Adding Structured Family Caregiving as a Service:
Prioritized Provider Enrollment Path for Eligible Attendant Care Providers (A&D), CIH Structured Family Caregiving and CIH Residential Habilitation Providers

Division of Aging
February 2024

Overview for Qualified Providers

- What is Structured Family Caregiving?
- What are the minimum provider requirements needed to provide Structured Family Caregiving?
- Summary of the prioritized provider enrollment path
- Examples of required documentation to submit

Approved Service Definition of SFC

Structured family caregiving means a caregiving arrangement in which a participant lives with a principal caregiver who provides daily care and support to the participant based on the participant's daily care needs.

For legally responsible individuals (parents of minors or spouses) the parent or spouse is electing to be the principal caregiver. The parent of the minor waiver recipient is choosing the SFC provider with which the parent will be the principal caregiver.

The principal caregiver is defined as: a nonfamily member or a family member who lives with the participant in the private home of the participant or the principal caregiver. Necessary support services are provided by the principal caregiver (family caregiver) as part of structured family caregiving service.

The principal caregivers must be qualified to meet all federal and state regulatory guidelines and be able to provide care and support to a participant based on the participant's assessed needs. Caregivers receive training based on the participant's assessed needs and are paid a per diem stipend for the care and support they provide to participants.

Service Definition of SFC cont'd

Structured family caregiving preserves the dignity, self-respect and privacy of the participant by ensuring high-quality care in a non-institutional setting. The goal of this service is to provide necessary care while fostering and emphasizing the participant's independence in a home environment that will provide the participant with a range of care options as the needs of the participant change. The goal is reached through a cooperative relationship between the participant (or the participant's legal guardian), the caregiver, HCBS Medicaid waiver care manager and the structured family caregiving provider.

Participant needs will be addressed in a manner that supports and enables the individual to maximize abilities to function at the highest level of independence possible, while caregivers receive initial and ongoing support so they can provide high quality care. The service is designed to provide options for alternative long-term care to persons who meet nursing facility level of care and whose needs can be met in structured family caregiving.

Service Definition of SFC cont'd

Only agencies may be structured family caregiving providers, with the home settings being assessed and accessible, and caregivers being qualified as able to meet the participant's needs.

The provider agency must conduct at a minimum of two quarterly home visits. Additional home visits and ongoing communication with the caregiver is based on the assessed needs of the participant and the caregiver. Home visits are conducted by a registered nurse and/or a caregiver coach as determined by a person-centered plan of care. The RN can be an employee of the agency or be contracted. This should be spelled out or represented clearly in the information requested for prioritized enrollment.

The provider agency must capture daily notes that are completed by the family caregiver in an electronic format, and use the information collected to monitor participant health and caregiver support needs. The agency provider must make such notes available to waiver care managers and the state upon request.

Provider Requirements

- Current Medicaid approved HCBS provider enrolled to provide ATTC on the A&D waiver and/or SFC on the CIH waiver
- Three years of delivering services to elders and/or adults with disabilities and their caregivers in Indiana OR as a Medicaid participating provider in another state OR have a national accreditation
- Submission of additional documentation
- Subject to FSSA approval

*Provider SFC qualifications will not change with the implementation of revised waivers in July 2024

Three Requirements (Due June 1)

