CHAPTER 1300
MEMBER DIRECTED OPTIONS

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CHAPTER 1300
MEMBER DIRECTED OPTIONS

POLICY 1300
CHAPTER OVERVIEW

1300  CHAPTER OVERVIEW

REVISION DATE:  03/01/13, 04/01/11, 02/01/11

EFFECTIVE DATE:  04/01/2008

A. OVERVIEW OF MEMBER DIRECTED OPTIONS

Member-directed options allow members to have more control over how certain services are provided, including services such as attendant care, personal care, homemaker and habilitation. The options are not a service, but rather define the way in which services are delivered. Member-directed options are available to Arizona Long Term Care System (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.

This Chapter describes the standards and requirements for the Agency With Choice (AWC) and Self-Directed Attendant Care (SDAC) options under the ALTCS Home and Community Based Services (HCBS) program. In accordance with State and Federal regulations, AWC and SDAC must be medically necessary and cost effective. AWC is available to all ALTCS enrolled members and SDAC is available to members who are elderly and/or have physical disabilities.

Member independence and personal choice are the primary objective of the AWC and SDAC member-directed options. Members choosing to participate in this service must be interested in actively managing their own health care and be willing to take responsibility for obtaining and maintaining AWC or SDAC services.

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

1. Identify his/her own needs

2. Determine how and by whom his/her needs are met
   a. Choose which tasks to receive from his/her Direct Care Worker (DCW) or Attendant Care Worker (ACW) within the scope of the service plan
   b. Select the days and times for service delivery
   c. Recruit, hire (select), manage, supervise and terminate (dismiss) the DCW and ACW of his or her choice, including most family members. Parents of minor children are prohibited from serving as a DCW or ACW. For SDAC only, spouses are prohibited from serving as an ACW.

B. CHAPTER DEFINITIONS

The following words and phrases contained in Chapter 1300 of the AHCCCS Medical Policy Manual have the following meaning:

**Agency With Choice (AWC)** – An option offered to ALTCS members who reside in their own home. A member or the member’s Individual Representative (IR) may choose to participate in the Agency with Choice option. Under the Agency with Choice option, the provider agency and the member/IR enter into a co-employment 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.

**Self-Directed Attendant Care (SDAC) Service Option** – A service option offered to ALTCS Elderly and Physically Disabled (E/PD) members who reside in their own home. Within this option, members utilize an Attendant Care Worker (ACW) to perform tasks such as homemaking, personal care, and general supervision. As described in this chapter, the ACW may also provide limited skilled services in specific circumstances. This service differs from traditional attendant care in that the ACW who provides these services is an employee, not of an agency, but of the member who hires, trains and supervises the caregiver. The member is supported by a Fiscal Employer Agent as outlined in Policy 1324 of this Chapter.

**Skilled Services** – Under R9-28-508, the following list of skilled services are the only skilled services that may be provided by an ACW and only within the SDAC member-directed option:

1. Bowel care, including suppositories, enemas, manual evacuation and digital stimulation
2. Bladder catheterizations (non-indwelling) that do not require a sterile procedure
3. Wound care (non-sterile)
4. Glucose monitoring
5. Glucagon as directed by the health care provider
6. Insulin by subcutaneous injection only if the member is not able to self-inject
7. Permanent gastrostomy tube feeding and
8. Additional services requested in writing with the approval of the Director and the Arizona State Board of Nursing.

**C. OTHER LINKS AND RESOURCES**

1. AHCCCS Website ([www.azahcccs.gov](http://www.azahcccs.gov))

2. Member SDAC Manual

3. Member AWC Manual (pending)


**D. REFERENCES**

1. Arizona Long Term Care Contracts for Elderly and Physically Disabled (EPD)

2. Arizona Long Term Care Contract for Individuals with Developmental Disabilities

3. Home and Community-based Attendant Services and Supports State Plan Option (Community First Choice)- Section 1915(k) of the Social Security Act

4. Arizona Administrative Code, R9-28-508

5. Arizona Administrative Code, R9-28-509
EXHIBIT 1300-1

AGENCY WITH CHOICE
SERVICE CODES AND APPLICABLE UNITS OF SERVICE
## ATTENDANT CARE SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Unit</th>
<th>Code / Modifier</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendant care provided through Agency with Choice option</td>
<td>15 minutes</td>
<td>S5125 / U7</td>
<td>Code and modifier are utilized for all services provided in the Agency with Choice option. The modifier may be used in combination with other modifiers listed below.</td>
</tr>
<tr>
<td>Spouse attendant care provided through Agency with Choice option</td>
<td>15 minutes (40 hrs/wk limit)</td>
<td>S5125 / U7, U3</td>
<td>Code and modifier are utilized for DCWs providing attendant care when the DCW is the member’s spouse.</td>
</tr>
<tr>
<td>Attendant care provided through Agency with Choice option</td>
<td>15 minutes</td>
<td>S5125 / U7, U4</td>
<td>Code and modifier are utilized for DCWs providing attendant care when the DCW is a family member who is not residing in the member’s home.</td>
</tr>
<tr>
<td>Attendant care provided through Agency with Choice option</td>
<td>15 minutes</td>
<td>S5125 / U7, U5</td>
<td>Code and modifier are utilized for DCWs providing attendant care when the DCW is a family member who is residing in the member’s home.</td>
</tr>
</tbody>
</table>

## PERSONAL CARE SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Unit</th>
<th>Code / Modifier</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal care provided through the Agency with Choice option</td>
<td>15 minutes</td>
<td>T1019 / U7</td>
<td>Code and modifier are utilized for all services provided in the Agency with Choice option.</td>
</tr>
</tbody>
</table>

## HOMEMAKER SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Unit</th>
<th>Code / Modifier</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homemaker services provided through Agency with Choice option</td>
<td>15 minutes</td>
<td>S5130 / U7</td>
<td>Code and modifier are utilized for all services provided in the Agency with Choice option.</td>
</tr>
</tbody>
</table>

## HABILITATION SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Unit</th>
<th>Code / Modifier</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Habilitation services provided through the Agency with Choice option</td>
<td>15 minutes (up to 20 units)</td>
<td>T2021 / U7</td>
<td>Code and modifier are utilized for all services provided in the Agency with Choice option.</td>
</tr>
<tr>
<td>In-Home Habilitation services provided through the Agency with Choice option</td>
<td>15 minutes</td>
<td>T2017 / U7</td>
<td>Code and modifier are utilized for all services provided in the Agency with Choice option.</td>
</tr>
</tbody>
</table>

