

Post PHE Training for Support Coordinators

- Objectives
 - Understand all home and community based exceptions/flexibilities that are “unwinding”
 - Able to implement process changes post-PHE
 - Understand new services available
 - Able to discuss all processes and services post-PHE with individuals and families
- 3 Modules for Training:
 - General Training
 - Virtual Visits for Support Coordination
 - Family Members Living in the Same Home as Paid Caregivers

General Overview

- Many waiver flexibilities that have been in place will change or go away
- End date is November 11, 2023
- Changes to the Plan of Care will need to begin now, with the effective start date as 11/12/2023
- If you encounter situations that you are unable to resolve / you are not sure how to proceed, escalate these up to the LGE who will communicate with OCDD State Office if needed.
 - State Office is aware that each situation is unique and may have unique challenges that may not have been considered.
- Changes made are following substantial input from individuals and families receiving services, LGEs, support coordination representatives, and provider representatives.

Support Coordinator Role / Expectations

- SCs are the primary people who will be explaining this information to individuals and families who are concerned about these changes
- SCs role is to provide all necessary information to help the person and team identify what changes in supports may be needed for their person-specific situation
- Some conversations will be difficult; need to understand your role is to educate and support

COVID PHE Waiver Flexibilities / Exceptions Unwinding

Waiver Participant and Direct Support Worker Living in the Same Home

- Prior to COVID: could NOT occur
- If DSP living in same home is NOT family member → will NO LONGER be able to serve as paid staff OR could move to companion care
- If DSP living in same home IS family member → MUST begin following new guidelines [to be covered in separate module]
- Possible alternate considerations: Companion Care in the ROW and NOW

DISCUSSION

- Any questions about this exception?
- Any situations you are aware of now that may be a problem for waiver participant?

16 Hour Rule

- Should NEVER be planned on regular/routine basis
- ONLY work over 16 hours in 24 hour period for UNPLANNED situations WHERE
 - Other paid staff or natural support is UNAVAILABLE AND
 - Person is not able to be unsupported
- NO prior approval will be needed when these instances happen; However, review at specific levels will be needed if it happens
 - Each instance → provider/employer
 - 5 or more times in quarter → support team
 - Additional 5 or more times in next quarter → LGE
 - Additional 5 or more times in next quarter → OCDD Central Office
- Focus of review: identify and address barriers or challenges

DISCUSSION

- Any questions about this exception?
- Any situations you are aware of now that may be a problem for waiver participant?

Sharing of staff support across two waivers

- WILL be able to share across two waivers (NOW, ROW, CCW) with the same provider
- Two types of sharing to consider / offer:
 - Roommate sharing – participants live in the same home and share staff for portion or all day
 - Casual sharing – participants do not live in same home but share staff to do preferred activities together
- Must include sharing across waivers in the Plan of Care on “Shared Supports Document”

DISCUSSION

- Any questions about this exception?
- Any situations you are aware of now that may be a problem for waiver participant?

Additional 20 hours a week of in-home support for Children's Choice Waiver

- Cap will NO LONGER be adjusted to allow
 - If there are remaining “additional hours” as of 11/12, these will not carry over for the remainder of CPOC year
- Beginning 11/12, cap is \$20,650 per year
- Following options may be offered unless based on child's support needs
 - Crisis Designation option if need more than what cap allows
 - If Crisis Designation continues or expected to continue beyond 1 year → can request movement up in Tiered Waiver process

DISCUSSION / SCENARIO CHECK

- SCENARIO: Family has been using the additional 20 hours / week in Children's Choice for the past two years, with the hours being used for after school care for the child.
 - Situation 1: The school offers an after-school program, and the child is able to participate in this program. The family states that they would prefer to continue with the additional 20 hours / week because the child appears to enjoy this better than after school care. How do you facilitate this discussion?
 - Situation 2: The child is not accepted into the after-school program due to medical support needs, and there is no nurse present for after-school. Both parents work full-time and they are not able to provide natural supports after school. The family states that one parent may lose his/her job if they do not have the additional after school hours. How do you facilitate this discussion?
- Any questions about this exception?
- Any situations you are aware of now that may be a problem for waiver participant?