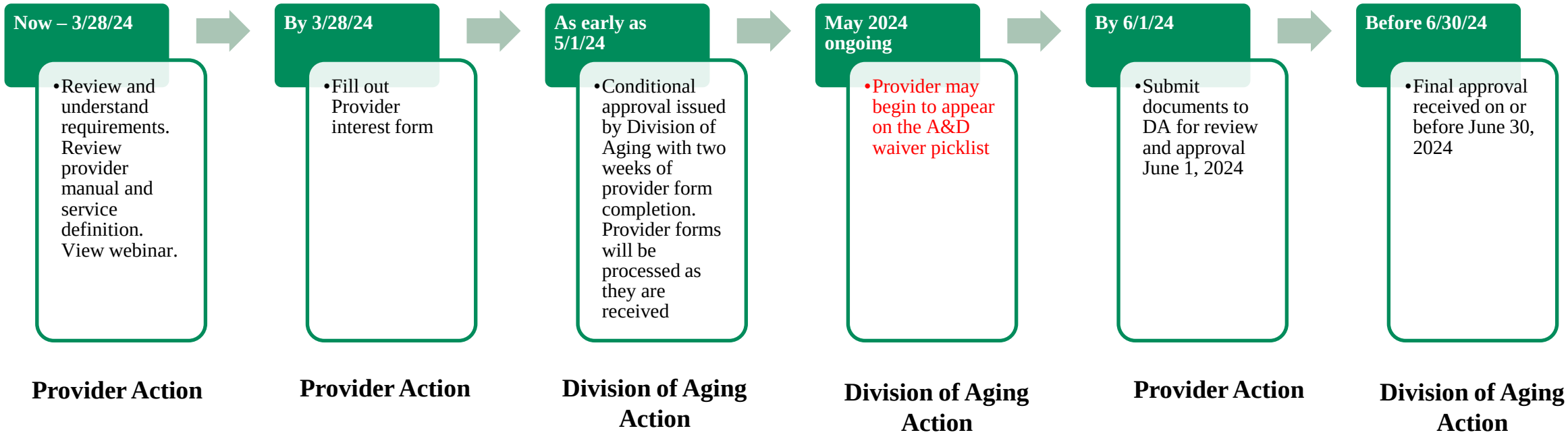
- Identified backup plan for the SFC principal caregiver(s)
- Caregiving coach secured/identified (job description and updated org chart) (cannot be provided by a parent of a minor child)
- Demonstration of having the required nurse resource in place (job description and updated org chart)

Final provider certification issued by end of June, pending submission of these three requirements.

Prioritized Path to SFC Certification

- Coordination with Division of Aging
- Request to become SFC provider (**use Microsoft Form)**
- Respond to Microsoft Form indicating intent to become Structured Family Care provider by March 28
- Conditional certification will be issued upon receipt of form response, pending receipt of 3 requirements between March 28 and June 1
- **This prioritized path will result in qualified providers' enrollment to be finalized to begin to deliver and bill for SFC by 7/1/24, upon CMS approval of the proposed H&W waiver amendment.**

Prioritized Path to SFC Certification



Upon final approval from Division of Aging, new SFC providers can begin delivering and billing for services upon CMS approval of the proposed H&W waiver amendment (currently slated for July 1, 2024)

Required Information/Documentation Examples

(these are real examples of acceptable documentation DA has accepted from prospective providers)

Backup Plans

Backup Plan Example 1

ABC Agency will obtain a backup plan for all service individuals at the time they are admitted to the agency.

- The plan will include at a minimum:
  - Emergency contact information for emergencies related to the individual's care
  - An acuity identification which determines the individual's level of care and identifies to the agency how to proceed when the individual can no longer be cared for by agency staff (completed and signed off on by a clinical professional)
  - A backup location where the individual will go in the event they are no longer safe to remain in their place of residence
  - A detailed plan for who will continue to provide services to an individual when their primary caregiver is unavailable or no longer able to provide care

Backup Plan Example 1 cont'd

All services provided to individuals can only be provided by a qualified individual familiar with the individual needs of the client. To ensure the agency is able to maximize its utilization of all qualified individuals when an emergency occurs, the agency will require the following:

- Each employee that is able to provide services will demonstrate competency and trained at the beginning of employment by the agency
- The agency will maintain all competency and training records on each employee in their personnel record
- All individuals and their families will accept acknowledgement of backup services or caregivers in the event that a primary or usual caregiver is unavailable to provide services.
- A minimum of 1 additional qualified direct care team member and the Homecare Coordinator/Agency Manager will be oriented to the client's individualized service plan at the time the client is admitted to the agency.
- In the event the additional qualified direct care team member is unable to serve in a backup capacity, the Agency Manager/Homecare Coordinator will provide the services until they are able to orient a new qualified direct care team member to the individual's care needs.