## TRAINING

<table>
<thead>
<tr>
<th>Service</th>
<th>Unit</th>
<th>Code / Modifier</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training provided through the Agency with Choice option to the Member</td>
<td>15 minutes</td>
<td>S5108 / U7</td>
<td>Code and modifier are utilized for all services provided in the Agency with Choice option.</td>
</tr>
<tr>
<td>Training provided through the Agency with Choice option to the DCW</td>
<td>15 minutes</td>
<td>S5115 / U7</td>
<td>Code and modifier are utilized for training to DCW who is not related to the member.</td>
</tr>
<tr>
<td>Training provided through the Agency with Choice option to the DCW</td>
<td>15 minutes</td>
<td>S5110 / U7</td>
<td>Code and modifier are utilized for training to DCW who is related to the member.</td>
</tr>
</tbody>
</table>

## ADDITIONAL SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Unit</th>
<th>Code / Modifier</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Transition provided through Agency with Choice option.</td>
<td>1 unit / episode (Once every 5 years)</td>
<td>T2038 / U7</td>
<td>When these services are provided to an ALTCS member who has chosen the Agency with Choice option, the “U7” service code modifier must be used.</td>
</tr>
<tr>
<td>Emergency Alert System provided to member through Agency with Choice option. (Installation)</td>
<td>1 unit / service</td>
<td>S5160 / NU, U7</td>
<td>When the installation services are provided to an ALTCS member who has chosen the Agency with Choice option, the “U7” service code modifier must be used.</td>
</tr>
<tr>
<td>Emergency Alert System provided to member through Agency with Choice option. (Monthly Service)</td>
<td>1 unit / month</td>
<td>S5161 / RR, U7</td>
<td>When monthly service is provided to an ALTCS member who has chosen the Agency with Choice option, the “U7” service code modifier must be used.</td>
</tr>
<tr>
<td>Home Delivered Meals provided to member through Agency with Choice option.</td>
<td>1 meal per day</td>
<td>S5170 / U7</td>
<td>When these services are provided to an ALTCS member who has chosen the Agency with Choice option, the “U7” service code modifier must be used.</td>
</tr>
</tbody>
</table>
EXHIBIT 1300-2

AGENCY WITH CHOICE
CO-EMPLOYMENT AGREEMENT
EXHIBIT 1300-2
AGENCY WITH CHOICE
CO-EMPLOYMENT AGREEMENT

| Member’s Name | AHCCCS ID # | Date | Next Review Date (Optional) |
---|---|---|---|

The purpose of this agreement is to create a partnership between the ALTCS Member (you) and the agency providing your services (us). This agreement will help us identify how we will work together to choose, manage and supervise your Direct Care Workers (DCWs).

As a co-employer, **you** agree to work together with us to make sure your care is provided in the way you want and need to support you living in your own home. As a co-employer, you will choose the DCWs who will be providing your care and will make decisions on how your care is provided on a daily basis. This agreement will help you learn and decide how you want to direct your care with our assistance.

As a co-employer, **we** agree to continue to do what we normally do to ensure the quality of your care, but we also have the opportunity to assist you in directing your own care. This agreement will help us learn how involved you want us to be in directing your care and what we can do to help you.

Before signing the agreement, we must check that you:

- Are living in your own home,
- Receiving either attendant care, personal care, homemaker and/or habilitation services,
- Have told the case manager of your decision to choose the agency with choice, member-directed option, and
- Have an Individual Representative if you are unable to serve as a co-employer on your own

It is important for you to know:

- You must agree to choose (select) the DCWs who will provide your care and make the decision to dismiss the DCW and choose another DCW if things are not working out. Those responsibilities are already selected on the checklist on the next page. All other responsibilities are optional. You may check off other responsibilities you want to have in directing your care.
- You can change your mind about participating in the agency with choice at any time by telling us and your case manager.

By signing below, the two of us agree

- To our responsibilities listed in the checklist on the next page
- To talk on a regular basis and ask for support when we need help from one another and
- To, in the case we disagree about something, give the other person an opportunity to learn about the issue and discuss options for resolving the problem.

| Member’s Signature | Date |
---|---|
| Individual Representative’s Signature (as applicable) | Date |
| Agency Representative Signature | Date |
## EXHIBIT 1300-2
### AGENCY WITH CHOICE
#### CO-EMPLOYMENT AGREEMENT

<table>
<thead>
<tr>
<th>Member’s Name</th>
<th>AHCCCS ID #</th>
<th>Date</th>
<th>Next Review Date (Optional)</th>
</tr>
</thead>
</table>

### EMPLOYER RESPONSIBILITY | YOUR RESPONSIBILITY | OUR RESPONSIBILITY |
--- | --- | --- |
### SELECTING DCWS | | |
- **Choosing DCWs**
  - Identify qualifications, skills and characteristics of a DCW that are necessary to meet your needs.
  - [I can’t decide my DCWs don’t need to meet minimum qualifications required by AHCCCS, my health plan or the agency. I can identify additional requirements specific to what I want in a DCW.]
  - **Decisions you need to make:**
    - What do I like in a DCW? What don’t I like in a DCW? What do I need in a DCW? What are things my DCW must have versus what are things that would be nice to have in a DCW?
    - Select a DCW from a pool of workers currently employed by the agency or find someone
  - **Decisions you need to make:**
    - How many DCWs do I need? Do I know someone who might be a good DCW?
- **Our Responsibility**
  - Ensure DCWs meets the minimum qualifications required by AHCCCS, the ALTCS Contractor and the provider agency
  - Hire a DCW

