

WAIVER FAMILY CHECKLIST

BACKGROUND

By federal mandate, all waiver recipients are given the choice of who will provide their services. You will be offered the opportunity to select a provider of case management services and a provider of waiver services. The choices you make may affect your overall satisfaction with waiver services.

This checklist is provided to assist families in selecting a case management provider and a provider of waiver services. All providers of case management and waiver services meet the stringent requirements placed on them by the Division of Developmental Services, Arkansas Medicaid and the federal Center for Medicare and Medicaid Services (CMS). All our providers are qualified and do provide quality services. However, not all waiver providers provide the services in the same way nor do they all provide all available waiver services. Additionally, providers are permitted to specify which counties within the state they will serve. Your choices will be limited to the providers who serve the county in which you live.

The best selection of a provider for your family is the one who provides the services in a way that most closely meets your families' unique needs. The first thing you need to do, then, is to take a careful inventory of what those needs are.

CASE MANAGEMENT PROVIDER

You must first select a provider of case management services. Your case manager is the individual who works with you to identify your needs and the supports necessary to meet those needs. The case manager will then, with your full involvement, develop a plan of care to meet those needs. Some needs will be met with already available community and generic Medicaid supports; others will be written into your waiver plan of care. And, frankly, there may be some needs that cannot be met.

The case manager is the quality assurance link in the waiver program and is the responsible individual for ensuring the overall success of the plan. When things aren't working as they should, your case manager is the individual you contact. The case management provider can also help, if chosen, with ancillary services such as consultation, adaptive equipment, medical supplies, etc.

Not all community providers provide case management services.

You may choose a case manager from the same agency as your services provider or from a different agency. Some providers use the same individual as the case manager and the agency's representative for service delivery. This is a delicate choice and you should give this some thought.

Your case manager is required to see the waiver individual face-to-face in the home where they reside, with the frequency of visits determined by the extent of support needed. Some families find this inconvenient and troublesome, but the activities are regulated by the Division of Developmental Services, Arkansas Medicaid and the federal Center for Medicare and Medicaid Services (CMS).

WAIVER SERVICES PROVIDER

This is the agency that will actually provide the waiver services including hiring, training, paying, discharging when necessary, and generally supervising your waiver worker. The waiver provider will be responsible for all service related areas, such as supported employment, respite, and transportation. The waiver provider, if chosen, can also assist with ancillary services such as consultation, adaptive equipment, medical supplies, etc.

Different providers make different fringe benefit packages available for their employees. This is a double edged sword. Higher fringe costs *may* restrict the number of hours a family can receive because of the daily cap on total costs. On the other hand, a good benefits package *may* help attract and keep a good staff.

Various providers have different internal procedures as to how some situations are handled. Some will hire family members to provide the service (cannot hire the parents, stepparents, or guardians of a minor nor the spouse of an adult); others will not. Some will allow their staff to do things such as give medications, tube feeding and suctioning; others will not. Some will permit the family to provide transportation services and be reimbursed for mileage; others will not. There are other differences.

Clearly, you need to have thought through what you want and need. You need to know, before you select a provider, whether or not they are willing to work with you on things like transportation, medications, and selection of the waiver worker if that is important to you.

The attached checklist will help you sort through the maze and ask the appropriate questions. If your first choice fails to work out as you hoped, then you have the right to change providers of service for both waiver services and case management. Again, all the providers are excellent. This decision is about which provider comes closest to meeting your individual, unique needs.

Provider Selection Checklist

Case Management Provider

- ___ What is the agency's reputation in the community for providing case management? Ask your friends and others on waiver.
- ___ What is the agency's philosophy on case management? Does their philosophy include representing you, the service provider, or both? Is the case manager responsible for preparing the waiver plan of care only, or will they also work with other entities such as the school district, Rehabilitation Services, and Medicaid to make sure all needs are met? Will the agency allow you to interview the case manager before he/she is assigned to your case? If problems arise, is the agency willing to assign a different case manager?
- ___ If you use, or plan to use, a Developmental Disability Treatment Clinic, will the agency permit you to have a case manager from a different agency than where you receive DDTC services?
- ___ Is your case manager going to be readily available? Will you have the individual's phone number and email address?
- ___ What is the agencies' appeal process? How will they handle complaints, both internal and external. How will they handle complaints about how services are being provided?

Waiver Services Provider

- ___ What is the agency's reputation in the community for providing waiver services? Ask your friends and others on waiver.
- ___ Does the agency provide all waiver services? If not, how will they handle a request for a service they are not licensed to provide? In this scenario, who has the overall, final responsibility for delivery of the service, the agency or the contractor? Does the agency provide case management services, or only waiver services?
- ___ What fringe benefits does the provider make available to full time employees? Part time employees?
- ___ Will the agency permit hiring eligible family members? Eligible extended family members?

- ___ Will you be able to interview new staff before they are hired? If you think the interviewee is unacceptable, will the agency find somebody else? Note: Agencies can not discriminate based upon race, sex, age, ethnic background, national origin, or religious preferences, but they can allow you to participate in the interview and selection process. You should determine how much involvement you want.

- ___ Will the agency permit their staff to give routine medications? Suctioning? Tube feeding? Other needs you may have? If the answer is “no” to one of the things you need, ask how they handle that situation without jeopardizing the health and safety of your loved one? Is there an acceptable work around option?

- ___ Will the agency permit the family to provide transportation services to and from waiver activities and reimburse for mileage? If not, how will the client get to and from waiver activities outside the home? What is the family required to do to seek reimbursement, training, forms, etc.?

- ___ How will the provider get the client to things like physician and dental appointments (this transportation is not covered by waiver)?

- ___ If you use, or intend to use DDTC services, will the DDTC provider and/or your provider permit your waiver worker being from a different agency? Who will provide transportation to and from the DDTC workshop? What will happen if the DDTC is closed, or if the individual is ill? Will your waiver worker cover these days?

Note: As a final action before your selection, you can call DDS Quality Assurance Section and ask how many abuse, neglect, or compliance complaints have been filed against a provider. Keep in mind that large providers could well have more complaints but a lower ratio of complaints to clients served.