Backup Plan Example 2

Using the person-centered approach, the backup plan will revolve around the individual participant and reflects his or her chosen lifestyle and culture. Planning occurs where, when, and with whom the participant chooses. The Backup Plan takes into consideration the course of action taken by the alternate caregivers, the member's family, and the agency should the backup plan fail for any reason.

If unskilled family members are part of the backup plan, then XYZ Agency does not reimburse for provision of these services.

Backup Plan Example 2 cont'd

- For the purpose of 'Structured Family Caregiving' XYZ Agency will facilitate a meet and greet between client and primary caregiver and 2 alternate caregivers. The alternate caregivers may include family, friends, XYZ Agency staff or qualified contractors. The primary, primary back up and secondary backup will be named/identified during the initial assessment.
- XYZ Agency requires 72 hours' notice for foreseeable events that may require time off from primary caregiver duties. All emergent requests should be made to the office as soon as the client or primary caregiver becomes aware.
- When a request for alternate coverage is requested, alternate caregivers will be contacted and scheduled in the home. Caregiver will be educated regarding any changes made to care plan, client function and or expectation.
- If an assigned alternate caregiver is not available to care for client in the primary caregiver's absence, XYZ Agency staff or qualified contracted help will be scheduled.

Caregiver Coach Examples

Caregiver Coach Example 1

- Job Description: The caregiver coach provides guidance and support to primary client caregivers on the SFC/ATTC Medicaid Waiver Programs. The Health Coach works closely with the staff RN to provide an assessment of the needs of the patient and caregiver and works to create a coaching plan. The Health Coach will also monitor and provide ongoing assessments, training, and support to the primary (family) caregiver and the client, adjusting as necessary.

- A caregiver coach may engage with the caregiver on a bi-weekly basis to understand the evolving needs of the participant and caregiver and deliver content, strategies, and tools related to the management of the participant's needs and behaviors and the caregiver's self-care needs.

Caregiver Coach Example 1 cont'd

- Self-starter with very little need for supervision
- Travels to complete all in-home requirements/intakes as needed
- Markets company services and increases client base on a consistent basis
- Works hand in hand with coordinators to ensure that clients' needs are addressed and care is ongoing
- Provides assessment with the collaboration of the staff RN to ensure the patient's and caregiver's goals and needs are being met
- Provides coaching and training to the Primary Family Caregiver to ensure all client goals are met
- Maintains effective communication with the Primary Caregiver, staff RN, and Medicaid Waiver Case Manager
- Conducts case conferences with the client, the Primary Family Caregiver, and the Medicaid Waiver Case Manager semi-annually
- Uploads summary reports to the Medicaid Waiver Case Manager portal monthly, quarterly, and as needed
- Performs any additional job functions within the current role, on an as-needed basis.

Caregiver Coach Example 1 cont'd

Activities not allowed: The following activities are not allowed or reimbursed under Caregiver Coaching:

- Caregiver coaching services will not duplicate services provided under the Medicaid State Plan or any other waiver services
- Separate payment will not be made for Structured Family Caregiving
- Caregiver Coaching services will not be reimbursed when provided by a parent of a minor child participant.

Caregiver Coach Example 2

Job description

Service Definition The purpose of Caregiver Coaching and is to enable the stabilization and continued community tenure of a waiver participant by equipping the participant's lay caregiver(s) with the necessary skills to manage the participant's chronic medical conditions and associated behavioral health needs related to a cognitive impairment and/or dementia.