### RETENTION OF DCWS | | |
- **Keeping DCWs**
  - Decide whether or not I am satisfied with the care provided by the DCW.
  - **Decisions you need to make:**
    - Is the DCW helping me to achieve my goals? Is s/he listening to me?
    - Is the work that s/he is doing helping me or making me stressed?
  - Make the decision to dismiss the DCW
  - **Decisions you need to make:**
    - Do I want to tell the DCW I don’t want him/her working for me anymore?
    - Do I want the agency to help me tell the DCW I don’t want him/her working for me anymore?
- **Our Responsibility**
  - Support you in dismissing a DCW and developing a transition plan to ensure there are no interruptions in service delivery
  - Fire the DCW
<table>
<thead>
<tr>
<th>EMPLOYER RESPONSIBILITY</th>
<th>YOUR RESPONSIBILITY</th>
<th>OUR RESPONSIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TRAINING OF DCWs</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training DCWs to meet</td>
<td>Identify training</td>
<td>Provide standardized</td>
</tr>
<tr>
<td>my unique needs</td>
<td>needs of the DCW</td>
<td>training to the DCW</td>
</tr>
<tr>
<td></td>
<td>that are necessary</td>
<td>including training</td>
</tr>
<tr>
<td></td>
<td>to meet my unique</td>
<td>required by AHCCCS,</td>
</tr>
<tr>
<td></td>
<td>needs.</td>
<td>ALTCS Contractors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>and the provider</td>
</tr>
<tr>
<td></td>
<td></td>
<td>agency</td>
</tr>
<tr>
<td></td>
<td>[I can’t ask for my DCW to get training that is already required. I can ask that my DCW get additional training if I have a unique need that can only be met if the DCW gets more training.]</td>
<td></td>
</tr>
<tr>
<td><strong>Decisions you need to make:</strong></td>
<td>Is there something that I need the DCW to do that I can’t show him/her how to do...something that would require the DCW to get more training?</td>
<td></td>
</tr>
<tr>
<td><strong>MANAGEMENT OF DCWs</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Making decisions on how</td>
<td>Orient the DCW to the manner in which I want the services provided.</td>
<td>Complete and file all required payroll documentation</td>
</tr>
<tr>
<td>my care is provided</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Determine the schedule for the DCW including determining specific days/times when tasks will be done.</td>
<td>Oversee and process DCW timesheets and billing for services</td>
</tr>
<tr>
<td></td>
<td>[I can only schedule services and hours for the DCW that are listed on my service plan. I can’t decide to change services or add hours to the schedule.]</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Decisions you need to make:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>How do I want the DCW to do the tasks? Do I need to show or tell the DCW how to do it the way I like it done?</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Decisions you need to make:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do I want the DCW to do some services or tasks on certain days? At certain times of the day?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Notify the agency when a service scheduling change has occurred (or needs to occur) that did/will not result in a gap in services</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Decisions you need to make:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Did I change the weekly schedule for the worker? Did I tell the agency?</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Keep track of the hours your DCW works and review and sign timesheets of the DCW</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Decisions you need to make:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Did the DCW work the right amount of hours for each service? Did the DCW do the work that s/he put on the timesheet? Did the DCW put down the right service(s) on the timesheet, the right days and times the services were provided?</td>
<td></td>
</tr>
</tbody>
</table>
**EXHIBIT 1300-2**
**AGENCY WITH CHOICE**
**CO-EMPLOYMENT AGREEMENT**

<table>
<thead>
<tr>
<th>Member’s Name</th>
<th>AHCCCS ID #</th>
<th>Date</th>
<th>Next Review Date (Optional)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>EMPLOYER RESPONSIBILITY</th>
<th>YOUR RESPONSIBILITY</th>
<th>OUR RESPONSIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Supervision of DCWs</td>
<td>• Monitor and instruct the DCW, as necessary, to ensure quality of care.</td>
<td>• Conduct regular supervision visitations required by AHCCCS and ALTCS Contractors</td>
</tr>
<tr>
<td></td>
<td>• Communicate regularly with the DCW and the provider agency about the DCWs performance.</td>
<td>• Support you to use conflict resolutions strategies in the event the member is unsatisfied with the DCWs performance.</td>
</tr>
</tbody>
</table>

**Decisions you need to make:**
*Did I tell the DCW the way I wanted the tasks to be done? Did I give the DCW enough time and chances to learn how I want it done? Is s/he doing it the way I want it done?*

*Decisions you need to make:*
*Have I told the DCW if s/he is doing a good job? Have I told them if they need to improve? Have I told the agency how the DCW is doing or not doing a good job?*

**COMMENTS**

We can use this space to write down specific things we have agreed to do while filling out the agreement together.

For example, we can use this space to write down:

- How often we agree to check in with one another
- How and when you should let us know you have changed the DCW’s schedule
- When we want to review the agreement
EXHIBIT 1300-3

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
AGENCY WITH CHOICE
INDIVIDUAL REPRESENTATIVE FORM
EXHIBIT 1300-3
ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
AGENCY WITH CHOICE: INDIVIDUAL REPRESENTATIVE FORM

By signing below, I understand that:

- An Individual Representative means a parent, family member, guardian, advocate, or other person appointed by the member to serve as a representative in connection with the provision of services and supports
- A legal guardian automatically assumes the role of an Individual Representative
- An Individual Representative (including the legal guardian) is prohibited from serving as a paid caregiver for the member choosing the Agency with Choice, member-directed service option
- The Individual Representative is appointed to perform the following responsibilities related to the Agency with Choice, member-directed service option on behalf of the member:
  ✓ Elect the Agency with Choice, member-directed option
  ✓ Enter into a co-employment agreement with the Agency with Choice provider agency
  ✓ Direct the provision of care, as outlined in the co-employment agreement
  ✓ Participate in the service planning process including signing the Service Plan
- The member is involved, to the maximum extent possible, in the appointment of the Individual Representative, including changes in that appointment, as needed
- The Individual Representative will act in the best interests of the member and is able to perform the designated responsibilities

Please be aware that the term “Individual Representative” does not have the same meaning as the term “Authorized Representative.” An Authorized Representative helps ALTCS members with eligibility related processes and decisions, not service planning.

AGENCY WITH CHOICE INDIVIDUAL REPRESENTATIVE:
Any previous appointment of an Individual Representative is revoked upon the effective date of this appointment.

