of the time self-direction takes

Observations About Self-Direction in Managed Care

- Health plans complain that the cost of introducing, enrolling, and providing on-going support to those electing the self-directed option is not calculated in their capitated rate
- Some health plans have transferred the self-directed Information and Assistance to Financial Management Services (FMS) vendors (e.g., FL, TN, & NJ)

Observations About Self-Direction in Managed Care

- Enrollment into the program is slow due to case manager (or service coordinator) referrals and time taken to enroll individuals in the program as well as workers as employees
- Prior authorizations may cause delays in accessing services
- Claims processing problems
 - Billing strictly by unit rate is often not compatible with flexible individual budgets or rate of pay differentials
 - Once claim suspends – could take weeks to resolve
- Delays are typically due to conducting and completing a criminal background check

The Enrollment Process

- In most designs:
 - The case manager introduces the option and provides a brief orientation of self-direction
 - If interest is shown, additional information is provided in the form of a brochure, fact sheet, handbook, or informational pamphlet
 - Conversation is conducted about: employer status; employer and budget authority; ability to select a representative; available supports (e.g., Information & Assistance (I & A) and FMS); individuals' responsibilities*; and ability to return to the traditional program

The Enrollment Process

- Often, individuals may feel apprehensive about managing an attendant
 - During the enrollment process, case managers will discuss the potential to designate a representative to assist with decision-making
- Case manager assists with the development of the plan to hire an attendant or purchase goods or services
- Qualifications of the potential attendant are verified
- Criminal background checks are processed and paperwork is completed
- The case manager refers the individual to an FMS entity where employer and employee documents are reviewed, signed and processed
- The individual is notified of the hiring date

Screening to Determine Supports*

- Determine ability through conversation
- Develop support strategies
- Recommend representative
- Assess situation
- Can service planning help?
- Increase level of oversight
- Pre-identify acceptable risks and unacceptable risks
- Create peer counseling network

Assessing Ability to Make Service Decisions

- Idea is not to screen out, but determine level of support needed for the individual to be successful
- Guide individuals toward understanding their ability to make decisions about services
- Use a decision-tree to guide thinking:
 - Make it simple: What do you need help doing? Who will you hire to help you? When do you want help?
 - Go a little deeper: How will you train your attendant? How will you communicate when he/she is doing work the way you want it done?
 - Can you ask for help: Do you know assistance is available? When will you call the case manager/counselor? Do you have someone who will help when you need it?

Competency Versus Ability



Competency

Legal reference

Varies with decision being made

Varies with gender, culture, and economic status

Gray area even for courts

Tools/instruments to determine – validity still questioned



Ability

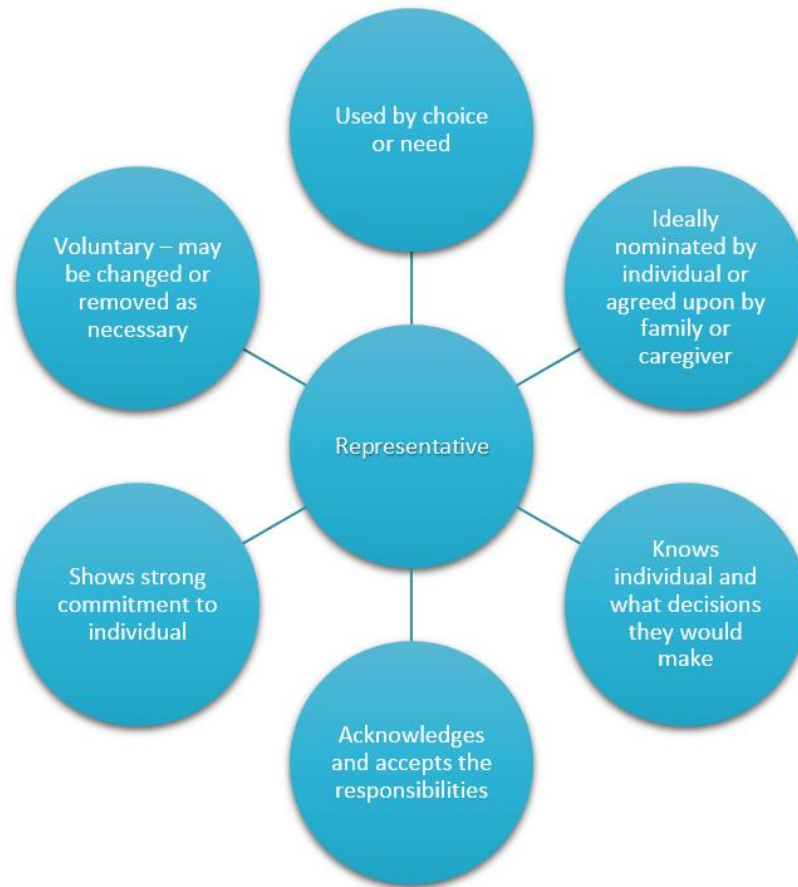
Capable of making decisions

May be affected by overuse of alcohol or drugs, dementia, psychiatric disorders, traumatic brain disorders, or poor judgment

May be established by informal observation or conversation

Caution about instruments/tools – uncover not determine eligibility

The Use of the Representative*



Who May Not Be a Paid Attendant?

- A person who has a disqualifying offense identified through a criminal background check
- Legal Guardian/Power of Attorney
- Self-Direction Representative
- However, many self-directed programs allow some legally responsible relatives to be paid attendants but not all

Self-Direction Self-Assessment*

- Your case manager can assist you with self-directing, but how would you answer:
 - What services do you want and need?
 - What other things would help you be more independent?
 - How will you find and select people to help you?
 - How do you plan on training your attendant?
 - How will you tell your worker about what you like and what you dislike?
 - How would you ask for help if you need it?

Module 3 Takeaways

- Managed care and self-direction are compatible, but instruction on the philosophy, benefits, and implementation is needed
- The enrollment process is a significant investment of time and resources but will ultimately determine the quality of the execution of self-direction

Tools and Resources to Accompany This Curriculum

- Permissible Goods and Services in a Self-Direction Program
- Video and Facilitator's Guide: Person-Centered and Participant-Directed Services – Implications for Practice
- Individuals' Rights and Responsibilities in a Self-Direction Program
- A Questionnaire to Assess Individuals' Ability to Self-Direct Services
- Representatives' Responsibilities in a Self-Direction Program
- A Questionnaire to Assess Potential Representatives in Self-Direction Programs
- Policies and Procedures Manual Topics for a Self-Direction Program
- Frequently Asked Questions on Self-Direction in Managed Care
- Roles and Responsibilities in a Self-Direction Program
- Available at www.integratedcareresourcecenter.com

About ICRC

- Established by CMS to advance integrated care models for Medicare-Medicaid enrollees
- ICRC provides technical assistance (TA) to states pursuing integrated care, coordinated by Mathematica Policy Research and the Center for Health Care Strategies
- Visit <http://www.integratedcareresourcecenter.com> to download resources, including briefs and practical tools to help address implementation, design, and policy challenges
- Send additional questions to: ICRC@chcs.org