Caregiver Coach Example 2 cont'd

Major Duties

- Initial consultation for assessment of the caregiver to determine initial coaching needs, and understand the caregiver's goals, values, needs and strengths.
- Caregiver Coaching provided in the home of the participant, virtually or telephonically and through Health Insurance Portability and Accountability Act (HIPAA) secure communication platforms that allow for real time and asynchronous communication between caregivers and caregiver coaches and collaboration with waiver care managers
- Caregiver Coaching services are family centered, individualized to the needs of the participant and caregiver, and informed by an assessment of each caregiver's goals, values and needs.
- A caregiver coach with expertise working with lay caregivers will conduct a structed caregiver assessment and deliver ongoing education and coaching that is informed by the assessment.
- Caregiver Coaching may be delivered telephonically and through HIPPA secure electronic communication platforms that enable a caregiver coach and a caregiver to communicate efficiently and, in a manner, convenient to the caregiver.

Caregiver Coach Example 2 cont’d

- Provider agencies must capture any caregiver communications received through an electronic communication platform, such as an app or e-mail, to facilitate the sharing of relevant information with care managers. Providers will communicate with care managers through traditional means to share any relevant information. The service does not require any specific percentage of in-person visits versus virtual visits.
- The service is designed to equip the participant’s lay caregiver(s) with the skills to manage the participant’s chronic medical conditions and associated behavioral health needs related to cognitive impairment and/or dementia. Part of the caregiver assessment rendered by the caregiver coach will address areas of the caregiver’s life that promote socialization and involvement within the community, but ultimately, the decision is based on where the caregiver needs support. If community integration is an area important to the participant, the caregiver coach will support the caregiver in ensuring the participant's goals with regards to community integration are met. Additionally, a caregiver's community integration and supporting a participant's community integration may change over time and will be consistently modified as necessary.

Caregiver Coach Example 2 cont'd

- A caregiver coach engages with a caregiver on a bi-weekly basis to understand the evolving needs of the participant and caregiver and deliver content, strategies and tools related to the management of the participant's needs and behaviors and the caregiver's self-care needs.
- Caregiver training will include how to address necessary precautions to prevent infections/spread in the home and address anxiety that participants may experience related to the crisis; behavior and triggering events; effective verbal and nonverbal communication strategies; strategies for managing challenging behaviors; and how to address home safety concerns. Coaching will also support a caregiver to apply stress reduction techniques and reduce caregiver isolation.
- Caregiver coach will assist the caregiver and participant in creation of a crisis management/emergency plan to address the person and environment.

Caregiver Coach Example 2 cont'd

Plan will be reviewed and updated on a monthly basis (and more often as needed) and provided to the care manager and waiver/Medicaid State Plan/Hospice providers as well as emergency contacts and backup caregiver. Plan shall include but is not limited to the following:

- Health conditions
- Advanced directives, will planning, physician orders for life sustaining treatment
- Medications and medication management/assistance to prevent medication errors
- Fall prevention interventions
- Healthcare providers including contact information
- Emergency contacts – Identification and contact information for backup caregiver
- Contact information for caregiver coach and waiver care manager
- Caregiver resources available within the caregiver's/participant's community of choice.

Caregiver Coach Example 2 cont’d

Activities Not Allowed The following activities are not allowed or reimbursed under Caregiver Coaching:

- Caregiver coaching services will not duplicate services provided under the Medicaid State Plan or any other waiver service.
- Separate payment will not be made for Structured Family Caregiving.
- Caregiver Coaching service will not be reimbursed when provided by a parent of a minor child participant.

Registered Nurse Examples

RN Example 1

Job Description

Your main goal in this role is to provide safe, professional, and loving care to our patients in their homes. Our Registered Nurses must possess strong clinical knowledge in various geriatric disease processes and be proficient in performing head-to-toe assessments, wound care, blood draws, administering IV therapies, maintenance of PICC line, to name a few

RN Example 1 cont'd

Home Care Nurse Responsibilities:

- Traveling to patients' homes and managing their care plans according to physicians' instructions
- Administering medication and insulin, and completing blood pressure, glucose, urine, and stool tests
- Inspecting wounds, changing dressings, and handling personal grooming and hygiene
- Testing for muscle weakness, bedsores, and any signs of infection
- Listening to the concerns of family members and answering their questions
- Educating caregivers and family on the aftercare or ongoing care of the patient
- Providing suggestions for improved healthcare to physicians and family members of the patient
- Monitoring patient recovery and compiling reports for the physician