PRINTED NAME: ___________________________________ RELATIONSHIP TO MEMBER: __________________________

ADDRESS: ______________________________________

PHONE: ________________________________________

EMAIL ADDRESS: ______________________________________

Member’s Signature ___________________ Date ____________

Individual Representative’s Signature ___________________ Date ____________

Case Manager’s Signature ___________________ Date ____________

Initial Effective Date: 03/01/2013
EXHIBIT 1300-4

SELF-DIRECTED ATTENDANT CARE
SERVICE CODES AND APPLICABLE UNITS OF SERVICE
### EXHIBIT 1300-4
**SELF-DIRECTED ATTENDANT CARE**
**SERVICE CODES AND APPLICABLE UNITS OF SERVICE**

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>UNIT</th>
<th>CODE / MODIFIER</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ATTENDANT CARE SERVICES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendant care provided through the SDAC service</td>
<td>15 minutes</td>
<td>S5125 / U2</td>
<td>Code and modifier are utilized for all services provided in the SDAC option.</td>
</tr>
<tr>
<td>Skilled attendant care provided through the SDAC service</td>
<td>15 minutes</td>
<td>S5125 / U6</td>
<td>Code and modifier are utilized for all services provided in the SDAC option when the service includes skilled care.</td>
</tr>
<tr>
<td>Attendant care provided through the SDAC service</td>
<td>15 minutes</td>
<td>S5125 / U2, U4 * S5125 / U6, U4* (Skilled)</td>
<td>Code and modifier are utilized for ACW providing attendant care when the ACW is a family member who is not residing in member’s home.</td>
</tr>
<tr>
<td>Attendant care provided through the SDAC service</td>
<td>15 minutes</td>
<td>S5125 / U2, U5 * S5125 / U6, U5* (Skilled)</td>
<td>Code and modifier are utilized for ACW providing attendant care when the ACW is a family member who is residing in member’s home.</td>
</tr>
<tr>
<td><strong>TRAINING</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training provided through the SDAC service to the Member</td>
<td>15 minutes</td>
<td>S5108</td>
<td>Code is utilized for training to the member as needed about SDAC.</td>
</tr>
<tr>
<td>Training provided through the SDAC service to the DCW</td>
<td>15 minutes</td>
<td>S5115</td>
<td>Code is utilized for training to ACW who is not related to the member.</td>
</tr>
<tr>
<td>Training provided through the SDAC service to the DCW</td>
<td>15 minutes</td>
<td>S5110</td>
<td>Code is utilized for training to ACW who is related to the member.</td>
</tr>
<tr>
<td><strong>FEA SERVICES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Initiation of FEA – Service per member</td>
<td>Per event</td>
<td>T2040/ UA</td>
<td>Code and modifier are utilized for a one-time fee to initiate a case for a consumer that elects SDAC option. Initial service includes first month service.</td>
</tr>
<tr>
<td>FEA – Service ongoing</td>
<td>Per event</td>
<td>T2040/ UB</td>
<td>Code and modifier are utilized to designate monthly billing thereafter</td>
</tr>
<tr>
<td>Initiation of FEA Service per DCW including a background check</td>
<td>Per event</td>
<td>T1023 / UC</td>
<td>Code and modifier are utilized to designate a one-time fee to open a caregiver case, includes a background check.</td>
</tr>
<tr>
<td>Initiation of FEA Service per DCW without a background check</td>
<td>Per event</td>
<td>T1023</td>
<td>A one-time fee to open a caregiver case without a background check</td>
</tr>
</tbody>
</table>

**NOTE:** SDAC services may not be provided by a spouse of member or parent of member who is their minor child.

* When ACW is a family member, second modifier must be utilized. If ACW is not a family member one modifier is sufficient.

Revision Date: 03/01/2013, 02/01/2011  Effective Date: 04/01/2008
Effect: 03/01/2013

**Individual Representative (IR)** – For AWC only, Individual Representative is defined in regulation (R9-28-509), as a “parent, family member, guardian, advocate, or other person authorized by the individual to serve as a representative in connection with the provision of services and supports. If a member is unable to fulfill the co-employment roles and responsibilities on their own, an Individual Representative may be appointed to assist them in directing their care. The role of an Individual Representative 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. R9-28-509 and Section 1915 (k) of the Social Security Act, prohibit an Individual Representative from serving as a member’s paid Direct Care Worker. For the purposes of this chapter, the term “member” means the member or the member’s Individual Representative.

**Direct Care Worker (DCW)** – A person who assists an elderly person or an individual with a disability with activities necessary to allow them to reside in their home. These individuals may also be known as Direct Support Professionals.
CHAPTER 1300
MEMBER DIRECTED OPTIONS

POLICY 1311
SCOPE OF SERVICES FOR AGENCY WITH CHOICE

1311 SCOPE OF SERVICES FOR AGENCY WITH CHOICE

EFFECTIVE DATE: 03/01/2013

Description

ALTCS members can direct care for the one or more of the following services under the Agency with Choice option.

1. Attendant Care
2. Personal Care
3. Homemaker
4. Habilitation (in-home/day)

If a member is unable to fulfill the co-employment roles and responsibilities for the above listed services on their own, an Individual Representative may be appointed to assist them in directing their care. If a member has a legal guardian, that guardian automatically serves in the capacity of an Individual Representative. The role of an Individual Representative 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. R9-28-509 and Section 1915 (k) of the Social Security Act prohibit an Individual Representative from serving as a member’s paid Direct Care Worker. For the purposes of this chapter, the term “member” means the member or the member’s Individual Representative.

Amount, Duration and Scope

Refer to policies 1240-A and 1240-E of this manual for more detailed information about the services ALTCS members can direct under the Agency with Choice option. The number and frequency of authorized services are determined through an assessment of the member’s needs by the case manager with the member and/or the member’s family, guardian, or representative, in tandem with the completion of the cost-effectiveness study. Refer to Exhibit 1300-1 for information regarding service codes and modifiers. The exhibit outlines services, when provided to a member utilizing the AWC member-directed option, must be authorized with a service code modifier. The modifier allows AHCCCS to track utilization of the AWC member-directed option and claim appropriate Federal reimbursement. Members are not precluded from receiving other medically necessary services.
Within Agency with Choice three individuals/entities are critical to the effective implementation of the member’s individualized service plan. These include the member, the provider agency and the case manager. Each of these individuals has roles and responsibilities which must be met in order for the plan to be successful.

**Member Roles and Responsibilities**

Under AWC, members have the right to make decisions including who will provide their services, when they will be provided and how they will be provided. The member and the provider agency share employment roles and responsibilities of the DCW (co-employment). Members can opt in and out of the Agency with Choice, member-directed option at any time by notifying the provider agency and their case manager.

**A. Member Responsibilities as Co-Employer:**

1. As the co-employer of the DCW, the member must, at a minimum, carry out the following two responsibilities:

   a. Recruiting and Selecting the DCW(s)

      i. Identify qualifications, skills and characteristics of a DCW (over and above the minimum AHCCCS and provider agency qualifications) that are necessary to meet their needs

      ii. Select the DCW from a pool of DCWs already employed by the provider agency or recruit the DCW from the community to become an employee of the provider agency

   b. Dismissing the DCW(s)

      i. Identify whether or not they are satisfied with the care provided by the DCW

      ii. Make the decision to dismiss the worker from providing their care only. The member does not “fire” the DCW as an employee of the provider agency.

