

H&W:STRUCTURED FAMILY CAREGIVING



Impact on Providers: Providers of Structured Family Caregiving on the Health and Wellness Waiver (H&W) must meet stringent qualifications and demonstrate experience or accreditation to participate. They are responsible for continuous oversight, including regular home visits and training, and must maintain detailed documentation to support service delivery and compliance. These requirements ensure high-quality care but also demand significant administrative and operational capacity from provider agencies.



General Requirements:

- Provider Qualifications:
 - Must be approved by the Office of Medicaid Policy and Planning (OMPP).
 - Follow the standards outlined in 455 IAC 2 for provider qualifications, maintaining approval, and liability insurance.
 - Providers must demonstrate 3 years of experience delivering services to older adults and adults with disabilities, or have national accreditation.
- Principal Caregiver Qualifications:
 - Must meet all Federal and State regulatory guidelines.
 - Receive training based on assessed needs.
 - Paid a per diem stipend for care provided.
 - Must receive a minimum of 8 hours in person annual training that reflects the participant's and principal caregiver's assessed needs.



Service Description:

- Structured Family Caregiving:
 - A caregiving arrangement where participants live with a principal caregiver who provides daily care and support.
 - Caregivers can be family or non-family members living with the participant.
 - Provider agencies identify caregivers, assess home settings, and provide ongoing oversight and support.
 - Emphasizes participant independence, dignity, self-respect, and privacy.



Service Levels:

- There are three levels of Structured Family Caregiving, each with a unique rate. The applicable rate is determined through completion of the Adult Family Care/Structured Family Care Level of Service Assessment. Care managers complete this assessment at least annually. The score determines the reimbursement rate to be utilized in the participant's next service plan.

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- Service Levels:
 - Level 1: AFC/SFC LOS Assessment Score of 0 - 35.
 - Level 2: AFC/SFC LOS Assessment Score of 36 - 60.
 - Level 3: AFC/SFC LOS Assessment Score of 61+.
- Service Rates:
 - Level 1: \$77.54/per day
 - Level 2: \$99.71/per day
 - Level 3: \$133.44/per day
 - *Estimated compensation to caregiver: 65-70% of daily rate. Estimated administrative cost to provider agency: 30-35% of daily rate.*



Allowable Activities:

- Included Services:
 - Services provided by a principal caregiver who is the spouse of the participant or the parent of the minor participant (Legally Responsible Persons).
 - Home and Community Assistance for IADLs.
 - Attendant care for ADLs.
 - Medication oversight (as permitted by State law).
 - Escorting for necessary appointments.
 - This can include transporting individuals to the doctor. When provided, such transportation is incidental and not duplicative of any other State Plan or waiver service.
 - Appointments and community activities that are therapeutic in nature or assist with maintaining natural supports.
 - Other supports as described in the individual's service plan.



Service Standards:

- Provider Responsibilities:
 - Conduct a minimum of two home visits per quarter by a registered nurse or caregiver coach.
 - Provide substitute caregivers for up to 15 days per year for primary caregiver wellness and skill development.
 - Capture and maintain electronic daily notes from principal caregivers. Information collected must be used to monitor participant health and principal caregiver support needs.
 - Provider's must work with participants and principal caregivers to establish backup plans for emergencies and other times the principal caregiver is unable to provide care.
- Participant Rights:
 - Services must support participant independence, dignity, and privacy.
 - Must be provided in a private residence with opportunities for personalization.

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- **Documentation Standards:**
- Waiver Care Manager:
 - Document the need for Structured Family Caregiving in the service plan.
 - Ensure services are performed by the principal caregiver as outlined in the plan.
 - Provide the person-centered service plan and Caregiver Assessment to the provider agency.
 - Provider Agency:
 - Document training, participant status, medication management, home visits, and collaboration with other service providers.
 - Regularly review caregiver notes to respond to changes in participant health status and avoid unnecessary hospitalizations.

- **Verification of Qualifications:**
- Entity Responsible:
 - Office of Medicaid Policy and Planning (OMPP).
 - Frequency:
 - Up to every 3 years.

- **Additional Information**
- For more detailed information on Structured Family Caregiving you can visit the following:
- 1915(c) SFC Application: <https://www.dol.gov/agencies/whd>



Still have questions? Reach out to your
Technical Assistance Team!



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