Automatic conversion of day hab/work hours to in home supports with no prior approval

- NO LONGER continue with 1:1 hour automatic conversion during COVID
- IF ADC is not open or not yet at full capacity → offer freedom of choice for other providers and discuss any needed plan changes
- CAN STILL do fiscally equivalent conversion of day program hours to IFS in NOW consistent with resource allocation approach
- CAN request movement to a different Tier in waiver system OR hours over allocation if needed
 - MUST still justify and respond to the required documentation and submission
- Support Planning guidelines assumptions include: “People will use a variety of supports with all supports being coordinated” AND “People will have meaningful activities throughout the day”

DISCUSSION / SCENARIO CHECK

- SCENARIO: Supports Waiver participant was going to day habilitation program prior to COVID. Participant has diabetes and asthma and was considered high risk during COVID PHE; participant received automatic conversion of the day program hours to in-home hours throughout the pandemic.
 - Situation 1: The participant's asthma and diabetes are under control, and they did not have any significant illness during PHE. Participant, who is 35 years old, states during planning that they would prefer to continue to stay at home and not return to the day program because they did not enjoy activities at the day program. How do you facilitate this discussion?
 - Situation 2: The participant's asthma and diabetes are not under control, and they demonstrated significant illness during the PHE. The participant has continued to go in and out of the hospital due to ongoing respiratory illness, and they are demonstrating difficulty with falling during hours when a DSW is not in the home. How do you facilitate this discussion?
- Any questions about this exception?
- Any situations you are aware of now that may be a problem for waiver participant?

Age Requirements for Direct Support Workers

- All DSWs must be 18 years old, unless they have exception
- Exception Process
 - Provider / employer identifies 16/17 year old and completes “Age Exception Request Form” with justification – submits to Support Coordinator
 - SC reviews and identifies if anything in participant’s plan of care that may inappropriate for a 16/17 year old to perform
 - If yes, advise provider of denial. If no concerns, complete and submit to LGE
 - LGE reviews, makes final determination, documents and advises all parties
- Provider / employer is responsible for ensuring all DOL requirements followed

DISCUSSION

- Any questions about this exception?
- Any situations you are aware of now that may be a problem for waiver participant?

Requirement for a Service Every 30 Days

- Requirement for a waiver service every 30 days will return beginning 11/12/2023
- For ROW and NOW, person must have another service in addition to support coordination every 30 days
 - ROW = residential service is required
 - NOW = any other service
- Children's Choice and Supports Waiver must have support coordination
- Especially important to inform participants and families who have not used services during COVID PHE of this requirement

DISCUSSION

- Any questions about this exception?
- Any situations you are aware of now that may be a problem for waiver participant?

New Services Added During COVID PHE

Monitored In-Home Caregiving

- Participant 18 years of age or older who lives at home with caregiver willing / able to provide 24 hour supports
- Caregiver receives a “per diem” or daily rate for providing necessary care and supports; no EVV is required
- Provider sends nurse and care manager to home for assistance
- Can be offered as service option when family living in home wants to continue to provide all services for the participant
- Rates: \$90.03 / day for Level I Care / \$135.04 for Level II Care

Virtual Services

- Services may be provided via Zoom or Google classroom format for day habilitation, pre-vocational, and supported employment follow-along, when appropriate.
- Rates
 - Virtual day hab / prevocational: \$2.98
 - Virtual supported employment: \$13.63

Community Life Engagement (CLE)

- Activities in the community in small group of 1:2 – 1:4
- May include activities such as: recreational (shopping, movies, sports); volunteering opportunities; or educational activities – MUST be tied to goals in the POC for each participant
- Providers should track activities through activity sheets

Community Life Engagement (CLE)

Waiver	Procedure Code	Modifier	Current Rate
NOW	T2021	UQ	\$3.41 / 15 minutes
ROW	T2021	UQ	\$3.88 / 15 minutes
SW	T2021	UQ	\$3.56 / 15 minutes

Community Career Planning (CCP)

- Job readiness activities in the community
- Conducted in typical situations that prepare individuals to work in individual job in community
- May include activities such as: volunteering, job shadowing, job discovery – MUST be tied to goals in the POC
- Community Career Planning and on-site pre-vocational services may not be used together