RN Example 1 cont’d

- Keeping abreast of developments in healthcare and attending workshops and lectures as required
- Collaborating with doctors and other healthcare professionals to develop improved diets and healthcare plans for patients
- Administer nursing care to ill, injured, or disabled patients
- Diagnose and establish patient treatment plans
- Monitor and report changes in patient symptoms or behavior
- Communicate with collaborating physicians or specialists regarding patient care
- Educate patients about health maintenance and disease prevention
- Facilitate referrals to other healthcare professionals and medical facilities
- Maintain accurate patient medical records
- Provide advice and emotional support to patients and their family members

RN Example 1 cont’d

Homecare RN requirements:

- Associates degree in nursing or similar
- Relevant license and certification
- Home care experience preferred
- Excellent observational and problem-solving skills
- The ability to follow instructions but also to act independently if necessary
- Excellent report writing skills
- Active listening skills and empathy
- Physical and mental strength
- A valid driver’s license and reliable transport may be required

RN Example 2

Job Description

- Supervises a staff of non-medical/medical who provide and support clients with personal care needs. Schedule attendants and homemakers work assignments. Monitors the quality of care performed by the care team.

- Reporting Relationship
  - CEO
- Responsibilities
  - Lead by example and coach teams to provide exceptional patient experiences
  - Challenge, encourage, and inspire team members to achieve desired results
  - Evidence of management style, which builds alliances within the business and emphasizes high moral, collegiality, effective teamwork and high moral standards
  - Continual focus on a productive schedule

RN Example 2 cont'd

Major Job Duties

- Coordinate daily or weekly team huddles and team meetings
- Provide ongoing feedback, training and annual performance reviews for team members within the practice
- Assist in the interviewing and on-boarding of new hires
- Provide training and support to ensure all staff demonstrate knowledge of the business, operating procedures, and protocols
- Supporting daily office operations with focus towards employee engagement and revenue cycle management (billing, collections, etc.)
- Responding to operational concerns timely and effectively. Be accessible and responsive.
- Serve as the point person for office management duties