2. As the co-employer of the DCW(s), the member may choose to carry out some or all of the following additional responsibilities,

   a. Training the DCW(s)
b. Identify training needs (over and above the minimum required training by AHCCCS or the provider agency) that are necessary to meet their unique needs

c. Managing the DCW(s)
   i. Orient the DCW to the manner in which they want the services provided
   ii. Determine the schedule for the DCW, including the days/times when the specific tasks will be done
   iii. Review and sign DCW timesheets

d. Supervising the DCW(s)
   i. Provide oversight and instruction to the DCW to ensure they are receiving quality care
   ii. Communicate regularly with the provider agency about the DCW’s performance
   iii. Provide feedback to the DCW regarding their performance

e. Communicating with the provider agency regarding gaps in services
   i. Notify the provider agency with there is a potential gap in services
   ii. Notify the provider agency when a service scheduling change has occurred, in order to prevent the scheduling change from being in appropriately recorded as a gap in services

B. PROVIDER AGENCY ROLES AND RESPONSIBILITIES

1. As the legal employer of the DCW, the provider agency must carry out the following responsibilities including,

   a. Reviewing and completing the co-employment agreement (exhibit 1300-2) with the member, including supporting the member to identify their respective co-employment 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
      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. Provide standardized training to the DCW, including training required by AHCCCS, Contractors and/or the provider agency referenced in Section 1240-A of this Manual

d. Managing the DCW(s)
   i. Complete and file all required payroll documentation
      (a) Payroll taxes, including withholding, deposit, and filing of required documentation.
      (b) Federal and State required year-end employer filing requirements.
   ii. Oversee and process DCW timesheets and billing for services

e. Supervising the DCW(s)
   i. Conduct regular supervision visitations for all direct care services outlined in Chapter 1240A of this Manual
   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 member may experiences a gap in services

C. CASE MANAGER ROLES AND RESPONSIBILITIES

1. In addition to the Case Manager Standards found in Chapter 1600, the 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 the option understand required and optional roles and responsibilities.

b. Supporting the member to assess whether or not they desire or need an Individual Representative to assist them in directing their care. The Individual Representative form (exhibit 1300-3) will be used to document the name and relationship of the Individual Representative to the member and their respective roles and responsibilities.

c. Supporting the member to recruit and select the DCW(s)
   i. Present options to the member for recruiting and selecting the DCW
      (a) Select the DCW from a pool of DCWs already employed by the provider agency
(b) Recruit the DCW from the community to become an employee of the provider agency

ii. Assist the member in identifying qualifications, skills and characteristics of a DCW that are necessary to meet their needs

iii. Assist the member in identifying how many DCW(s) they might need to provide their care

iv. Assist the member in identifying and initiating contact with a provider agency

d. Supporting the member to dismiss DCW(s)

i. Assist 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

ii. Assist 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 get training regarding their role as a co-employer

i. Assist the member in identifying whether or not they need training to fulfill their roles and responsibilities as co-employer

ii. Find a provider to conduct the training and authorize the service

f. Supporting the member to train DCW(s)

i. Assist the member in identifying whether or not additional training is required for the DCW in order to meet member specific needs

ii. Ensure the requested training is within the service scope specifications for DCW training outlined in Section 1330 of this chapter

iii. Find a provider to conduct the training and authorize the service

g. Supporting the member to manage DCW(s)

i. Ensure care provided is within the scope of services and the service hours authorized and outlined in the individual service assessment

ii. Ensure 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. Encourage 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

   ii. Follow up with members to inquire about their progress in implementing the option as a co-employer

i. Supporting the member in understanding how to develop and implement a back-up plan to prevent gaps in services.
CHAPTER 1300
MEMBER DIRECTED OPTIONS

POLICY 1313
TRAINING UNDER AGENCY WITH CHOICE

1313 TRAINING UNDER AGENCY WITH CHOICE

EFFECTIVE DATE: 03/01/2013

A. MEMBER ASSESSMENT AND TRAINING

Description

The case manager will assist the member to assess his/her own training needs as they relate to directing his/her own care. These training needs will be determined by using the “What are my Training Needs” Form (available in the Agency with Choice Member Manual). There is no mandatory member training for AWC participation. Training is available to assist the member, if needed, to succeed in directing his/her 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.

Amount, Duration and Scope

Member training on the following topics will be available for members who select the Agency with Choice member-directed option if they feel that it is necessary to support them to fulfill their roles and responsibilities as co-employer.

1. Recruiting and Selecting the DCW(s)
2. Dismissing the DCW(s)
3. Training the DCW(s)
4. Managing the DCW(s)
5. Supervising the DCW(s)

A unit of training equals 15 minutes. Refer to Exhibit 1300-1 for information regarding service codes.

B. DIRECT CARE WORKER TRAINING

Description

All DCWs must meet standard training requirements of AHCCCS (outlined in Chapter 1240-A of this Manual), Contractors and the provider agency, even those employed under the AWC option. In addition to the 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 will be provided by an AHCCCS registered provider and arranged by the Contractor. Training requires prior authorization from the case manager.

**Amount, Duration and Scope**

Additional DCW training requested by the member must meet the following conditions:

1. The training must be outside the scope of training required by the following entities
   
   a. AHCCCS as outlined in Chapter 1240-A of this Manual
   
   b. Contractors
   
   c. Provider agencies

2. The training must be individualized for the member and not a standardized training already available

3. An AHCCCS-registered provider must provide the training. The member may not provide the training

4. The training must 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

6. The training cannot exceed a total of 16 units (four hours) of training for each DCW per the member benefit year

7. A unit of training equals 15 minutes. Refer to Exhibit 1300-1 for information regarding service codes.
Effective Date: 03/01/2013

Attendant Care Worker (ACW) - A person who assists an elderly person or an individual with disability with homemaking, personal care, and general supervision activities necessary to allow them to reside in their home. An ACW may also provide limited skilled services under specific circumstances.

Competent Member – A competent member, per regulation (R9-28-508), means a person who is oriented, exhibits evidence of logical thought, and can provide directions. For the purposes of this chapter, the term “competent member” means the member or the member’s legal guardian.

