

1310- A - AGENCY WITH CHOICE

EFFECTIVE DATES: 03/02/20, 01/01/21

APPROVAL DATES: 12/05/19, 11/19/20

I. PURPOSE

This Policy applies to ALTCS E/PD, DES DDD (DDD); Fee-For-Service (FFS) Programs including Tribal ALTCS. This Policy establishes requirements for the Agency with Choice (AWC) member-directed service delivery model option as specified in AAC R9-28-509.

II. DEFINITIONS

**AGENCY WITH CHOICE
(AWC)**

A member-directed service delivery model option offered to ALTCS members who reside in their own home. This option is elective as a member or the member's Individual Representative (IR) may choose to participate in AWC. Under the AWC option, the provider agency and the member/IR enter into a partnership agreement. The provider agency serves as the legal employer of the Direct Care Worker (DCW) and the member/IR serves as the day-to-day managing employer of the DCW.

**DIRECT CARE WORKER
(DCW)**

An individual who assists, an elderly individual or an individual with a disability with activities necessary to allow them to reside in their home. A DCW, also known as Direct Support Professional, shall be employed/contracted by DCW Agencies or, in the case of member-directed options, employed by ALTCS members in order to provide services to ALTCS members.

**DIRECT CARE WORKER
(DCW) AGENCY**

An agency that registers with AHCCCS as a service provider of Direct Care Services that include Attendant Care, Personal Care, Homemaker or Habilitation. The agency, by registering with AHCCCS, warrants that it has a workforce (employees or contractors) with the abilities, skills, expertise, and capacity to perform the services as specified in AHCCCS policy.

**ELECTRONIC VISIT
VERIFICATION (EVV)**

A computer-based system that electronically verifies the occurrence of authorized service visits by electronically documenting the precise time a service delivery visit begins and ends, the individuals receiving and providing a service, and type of service performed.

**INDIVIDUAL REPRESENTATIVE
(IR)**

For AWC only, a parent, family member, guardian, advocate, or other individual authorized by the individual to serve as a representative in connection with the provision of services and supports, as specified in A.A.C. R9-28-509. If a member is unable to fulfill the co-employment roles and responsibilities on their own, an IR may be appointed to assist the member in directing their care. The role of an IR is to act on the member's behalf in choosing and directing care, including representing the member during the service planning process and approving the service plan. A.A.C R9-28-509 and Section 1915 (k) of the Social Security Act, prohibit an IR from serving as a member's paid DCW.

SERVICE PLAN

A complete written description of all covered health services and other informal supports which includes individualized goals, peer-and-recovery support and family support services, care coordination activities and strategies to assist the member in achieving an improved quality of life.

III. POLICY

The AWC is a member-directed option which allows members to have more control over how certain services are provided, including services such as attendant care, personal care, homemaker, and habilitation. The member-directed options are not a service but rather define the way in which services are delivered and are available to ALTCS members who live in their own home. The options are not available to members who live in an alternative residential setting or nursing facility.

The member independence and personal choice are the primary objective of the AWC member-directed option. Members choosing to participate in the AWC member-directed option shall be interested in actively taking responsibility for managing their own health care.

Throughout the Policy, the term "member" means the member or the member's IR.

The member-directed options represent a philosophical approach to service delivery that maximizes a member's ability to:

1. Identify their own needs.
2. Determine how and by whom their needs are met:
 - a. Choose which tasks to receive from their DCW or ACW within the scope of the Service Plan,
 - b. Select the days and times for service delivery, and
 - c. Recruit, hire (select), manage, supervise, and terminate (dismiss) the DCW of his/ her choice, including family members. Parents of minor children are prohibited from serving as a paid DCW.

3. Define what constitutes quality of care in the delivery of their services. The ALTCS members can direct care for one or more services under the AWC option including, Attendant Care, Personal Care, Homemaker, and Habilitation (in-home/day). The DCWs serving members under the AWC option shall be employees of the Provider Agency, in order to fulfill the legal employer roles and responsibilities in partnership with the member’s managing day-to-day employer roles and responsibilities.

If a member is unable to fulfill the roles and responsibilities as specified in Attachment A, for the above listed services on their own, an IR may be appointed to assist the member in directing their care. If a member has a guardian, that guardian automatically serves in the capacity of an IR. The role of an IR is to act on the member’s behalf in choosing and directing care, including representing the member during the service planning process and approving the Service Plan. A.A.C R9-28-509 and Section 1915 (k) of the Social Security Act prohibit an IR from serving as a member’s paid DCW.

The number and frequency of authorized services are determined through an assessment of the member’s needs by the ALTCS case manager with the member and/or the member’s family, health care decision maker, and their designated representative, in tandem with the completion of the cost-effectiveness study. Refer to the FFS Provider Billing Manual for information regarding service codes and modifiers. Members are not precluded from receiving other medically necessary services. Refer to AMPM Policy 1240-A for more detailed information about the services ALTCS members can direct under AWC.