Community Career Planning (CCP)

Waiver	Procedure Code	Modifier	Current Rate
NOW	T2025	UQ	\$3.88 / 15 minutes
ROW	T2025	UQ	\$3.88 / 15 minutes
SW	T2025	UQ	\$3.06 / 15 minutes

DISCUSSION

- Any questions about new services?
- Consider situations when MIHC would be appropriate to consider.
- Consider situations when Virtual services would be appropriate to consider.
- Consider situations when CLE would be appropriate to consider.
- Consider situations when CCP would be appropriate to consider.

THANK YOU

TIME FOR A BREAK

End of Module 1

OCDD

| 225-342-0095



Module 2: Virtual Visits for Support Coordination Post PHE

General Overview

- During COVID PHE, use of virtual services and reduced requirements for hard signatures have been in place.
- There will be changes to these processes beginning 11/12/2023.
- The role of the support coordinator is to understand these processes for documentation purposes and to help participants and families understand when virtual and technology is able to be used.

Important Overarching Expectations

- Use of virtual visits is **NOT** planned on an annual basis
 - Used by waiver participant as needed when it meets the person's needs/preferences and ALL criteria are met
- The SC CANNOT request or suggest a virtual visit; the request MUST come from a participant/family
- Virtual visits are available twice per year for quarterly meetings if all criteria are met
- Virtual Visit Criteria should be reviewed quarterly by the SC to determine if the participant continues to meet the criteria
- A virtual visit is NOT guaranteed when the participant/family asks because
 - Some situations will require face-to-face visits
 - SC/LGE/OCDD State Office can determine if a face-to-face visit must occur

Virtual Visit Criteria

The following criteria must be met:

- Must be initiated by the participant/family
- Participant and SC must have a device with a camera, format capabilities and internet services necessary to complete a virtual visit that includes the ability for the SC to view the home and the participant in order to complete the observation required for the visit. And the Participant/Family understand how to utilize the virtual format.
- Participant/Family understand HIPAA requirements for use of a virtual format
- No Known Critical Incidents that have occurred in the last 2 years in the following categories:
 - Report of any of the “major” critical incident categories per OI-F5
 - Report of Abuse, Neglect, Exploitation, Extortion to CPS/APS/EPS
 - Report of Involvement with Law Enforcement
 - Restraint use
 - More than 3 reports of the same incident in the last 6 months
- Progress is being made towards goals in POC

Virtual Visit Criteria Continued

- No identified challenges/changes in providing supports
- No known unsafe living conditions, lack of sanitation, lack of food/supplies etc.
- No known Significant changes in medication, medication errors, trips to the ER etc.
- No Known changes in behavior, medical status or appearance (i.e., weight gain/loss)
- No change or anticipated change in the plan of care that requires a revision (unless the participant/SC and Providers have the ability to utilize an electronic signature)

Categories Where Quarterly Virtual Visits ARE NOT Allowed

- For **ALL** participants, The **Initial or Annual Plan of Care, 6-9 month CC, and one other quarterly** Meeting **MUST** occur face-to-face in the home
- For those participants whose paid caregiver **IS** a family member living in the home/Legally Responsible Individual, **ALL** Visits must occur face-to-face in the home
- For those participants who utilize the Monitored In Home Caregiving (MIHC) Service, ALL visits must occur face-to-face
- For those participants who **ONLY** utilize the Support Coordination service, **ALL** visits must occur face-to-face

Face-to- Face visits that may occur outside initial, annual, 6-9 month visit or quarterly

- Environmental modification/specialized medical equipment- verify job completion face-to-face
- Health and Safety Checklist- unannounced visit
- Any alleged allegations of abuse, neglect or exploitation
- TEPA (transitional expenses planning & approval) - verify purchased items face-to-face
- Anything that may impact the health and safety of a waiver participant

DISCUSSION

- Any questions about the criteria for using virtual visits?
- Any situations you are aware of now that may be a problem for waiver participants?
- Situation: How will you facilitate the conversation with the waiver participant who is requesting that virtual support coordination visits occur, but they do not meet the criteria for a virtual visit?