Fiscal and Employer Agent (FEA) – The entity(ies) providing fiscal management services to members selecting the Self-Directed Attendant Care member-directed option. FEA is discussed further in Section 1323 of this Chapter.

Medically Stable – Medically stable, per regulation (R9-28-508), means the member’s skilled-care medical needs are routine and not subject to frequent change because of health issues.
1321 SCOPE OF ATTENDANT CARE SERVICES UNDER SELF-DIRECTED ATTENDANT CARE

REVISION DATE: 03/01/13, 04/01/11, 02/01/11

EFFECTIVE DATE: 04/01/2008

Description

AHCCCS covers SDAC services provided to ALTCS EPD members who elect SDAC. The ACW provides assistance with a combination of tasks, which may include homemaking, personal care, and general supervision. As described in this chapter, the ACW may also provide limited skilled services under specific circumstances. The SDAC option enables members who might otherwise be in a nursing facility or HCB alternative residential setting to remain in, or return to, their own home when it is cost effective to do so. The intent of SDAC is to provide members the opportunity to maintain control over their care as well as to provide support which will allow the members to remain integrated within their families, communities and other support systems. Attendant Care Workers (ACW) are not required to be licensed or certified by a State regulatory board or agency.

A member’s legal guardian may make the decision to elect SDAC for the member and assist them in directing the care on behalf of the member. If the member has a legal guardian, the legal guardian must be present, with the member, when SDAC services are provided. The legal guardian may not, however, be the DCW when the SDAC option has been selected.

Amount, Duration and Scope

Attendant care services are available only to ALTCS members who reside in their own home. However, attendant care services are not limited to the boundaries of the member’s home. As indicated in the individualized service plan, the ACW may accompany the member as necessary in order to meet his/her needs in a variety of settings, including, but not limited to, a physician’s office, school setting and workplace. Other HCB services may be provided in conjunction with SDAC. However, within a given day, attendant care services may not be provided in conjunction with personal care, home delivered meals, adult day health or homemaker services without special justification by the case manager and approval by the ALTCS Contractor or AHCCCS Administration for Fee-For-Service (FFS) members.
A. Non-Skilled Tasks Which May Be Provided By ACW

The ACW provides services in accordance with the member’s individualized service plan and as authorized by the case manager. The services which may be provided include, but are not limited to:

1. Homemaker tasks including cleaning, laundry, food preparation and essential errands such as grocery shopping, securing medical supplies and household items

2. Personal care tasks including bathing, skin care, oral hygiene, toileting, ambulation, grooming, dressing, use of assistive devices, feeding and caring for other physical needs

3. General supervision which includes:
   a. Monitoring and companionship for a member who cannot be safely left alone.
   b. Assisting with self-administration of medications, for example, opening the container.
   c. Monitoring the member’s medical condition and ability to perform the activities of daily living including, but not limited to, reporting any changes in condition to the member’s physician and case manager.

4. Coordination with the member and/or the member’s family, guardian or representative to assure activities and necessary services are provided to meet the objectives of the member’s individualized service plan.

5. Assistance with recreational/socialization skill development, training in activities of daily living.

B. Limited Skilled Services May Be Provided by ACW

In addition to the non-skilled services and tasks described in section C, the ACW may also provide limited skilled services when the services are included in the member’s individualized service plan and as authorized by the case manager. Under R9-28-508, the skilled services are limited to only the following:

1. Bowel care, including suppositories, enemas, manual evacuation and digital stimulation
2. Bladder catheterizations (non-indwelling) that do not require a sterile procedure
3. Wound care (non-sterile)
4. Glucose monitoring
5. Glucagon as directed by the health care provider
6. Insulin by subcutaneous injection only if the member is not able to self-inject
7. Permanent gastrostomy tube feeding and
8. Additional services requested in writing with the approval of the Director and the Arizona State board of Nursing.

The following requirements must be met in order to receive skilled services:

1. The member must be medically stable and
2. A registered nurse licensed under A.R.S. Title 32, Chapter 15, must visit the member and ACW before a skilled service is performed to:
   a. Assess, educate and train the member and ACW regarding the specific skilled service the member requires and
   b. Determine in writing that the ACW understands how and demonstrates the skill to perform the processes or procedures required to provide the specific skilled service.

A unit of ACW service within the SDAC option is 15 minutes. Refer to Exhibit 1300-4 for information regarding service codes.
1322 ROLES AND RESPONSIBILITIES UNDER SELF-DIRECTED ATTENDANT CARE

REVISION DATE: 03/01/13, 02/01/2011

EFFECTIVE DATE: 04/01/08

Within SDAC there are three individuals who are critical to the effective implementation of the member’s individualized service plan. These include the member, case manager, and the Attendant Care Worker (ACW). Each of these individuals has tasks and responsibilities which must be met in order for the plan to be successful.

A. MEMBER ROLES AND RESPONSIBILITIES

Members have the right to make decisions about how to best have their needs met, including who will provide their services and when they will be provided. SDAC allows members to make decisions about the services the ACW will provide and how to receive them.

Within the SDAC service the member has two roles, that of employer and that of self-advocate.

1. Member Responsibilities as Employer:

As the employer of the ACW, the member has responsibilities including, but not limited to:

a. Recruiting, interviewing, and hiring the ACW(s)

b. Training the ACW(s) in the manner in which duties will be performed and/or requesting assistance and authorization if additional assistance is required

c. Directing the care received from the ACW(s)

d. Preparing a description of duties for ACW(s)

e. Scheduling the ACW(s)

f. Monitoring the ACW(s) hours to ensure that hours do not exceed those authorized by the case manager. If more hours are required, the member must contact the case manager in advance and request reconsideration for additional hours.
g. Supervising ACW(s), including termination of employment if this becomes necessary

h. Ensuring that all required paperwork is accurately completed and sent to the FEA in a timely manner including submission of signed timesheets as requested by the FEA. Failure to accurately represent actual time worked is subject to a Medicaid fraud investigation.

i. Reporting any payroll issues to the FEA included when the ACW resigns and/or is terminated.