Within AWC the member, the provider agency, and the ALTCS case manager are critical to the effective implementation of the member’s Service Plan. Each of these individuals has roles and responsibilities which shall be met in order for the Service Plan to be successful.

A. ROLES AND RESPONSIBILITIES UNDER AGENCY WITH CHOICE

1. The member Roles and Responsibilities
Under the AWC, members have the right to make decisions including who will provide their services, when those services will be provided and how the services will be provided. The member and the provider agency share employment/day-to-day management, roles, and responsibilities of the DCW. The members can opt in and out of the AWC at any time by notifying the provider agency and their ALTCS case manager.
 - a. The member Responsibilities:
At a minimum, the member has two responsibilities which they are expected to carry out, if necessary. Recruiting and selecting the DCW(s). This includes:
 - i. Identifying the qualifications, skills, and characteristics of a DCW (over and above the minimum AHCCCS and provider agency qualifications) that are necessary to meet the individual member’s needs, and
 - ii. Selecting the DCW from a pool of DCWs already employed by the provider agency or recruiting the DCW from the community to become an employee of the provider agency.

- b. Dismissal of the DCW(s). This includes:
 - i. Identifying whether or not the member is satisfied with the care provided by the DCW, and
 - ii. Making the decision to dismiss the DCW from providing their care only. Note that the member does not “fire” the DCW as an employee of the provider agency.
- c. The member may choose to carry out some or all of the following additional responsibilities:
 - i. Training the DCW(s), and
 - ii. Identifying training needs (over and above the minimum required training by AHCCCS or the provider agency) that are necessary to meet their unique needs.
- d. Managing the DCW(s):
 - i. Orienting the DCW to the manner in which they want the services provided,
 - ii. Determining the schedule for the DCW, including the days/times when the specific tasks will be done, and
 - iii. Verifying the dates and times the DCW provides the service.
- e. Supervising the DCW(s):
 - i. Providing oversight and instruction to the DCW to ensure they are receiving quality care,
 - ii. Communicating regularly with the provider agency about the DCW’s performance, and
 - iii. Providing feedback to the DCW regarding their performance.
- f. Communicating with the provider agency regarding changes in service delivery:
 - i. Notifying the provider agency when the DCW does not show up or cannot provide services that day, and
 - ii. Notifying the provider agency when a service scheduling change has occurred.

B. ALTCS CASE MANAGER ROLES AND RESPONSIBILITIES

- 1. In addition to the ALTCS case manager Standards specified in AMPM Chapter 1600, the ALTCS case manager is responsible for the following for members electing AWC:
 - a. Informing and educating members about the AWC option including verifying that members electing AWC, understand required and optional roles and responsibilities,
 - b. Supporting the member to assess whether or not they desire or need an IR to assist them in directing their care. The IR form, Attachment B, shall be used to document the name and relationship of the IR to the member and their respective roles and responsibilities,
 - c. Supporting the member to recruit and select the DCW(s):
 - i. Presenting options to the member for recruiting and selecting the DCW(s):
 - 1) Selecting the DCW from a pool of DCWs already employed by the provider agency, and
 - 2) Recruiting the DCW from the community to become an employee of the provider agency.
 - ii. Assisting the member in identifying qualifications, skills, and characteristics of a DCW that are necessary to meet their needs,
 - iii. Assisting the member in identifying how many DCW(s) they might need to provide their care, and
 - iv. Assisting the member in identifying and initiating contact with a provider agency.

- d. Supporting the member to dismiss DCW(s):
 - i. Assisting the member in utilizing conflict resolution strategies with the DCW and the provider agency in the event they are unsatisfied with the DCW's or the provider agency's performance, and
 - ii. Assisting the member to develop a transition plan to ensure there are no interruptions in the provision of care.
- e. Supporting the member, as needed, to receive training regarding their roles and responsibilities:
 - i. Assisting the member in identifying whether or not they need training to fulfill their roles and responsibilities, and
 - ii. Finding a provider to conduct the training and authorize the service.
- f. Supporting the member to train DCW(s):
 - i. Assisting the member in identifying whether or not additional training is required for the DCW in order to meet member specific needs,
 - ii. Ensuring the requested training is within the service scope specifications for DCW training as specified in this policy, and
 - iii. Finding a provider to conduct the training and authorize the service.
- g. Supporting the member to manage DCW(s):
 - i. Ensuring care provided is within the scope of services and the service hours authorized and specified in the Service Plan, and
 - ii. Ensuring members understand what services need to be provided on a specific basis (e.g. once a day, every morning, etc.), versus services that are more flexible with regard to when they are provided (for example: laundry could be done any day of the week).
- h. Supporting the member to supervise DCW(s):
 - i. Encouraging members to communicate directly with the DCW and the provider agency particularly when it pertains to DCW's performance and/or quality of care concerns, and
 - ii. Following up with members to inquire about their progress in implementing AWC.
- i. Obtaining and maintaining a current copy of Attachment A, supplied by the DCWs.