Signing Annual or Revised Plan Documents

- Acceptable signatures include:
 - Original (hard) signatures required for Initial/Annual POC
 - HIPAA protected platform for electronic signature (for documents outside of annual POC)
- For electronic signatures:
 - Participant/family is able to and agrees to use the electronic signature option
 - Agency using electronic options accepts responsibility to assure compliance with all federal regulations for retention
- **Any time an participant/family says they want to view or sign a plan in person this MUST be accommodated**
- **NO Verbal signatures allowed**

LaSRS Codes for Telehealth Visits

Place of Service	<ul style="list-style-type: none">• 13 or 99-location that is HIPAA compliant (confidentiality)
Type of Contact	<ul style="list-style-type: none">• 08
Service Activity	<ul style="list-style-type: none">• 53
Service Participant	<ul style="list-style-type: none">• 01 & others

LaSRS Codes for Face to Face Visits

- Place of Service
 - 02
- Type of Contact
 - 01
- Service Activity
 - 13 Annual, 16 initial or 53 quarterly & 6-9 month CC
- Service Participant
 - 01 & others

DISCUSSION

- Any questions about billing or documentation for using virtual visits?
- Any situations you are aware of now that may be a problem for waiver participants?

THANK YOU

TIME FOR A BREAK

End of Module 2

OCDD

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OCDD Family as Paid Staff Post PHE Update

Family Members Serving as Paid Staff

What has ALWAYS been allowable

- Family members who do NOT live with the recipient were ALWAYS allowed to serve as paid staff so long as:
 - They were NOT the legally responsible individual
 - They met all the other requirements and regulations for being a DSP

This CONTINUES to be an option available

What is CHANGING

- Family Members who LIVE WITH a recipient MAY be able to serve as paid staff, IF:
 - It is in the best interest of the individual
 - Individual wants family to be paid staff
- Legally Responsible Individuals MAY be able to serve as paid staff, IF:
 - Extraordinary care is needed
 - They are NOT the employer/Authorized Rep for Self-direction
- Applicable safeguards/guardrails in place

These are Federal Requirements

EPSDT-PCS and LT-PCS Differences

- Note: as of 5/12/23, family members living in the home were NO longer be allowed to be the paid staff in state plan services.
- Federal regulations do not allow family members living in the home to be paid personal care attendant staff in state-plan services (i.e. EPSDT – PCS and LT – PCS)
- SC role is to help family understand that there are different rules for waiver services and state plan services.
- It is not appropriate to request that a person receive waiver services, rather than state plan EPSDT – PCS or LT-PCS services only so that family members can be paid.
 - Federal regulations require that participants use any available state plan services prior to using waiver services.

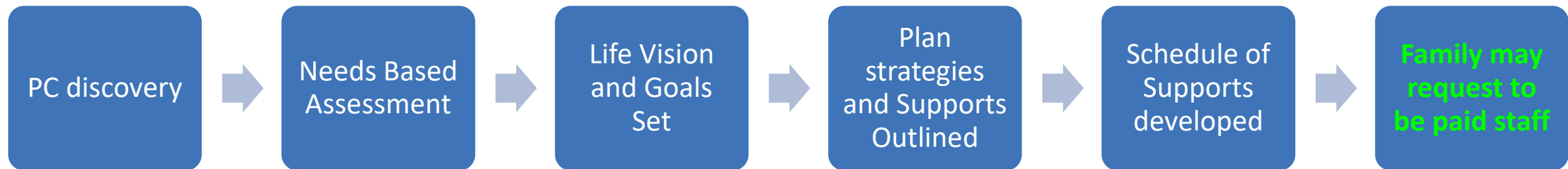
Guiding Considerations

- Purpose of HCBS services is to provide ADDITIONAL support to individuals and their families to keep families together and to assure individuals can continue to live/work/etc. in their local communities
 - Non-paid family relationships and time needs to be preserved
 - Family burnout and fatigue should be considered and steps taken to avoid
- Future planning for the person's supports and support network over time should be considered
 - Efforts to support the person to be as independent as possible
 - Building friendships, relationships and community connections

National Best Practices

- Integrated Supports:
 - access an array of integrated supports to achieve their envisioned good life
 - include community supports that are available to anyone; relationship-based supports; technology; supports publicly or privately funded and based upon eligibility; and the personal strengths and assets of the individual and their family.
- High Expectations and Achieving Outcomes:
 - plan for the present and future life outcomes
 - take into account all facets of life and have opportunities for life experiences that build self-determination, social capital, economic sufficiency, and community inclusion.