2. Member Responsibilities as Self-Advocate:

Within SDAC the member is a self-advocate. The member is expected to direct his/her care and work collaboratively with the case manager to ensure that his/her needs are met. In the role of self-advocate, the member has responsibilities including but not limited to:

a. Participating in the development of the individualized service plan.

b. Developing a contingency (back-up) plan with assistance from his/her case manager. For more details regarding contingency plans, refer to Chapter 1600, Policy 1620.

c. Acting on the contingency plan and reporting any gaps in ACW services to the case manager

d. Monitoring the quality of care provided, including fraud abuse and/or neglect by the ACW, and reporting any problems or concerns to the case manager. Any unresolved dissatisfaction with the ACW should be reported to the case manager. The case manager will assist the member to determine if issues can be resolved or if the preferable alternative is a change in ACW.

e. Consulting with the case manager when assistance is required due to dissatisfaction/issues related to SDAC and/or the ACW.

f. Notifying the case manager if services must be changed or if there is a need for additional hours.

g. Notifying the case manager and physician of any change in health condition.
h. Notifying the case manager of admission or discharge to a hospital or other care facility. If member is unable to notify the case manager, it is required that the ACW or another responsible individual should report for the member.

Refer to Chapter 900, Policy 930 for a review of member rights

B. CASE MANAGER ROLES AND RESPONSIBILITIES

1. In addition to the Case Manager Standards found in Chapter 1600, the case manager is responsible for:

a. Informing and educating members and/or legal guardians about the SDAC option including verifying that members electing SDAC understand their roles and responsibilities. Evidence of such discussion must be included in case notes.

b. Referring interested members and/or legal guardians to available resources for further information about and/or facilitating member participation in the Self-Directed Attendant Care (SDAC) service option.

c. Facilitating initiation of documentation as required by the FEA.

d. Advising the member as needed regarding the hiring and training of the ACW. This includes the need for specialized assessment, education and training by a registered nurse when skilled care is involved.

e. Assisting the member to assess his/her training needs and authorizing training based on that assessment as appropriate.

f. Documenting in the case notes and recording on the Non-Provision of Services and Gap logs any service gaps that are reported by the member and completing and submitting service gap reports as required by AHCCCS.

g. Assisting the member as needed in finding a replacement worker (generally from an agency) to provide services when the member reports that the ACW is unavailable and the member requests assistance. Services need to be provided within the timelines specified by the member’s Member Service Preference Level. See Chapter 1600 for detailed information about these Preference Levels and the timelines associated with each.
h. Facilitating any needed transition from the SDAC option to traditional service delivery system or transition back to SDAC when requested and appropriate.

i. Providing the member with a written notice of action that explains the member’s right to file an appeal if the member disagrees with the authorization of SDAC services (including the amount/frequency of a service Refer to Arizona Administrative Code, Title 9, Chapter 34 (9 A.A.C. 34) for additional information).

C. ATTENDANT CARE WORKER ROLES AND RESPONSIBILITIES

The Attendant Care Worker (ACW) is an employee of the member who will provide the attendant care services (outlined in Policy 1310) that the member needs to be able to maintain independence in his/her own home. The ACW is to carry out the duties, as assigned, in the manner directed by the member, as appropriate, and as authorized by the case manager.

The ACW must meet certain pre-employment requirements and has certain rights and responsibilities.

1. ACW Pre-Employment Requirements:

Pre-employment requirements include, but are not limited to, the following:

a. Demonstrate proof of citizenship or legal residency.

b. Present two documents that establish identity. At least one of the documents must include a photograph.

c. Provide all required employment documentation as required by, State, or Federal requirements.

d. If the worker will be driving the member, he/she must provide proof of current Arizona driver’s license and insurance.

e. If requested by the member, submit to criminal background checks and references.

f. Demonstrate proof of certification in CPR and First Aid. Please note, CPR and First Aid are required prior to employment and are not reimbursable services.
i. Training in First Aid and CPR must be provided or sponsored by a nationally recognized organization (e.g., American Heart Association, American Red Cross, etc.), using an established training curriculum.

ii. Training sessions must be held in person, so that the participant may demonstrate learned skills such as mouth to mouth resuscitation and chest compressions. Web-based training without the benefit of on-site return demonstration of skills is not acceptable.

g. The FEA is responsible for maintaining evidence of a. through f.

2. ACW Responsibilities:

Responsibilities of the ACW include but are not limited to the following:

a. Treating the member with dignity and respect. This includes respecting personal beliefs, culture, religion, and privacy as well as respect for the member’s personal property.

b. Keeping personal information about the member and/or his/her family confidential.

c. Communicating effectively with the member. If the member has a preferred communication method or device, this should be respected and utilized.

d. Providing safe care as instructed by the member. Universal precautions must always be utilized.

e. Completing mandatory and other training that the member identifies as necessary to meet his/her unique needs.

f. Documenting completed tasks as outlined in the service plan within the requested timeframes, and as instructed by the member.

g. Immediately reporting an emergency situation by calling 911. Report urgent situations to the proper authority as indicated.

h. Reporting any suspected abuse, neglect, or exploitation of a SDAC member to the case manager and proper authorities.
COMMunicating with the member’s case manager (when the member is unable) regarding any change in the member’s condition as well as an admission to a health facility as appropriate.

j. Completing payroll records accurately and within timelines as instructed by the member and required by the FEA. Failure to accurately represent actual time worked is subject to a Medicaid fraud investigation.

k. Providing adequate notice of planned absence or as soon as it is known that the ACW is unable to complete the scheduled assignment. This includes notifying the member in advance if the ACW must be absent for a portion of a scheduled assignment or will be arriving late to a scheduled assignment.

l. Providing a two-week notice to the member if she or he will be voluntarily terminating employment.

m. Informing the FEA and member of any changes to their demographics (e.g. address, telephone number)

3. Rights of the ACW:

The ACW has certain rights as an employee of the member. These include, but are not limited to, the following:

a. To be treated with dignity and respect by the member and his/her family and friends. This includes respect for personal beliefs, culture, religion, and privacy.

b. To have time worked recorded and paid properly.

c. To refuse to perform tasks that might be adverse to the member’s health.

d. To refuse to perform a task that the ACW believes poses a danger to his/her own health.

e. To refuse to perform tasks that the ACW believes that he/she have not been adequately trained to perform and which are not included/specifed in the service plan.
A. MEMBER ASSESSMENT AND TRAINING

Description

The case manager will assist the member to assess his/her own training needs as they relate to directing his/her own care. These training needs will be determined by using the “What are my Training Needs” Form (available in the SDAC Member Manual). There is no mandatory member training for SDAC participation. Training is available to assist the member to succeed in directing his/her own care. Training requires prior authorization from the case manager.