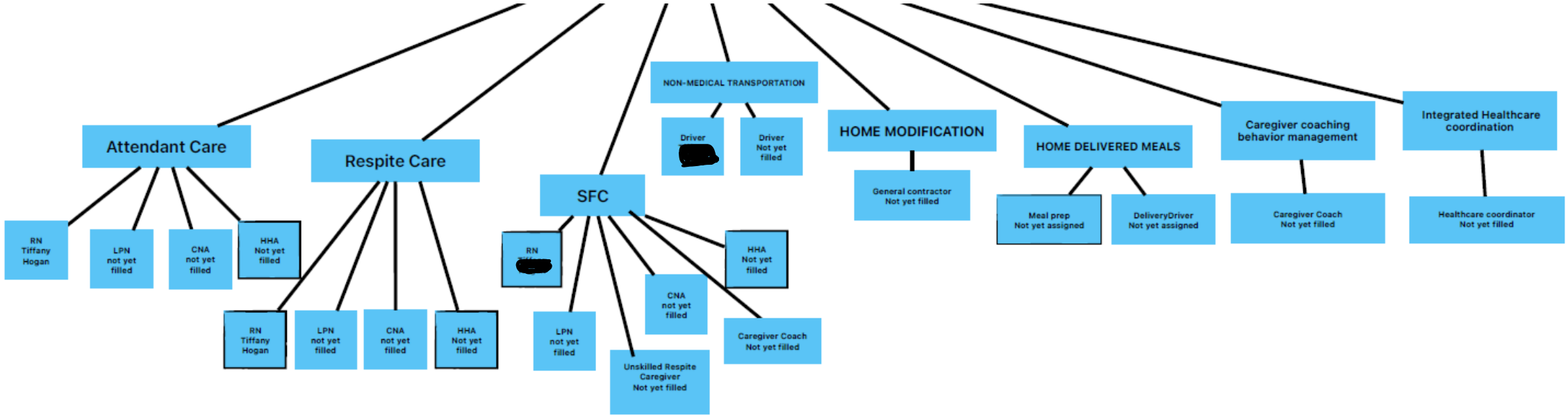
RN Example 2 cont'd

Qualifications

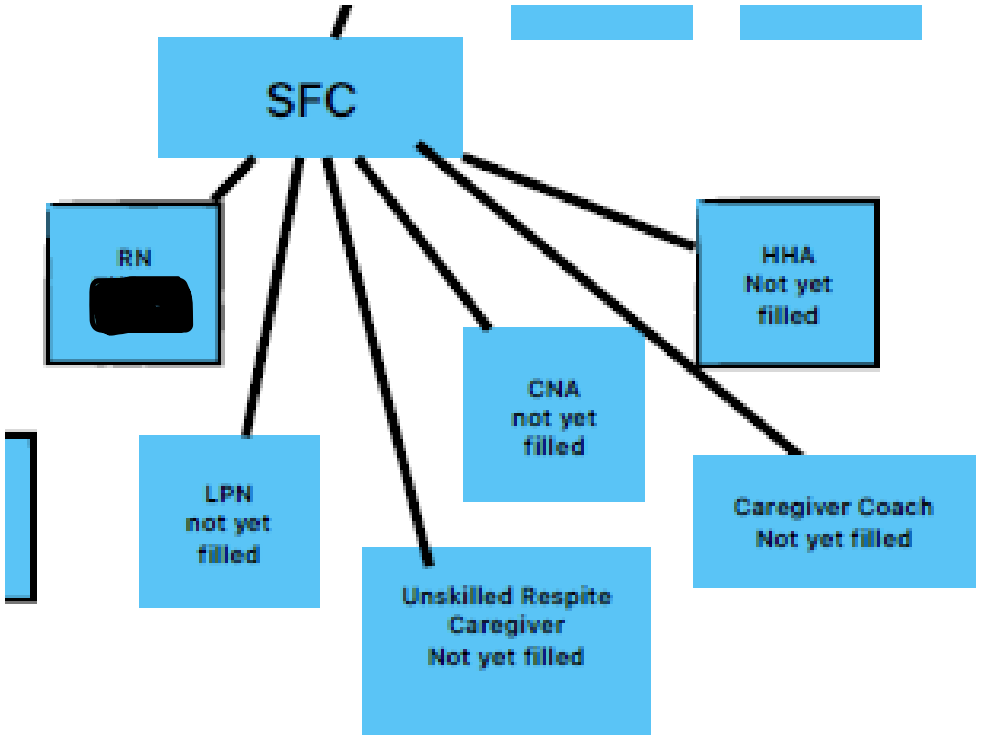
- RN degree
- Strong working knowledge of Medicaid and state practices
- Excellent time management and organizational skills
- Customer service focused
- Experience of working in healthcare a must
- Experience with Microsoft Word, Outlook, and Excel
- Patient focused
- Able to work Monday through Friday and some weekends