WHEN does family as paid staff get discussed



OR SC may
suggest
consideration
IF finding
staff is
difficult

General Considerations

- Family living in the home serving as paid staff have same expectations as other DSWs when providing services:
 - Meet all DSW qualifications per licensing
 - Must complete all required DSW training, plus complete a “Family as Paid Caregiver” Training and sign an attestation form that they understand expectations and requirements – (Note: SC responsible for showing)
- Each family member living in the home may work up to 40 hours / week; hours not increased when family is paid staff
- Paid family member must be hired by provider agency or employer

Exclusionary Considerations

Family Members will NOT be approved to serve as paid staff under the following circumstances

- Name on the OIG Exclusion List, Direct Support Worker Registry or CNA Registry
- Conviction that bars employment
- Known APS/CPS/EPS substantiated instances of abuse/neglect/exploitation
- Waiver participant says they do NOT want family to be paid staff
 - Consistently in private and team discussions
 - Privately with SC and then family does not object
- Family is the self-direction authorized rep (employer)
- Clear evidence the CPOC activities/supports are not occurring
- More than one incident of family not following requirements in attestation form
- Clear evidence family member is unable to provide all supports in plan

Circumstances Requiring Discussion/Consideration

When the following occur, the support team should discuss to determine best interest

- Any instances of alleged but not confirmed abuse/neglect/exploitation
- Any one incident of family not following requirements in attestation form
- Waiver participant says privately to SC they do not want family to be paid staff but shares yes with family
- Person is experiencing regression on goals for increased independence
- Person is not doing preferred activities to frequency they would like
- Unclear if family member can provide all supports in the plan

Establishing Best Interest

- ANY exclusionary circumstances → STOP the family member cannot serve as paid staff
- Any areas for discussion/ consideration → additional team discussions & document in plan
- Team discussion around:
 - Increasing independence
 - Supporting community involvement
 - Maintaining time as family
 - Preferred activities match
 - Expanding relationships
 - Individual's choice

AFTER planning for goals and needed supports, IF family as paid staff is requested/needed AND the family member LIVES WITH the recipient, THEN consideration of BEST INTEREST MUST OCCUR

Discuss scenarios

- Situation 1: Parents of a child receiving waiver services have been paid to provide services throughout COVID. You have witnessed that family members are showing signs of fatigue and burnout. You have concerns with them being able to continue to provide services as outlined in the plan of care, but they do not have any “exclusions” for being paid staff. How do you facilitate discussion of best interest?
- Situation 2: An adult waiver participant lives at home with his parents. His brother was recently released from jail, where he had a conviction for aggravated robbery, and he is moving home. In the team meeting, the parents advise that they would like to help his brother find a job and they would like him to serve as the paid waiver staff. How do you facilitate discussion of best interest?
- Situation 3: Family members living in the same home of an adult waiver participant have provided services throughout COVID. You have noticed that the waiver participant has become more independent, and they are setting more community goals with family as paid staff. The family members are both over age 60, and they have stated that they do not have any extended family to help them. How do you facilitate discussion of best interest?

Assuring self determination and Individual Choice

During discussions with the recipient:

- SC explains rights/responsibilities
- Formal/informal supporters for decision making
- Discussion of family member who wants to also serve as paid staff

Individual Choice MUST be addressed to assure BEST INTEREST and SELF DETERMINATION have been honored; Age specific consideration do exist:

- Youth under age 15: defer to legal guardian
- Ages 16-17: conversation separately with youth will occur; supporter may be present
- Adults (18+): separate conversation with recipient regardless of legal status; supporter may be present

Guided Discussion

Questions the SC will use to guide

There are people who can help you do things.
_____ would like to get paid to help you do things.