Amount, Duration and Scope

Member training for SDAC includes the following components:

1. SDAC Member Manual:

   Each member who selects SDAC will receive a comprehensive manual containing information about this service option. The manual describes tools that are available to assist the member in determining his/her needs, develop an employment contract, and train, supervise and evaluate the ACWs that he/she hires. The SDAC Manual has been standardized and approved by AHCCCS for all Contractors. With AHCCCS approval, Contractors may make minor additions to customize the Manual for their own programs.

2. Training of the Member:

   Member training may be provided by appropriately registered AHCCCS providers. Member training in the following topics will be available for all members who select SDAC

   a. Hiring and Managing and terminating Attendant Care Workers

   b. Evaluating Monthly Reports from the FEA

   c. Understanding Services Available in Your Community

   d. Requesting Help When You Need It
e. Safety and Health

A unit of training equals 15 minutes. Refer to Exhibit 1300-1 for information regarding service codes.

B. ATTENDANT CARE WORKER ASSESSMENT AND TRAINING

Description

Under the SDAC option, the ACW must meet certain training requirements. Mandatory training includes training in Universal Precautions and Health Insurance Portability and Accountability Act (HIPAA) privacy regulations. Other training is optional and covered by AHCCCS in accordance with the guidelines specified in this Policy.

In addition to the mandatory training, there are extensive training materials included in the SDAC Member Manual. The member may use this material to train his or her worker or may request training be done by an outside agency arranged by the Contractor to provide this training. Training requires prior authorization from the case manager.

Amount, Duration and Scope

All Attendant Care Workers hired by members under the SDAC option must receive the mandatory training. Other training is covered when the training is required to meet the needs of the member and the training is authorized by the case manager.

1. Required Training:

   a. Universal Precautions - Universal Precaution training may be provided by the member or a provider agency. If provided by a registered provider, it is a reimbursable service but must be authorized by the case manager. Regardless of who provides the training, the ACW must maintain proof that this training was completed.

   b. HIPAA Training - HIPAA Training may be provided by the member or a provider agency. If provided by a registered provider, it is a reimbursable service but must be authorized by the case manager. Regardless of who provides the training, the ACW must maintain proof that this training was completed.

   c. Skilled services training specific to member’s need as appropriate and provided by a registered nurse (refer to 1324 D).
2. Optional Training:

Listed below are examples of topics included in the SDAC Member Manual that may be used as training for the ACW. The member may provide and review materials with the ACW or ask the case manager to authorize training for the ACW.

a. Bathing

b. Dressing

c. Transfer

d. Home and Fire Safety

e. Disease specific topics such as Arthritis, Chronic Heart Failure or Depression

f. Medication Side Effects

g. Nutrition/Obesity

h. Caregiver Burnout
CHAPTER 1300
MEMBER DIRECTED OPTIONS

POLICY 1324
FISCAL AND EMPLOYER AGENT SERVICES UNDER SELF DIRECTED CARE

1324 FISCAL AND EMPLOYER AGENT SERVICES UNDER SELF DIRECTED CARE

EFFECTIVE DATE: 03/01/13, 04/01/08

REVIEW DATE: 04/01/2011

Description

AHCCCS requires the services of a qualified Fiscal and Employer Agent (FEA) for those members who choose the SDAC option. The FEA provides fiscal management services, as described in this section, for members selecting the SDAC option.

Amount, Duration, and Scope

Fiscal and Employer Agents must be registered AHCCCS Providers. In order to register with AHCCCS, FEAs must meet all applicable Federal and State requirements. All FEA services must be authorized by the case manager.

A. INITIATION OF FEA SERVICES FOR MEMBER

Within the SDAC option the member is the employer of the ACW. The member must meet certain Federal and State requirements to be an employer. The role of the FEA is to assist the member to complete all required documentation, review the documentation, and file the paperwork with the proper Federal and State authorities.

To initiate services for a member, the FEA must complete at least the following tasks:

1. Obtain Federal Employer ID Number (FEIN) for the member
2. Review and file required documentation
3. Maintain copies of all required documentation

Unit of service is event based one per member, per initiation of SDAC service.

B. INITIATION OF FEA SERVICES FOR ACW

Within the SDAC option the ACW is the employee of the member. The role of the FEA is to assist the potential ACW to become an employee. After the member has identified the individual(s) who will be employed as his/her ACW, the member must
notify the FEA. The FEA must contact the identified individual(s) to facilitate the process allowing the ACW to become an employee.

To initiate services for the ACW, the FEA must complete at least the following tasks:

1. Prepare and distribute employee ACW hiring packets.
2. Obtain and verify all documents required by AHCCCS, State, and Federal authorities necessary to allow the SDAC member to employ the ACW.
3. Maintain copies of all required documentation

Unit of service is event based, one per ACW.

C. ON-GOING MONTHLY SERVICES

The FEA functions as the payroll department for the SDAC member. As such, the FEA provides monthly services related to payroll. Additionally, the FEA must complete and file all required payroll documentation.

Minimally the following tasks must be completed by the FEA:

1. Perform all employer payroll duties, including:
   a. Distribution of payroll (should be done no less than twice a month)
   b. Completion of required tasks related to payroll taxes including withholding, deposit, and filing of required documentation.
   c. Comply with all Federal and State required year-end employer filing requirements.
2. Contact case managers and/or members about over- and under-utilization of services problems identified with time sheets, or other payroll related issues.
3. Provide toll-free customer service assistance to employers and employees related to all FEA activities.
4. Provide monthly and ad-hoc utilization reports as requested by the member, case manager, Contractor, or AHCCCS related to utilization of hours and cost.

Unit of service is event based, one per month, per member.
D. BACKGROUND CHECKS

It is recommended, but not required, that background checks be completed on all ACWs hired within the SDAC option. If a member requests that a background check be completed, the FEA will complete this service. The FEA will provide the background check results to the member and ALTCS Program Contractor so that a determination to hire can be considered by the member.

All background checks must be authorized by the case manager.

Unit of service is event based one per ACW.

E. OTHER REQUIREMENTS OF FEA

The FEA has the responsibility to procure workers compensation insurance for the member’s caregiver(s).

FEAs are an AHCCCS provider and an integral component of the care delivery system for members selecting the SDAC option. As an AHCCCS provider, FEAs are subject to all applicable AHCCCS regulations and policies.

Certain information requests may be made by AHCCCS or AHCCCS Contractors. The FEA must provide requested information within the required timelines. FEAs will not receive additional reimbursement for providing requested information.