Organizational Chart Examples

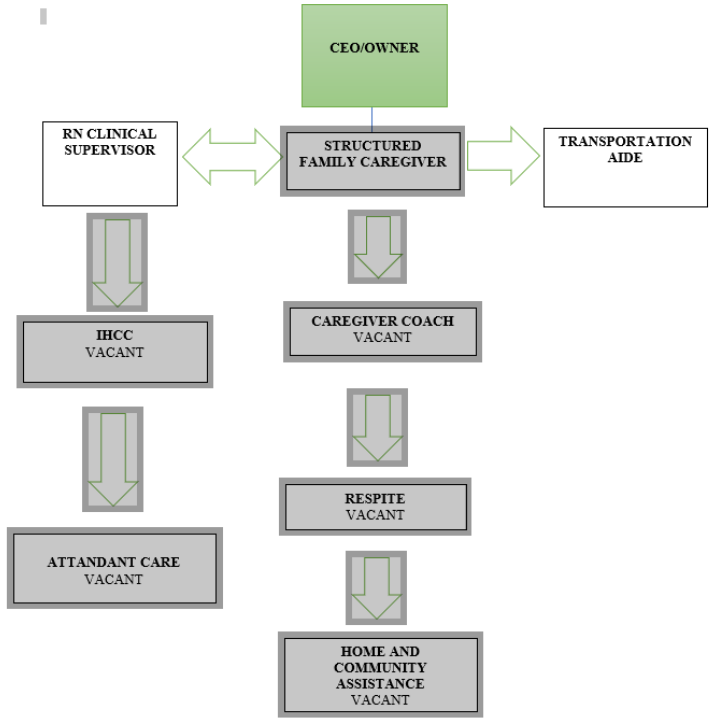
Org Chart Example 1



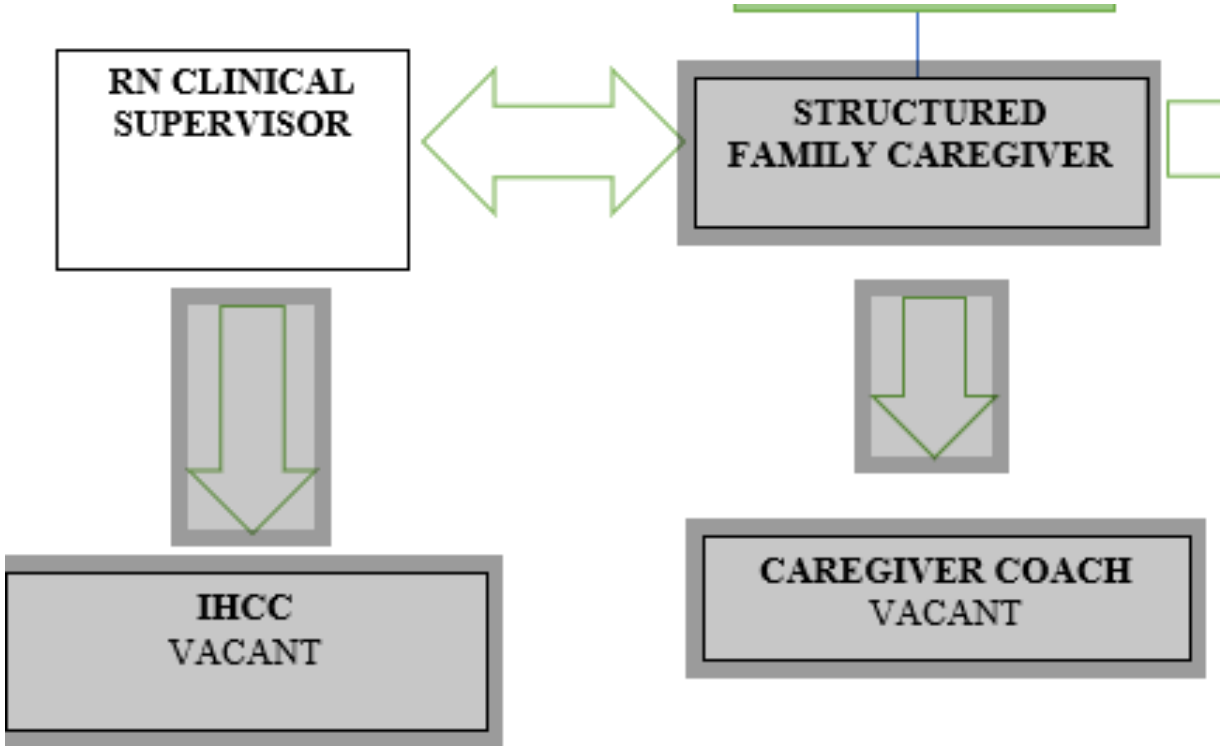
Org Chart Example 1 Zoomed In



Org Chart Example 2



Org Chart Example 2 Zoomed In



Questions?

- Reach out to daprovideraapp@fssa.in.gov with any questions.