- Are you ok with this?
- Do you understand you can say no?
- What things do you like to do with ____? Don't like to do?
- Would you like someone outside your family to be paid staff?
- Are there things/activities you are not comfortable with _____ knowing or doing for you?

What happens based on discussion

- Person agrees → family member may proceed as paid staff
- Person does NOT agree → SC advises family
 - If family does not request additional consideration → family does not serve as paid staff
 - If family raises concerns or if participant is not comfortable telling family → escalate to LGE

Discuss scenarios

- Situation 1: Parents living in the same home of an adult waiver participant who has significant cognitive disabilities and is unable to use words to communicate have been paid to provide supports during COVID. They are employed by a provider agency, who both agree that the parents are able to continue to provide paid supports. How do you facilitate a discussion to ensure the participant wants them to be their paid staff?
- Situation 2: An adult waiver participant lives in the same home with his siblings. His brother recently lost his job, and he states during a team meeting that he would like to become the paid staff. He meets all relevant criteria for it to be in the best interest of the person. When you have a discussion with the waiver participant, they advise you that they do not want the brother to be paid staff because they do not get along, and they are able to state this during a team meeting. The brother states that he must be the paid staff because he has power of attorney. How do you facilitate this discussion?
- Situation 3: A 17 year old waiver participant advises during self-determination discussion with a “supporter” that they do not want their parents to be their paid staff because they are too restrictive; however, they are not comfortable saying this in front of their parents. What discussion and steps do you take?

Extraordinary Care

- In Louisiana, a legally responsible individual (LRI) is: parent of a minor child, spouse, or curator / continued tutor for an adult.
- A LRI can ONLY serve as paid staff when extraordinary care is needed. To establish Extraordinary Care the following must be considered:
 - Availability of other qualified support staff
 - Type of support/care needed compared to what would typically be expected for a legally responsible individual
 - Expectations of some support/interaction/relationship with legally responsible individual that is NOT paid

Lack of qualified staff

- This is NOT the following:
 - Subjective feeling or statement from the LRIs
 - Preference to not have others in the home
- MUST be able to confirm one of the following:
 - No staff are able to be located/hired
 - Staff that apply are not able to provide the needed supports
 - LRI has unique ability to meet the needs of the participant (i.e., special skills, training, license that is tied to the support needed)
- For those who do not want others coming in the home, there are other options within the waiver like companion care or MIHC that could be accessed

Extraordinary Support/Care

In considering if the support/care needed is beyond the expectations of a legally responsible individual, the following are age related criteria:

- < age 5: MUST be linked to significant medical, nursing, behavioral support needs [significant help with ADLs is typical for these ages]
- Ages 5-12: ONLY if care/support is outside what can be provided in traditional school, day care or after care systems [some supervision and support in ADLs occurs during these ages]
- Ages 13-18: Level of support results in inability to be left alone (ie., after school) or the person is placed on home-bound education and qualified direct support workers cannot be found
- Adults: meet the inability to locate qualified staff

Assuring LRI is Meeting legal responsibility

- There should be time that the waiver participant is able to spend with family when they are not “paid” but are supporting participation during activities you would see in any family interaction
- There should be times during the day that the LRI is not paid and is providing the routine things that are done, such as cooking, cleaning, etc.
- Any legally indicated activities (i.e., if legal determination indicates making medical decisions or helping with finances) would not be paid

Discuss scenario

- Situation 1: A 16 year old ROW participant has been suspended from school on 3 occasions this school year due to physical aggression towards other students and property destruction. He is not allowed to participate in after-school activities. His mother has a part-time job making slightly above minimum wage. The provider agency hired three new staff in the past six months to work with participant; however, staff all quit within 3 months and new staff have not been identified. What considerations should be given and how do you facilitate the annual meeting for this participant?
- Situation 2: An adult who receives NOW waiver services has a parent who has been paid staff during COVID and would like to continue to do so. The parent is the identified curator for the participant who is interdicted. What conversation do you have with the waiver participant? What considerations must be given for the parent to continue and how do you facilitate the discussion with the parent?