C. PROVIDER AGENCY ROLES AND RESPONSIBILITIES

The Provider Agencies shall have policies and procedures pertaining to AWC that include, at a minimum, the following:

- 1. Partnership Agreement:
 - a. A timeline for when Attachment A shall be signed by the DCW Agency representative and the member after the Provider Agency has been informed of the members election of the option by the Case Manager,
 - b. A process for ensuring Attachment A is reviewed, at a minimum, annually or within the timeframe noted on the completed and signed form, and
 - c. A process for ensuring case managers receive a copy of the current Attachment A.

2. Agency Communication:
 - a. Guidelines for ensuring members have a point of contact for support and defined protocols for requesting support including informing the provider agency of concerns regarding the care provided by a DCW, and
 - b. A process for ensuring that the timeframes for regular contact specified in Attachment A are adhered to.

3. Member/IR Support:
 - a. Guidelines for identifying and ensuring a member's support needs, pertaining to the members roles and responsibilities, are addressed either by the provider agency or referred to the Case Manager,
 - b. Protocol for the member to report instances where they have changed the DCW schedule, and
 - c. Supporting the member in understanding how to develop and implement a back-up plan in the event the DCW does not show up or cannot provide services that day.

4. DCW Support:

Informing the DCWs about the AWC option and how the interaction between the member, DCW and the provider agency may be different than interaction under the traditional service model,

The case manager will assist the member to assess their own training needs as they relate to directing their own care. There is no mandatory member training for AWC participation. Training is available to assist the member, if needed, to succeed in directing their own care. The training will be provided by an AHCCCS registered provider and arranged by the Contractor. Training requires prior authorization from the case manager.

The member training on the following topics will be available for members who select the AWC if they feel that it is necessary to support them to fulfill their roles and responsibilities. Member training topics may include:

- a. Recruiting and Selecting the DCW(s),
- b. Dismissing the DCW(s),
- c. Training the DCW(s),
- d. Managing the DCW(s), and
- e. Supervising the DCW(s).

Refer to FFS Provider Billing Manual for information regarding service codes.

5. As the legal employer of the DCW, the provider agency shall carry out the following responsibilities including:
 - a. Reviewing and completing Attachment A with the member, including supporting the member to identify their respective roles and responsibilities,

- b. Hiring and Firing the DCW(s):
 - i. Ensure the DCW meets the minimum qualifications for AHCCCS, Contractors and/or the provider agency,
 - ii. Hire and fire the DCW, including completing and maintaining documentation verifying the DCW is legally eligible to work, and
 - iii. Support the member to dismiss a DCW and develop a transition plan to ensure there are no interruptions in the provision of care.
- c. Training the DCW(s):
 - i. In addition to required training, a member may identify and request additional training for the DCW to meet their unique needs. Additional training is not mandatory. The training shall be provided by an AHCCCS registered provider and arranged by the Contractor. Training requires prior authorization from the case manager,
 - ii. Additional DCW training requested by the member shall meet the following conditions:
 - 1) The training shall be outside the scope of training required by the following entities:
 - a) AHCCCS as specified in AMPM Policy 1240-A,
 - b) Contractors, and
 - c) Provider agencies.
 - 2) The training shall be individualized for the member and not a standardized training already available,
 - 3) An AHCCCS-registered provider shall provide the training. The member may not provide the training,
 - 4) The training shall be goal driven and support the implementation of the Service Plan,
 - 5) The training cannot be used for professional development for the DCW, such as training for licenses or certifications, and
 - 6) The training cannot exceed a total of 16 units (four hours) of training for each DCW per the member benefit year,
- d. Managing the DCW(s):
 - i. Complete and file all required payroll documentation:
 - a) Payroll taxes, including withholding, deposit, and filing of required documentation, and
 - b) Federal and State required year-end employer filing requirements.
 - ii. Manage Electronic Visit verification and billing for services.
- e. Supervising the DCW(s):
 - i. Conduct regular supervision visitations for all direct care services specified in AMPM Policy 1240-A, and
 - ii. Support the member to use conflict resolution strategies in the event they are unsatisfied with a DCW's performance.
- f. Supporting the execution of a back-up plan in the event the DCW does not show up or cannot provide services to a member on any given day.

Refer to FFS Provider Billing Manual for information regarding service codes.