Specific Considerations for Self-direction

- Authorized representative (employer) CANNOT serve as paid staff
 - Legally - conflict of interest
 - CANNOT choose to hire and pay oneself
- Alternatives
 - Another family member may serve as paid staff
 - Another family member/friend may serve as authorized rep (employer) if
 - They are at least 21 years of age
 - They live in Louisiana and close enough to routinely review / monitor
 - They sign attestation of understanding of responsibilities
 - Can move to a provider driven approach and/or per diem service (companion care/MIHC)

Discuss scenarios

- Situation 1: Both parents living in the same home of an adult waiver participant who has severe cognitive disabilities and is unable to use words to communicate have been paid to provide supports during COVID. The participant has 80 hours per week of in-home supports. They utilize the self-direction option, and the mother is the identified “employer”. The mother advises that she will “switch” employer to the father, and she would like to be paid for the full 80 hours because he can no longer work and they can’t find staff. How do you facilitate this discussion and what steps must be taken?
- Situation 2: It was identified that the family member living in the same home as an adult waiver participant may serve as paid staff because they have met all criteria for best interest of the individual, self-determination, and extraordinary care. The family member is a single parent, and they are currently identified as the employer in self-direction. The only other relatives lives in Houston, TX. What options do you discuss with this participant and family?

Documenting in the Plan

[illegible]

☐ Family Member Living in the Home is Paid Caregiver ☐ Legally Responsible Individual is Paid Caregiver ☐ Extraordinary Care

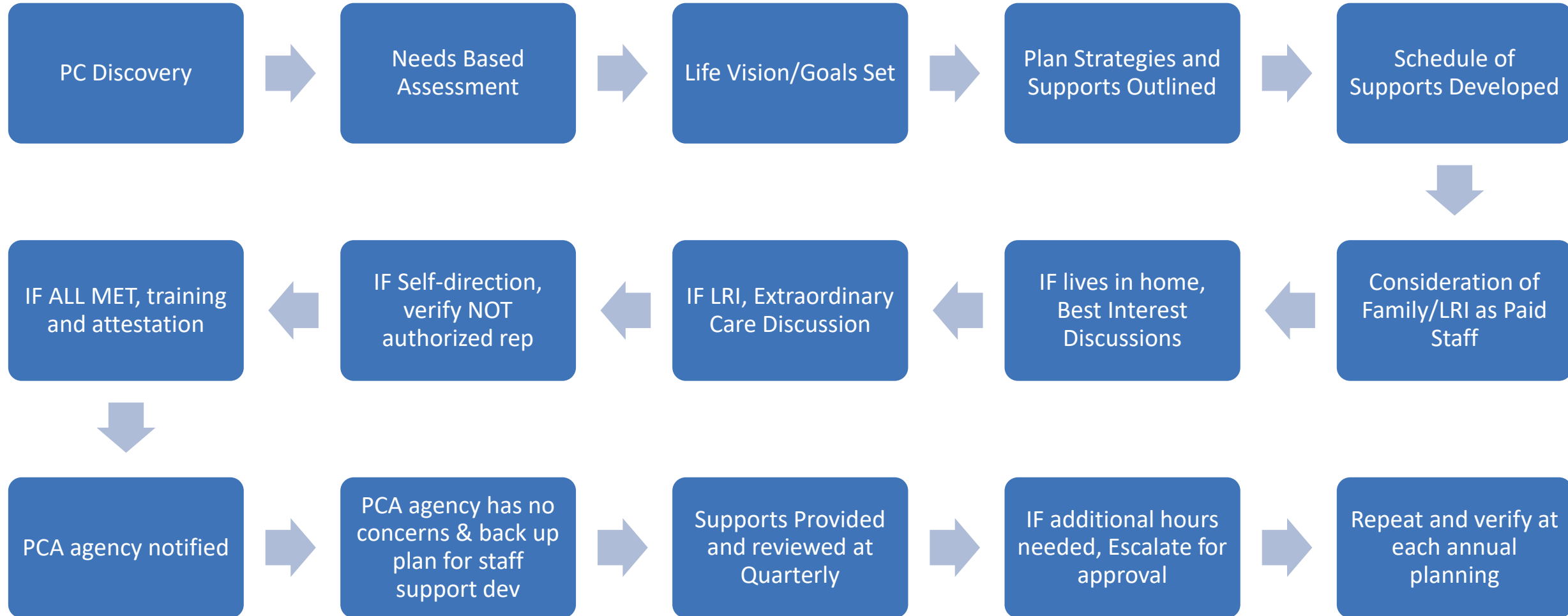
When Requesting Additional Hours OR Over Allocation

- Over allocation – IF living at home and ALL staff are family members living at home this is a rarer consideration
 - Follow the same process to request hours above allocation in NOW
 - MUST provide information and documentation on all required considerations
 - Identification of any areas of independence and opportunity to support increasing independence
 - Availability of some natural supports or accessing available community supports
 - Work/school or day program participation
 - Sharing of supports
- Requesting increase in hours after implementation of support plan
 - MUST have documentation of CHANGES in supports needed
 - LGE may approve; If LGE believes denial should occur would move to SORC

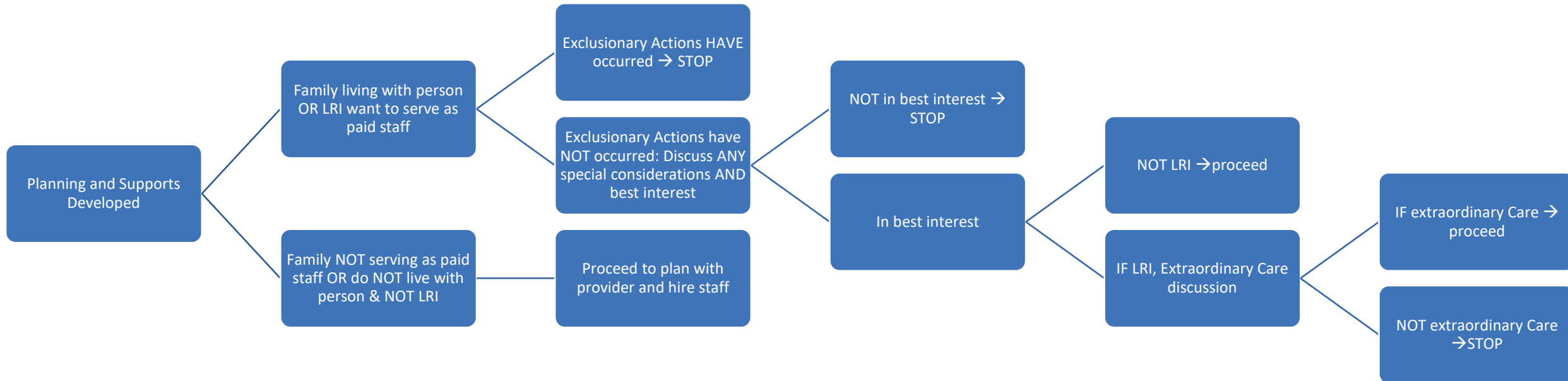
Monitoring/Ongoing Discussion Requirements

- Determine if any of the exclusionary issues or discussion considerations occurred
 - Exclusionary → family can no longer serve as paid staff
 - Discussion considerations → plan for discussion in quarterly
- Ask waiver participant: “are you happy with _____ being your paid staff?”
 - If no, advise team and proceed as discussed at initial
 - If yes AND no other concerns → family and plan continue
- Quarterly progress note MUST include the following:
 - Documentation IF NO concerns AND person remains satisfied
 - IF CONCERNS OR individual SATISFACTION in question → lead discussion and document any decisions, changes, actions in progress note
 - Update plan as needed

Process Overview



Decision Points



Documentation

- It is critical to remember that all post-PHE discussions be documented in the quarterly progress note, with changes to the Plan of Care or working Plan of Care when applicable.
- There are new forms, including Family as Paid Caregiver Tracking, Family as Paid Caregiver Attestations, and Self-Direction Employer Attestations that must now be maintained with the plan of care
- There will be situations that require escalation to the LGE and to State Office, and the more documentation that is present, the better we can consider needed process changes.
- We are here to support everyone through this!!

THANK YOU

