Purpose: To enable private individuals to purchase home care services from the Commission through the home care registry.

Deadline: Operative by July 1, 2015 with implementation no later than January 1, 2016.

Goals

• Build and strengthen the workforce that provides home care services to medical assistance recipients by offering opportunities to obtain additional work from private payers.

What this means: Homecare workers and personal support workers who are currently on the registry will be able to build upon their skills and have the opportunity to work for private pay individuals.

Attract additional workers to the registry.

<u>What this means:</u> More people will be drawn to the registry because they will have the opportunity for additional work and benefits. Currently, those who are working for private pay individuals do not have the same protections or benefits as homecare workers and personal support workers.

 Provide an opportunity for elderly individuals and individuals with disabilities who are not eligible for medical assistance to obtain high quality and affordable home care services from qualified, committed, experienced, and well-trained providers.

What this means: Private pay individuals and their families will have another in-home service option available. They will have the ability to choose a worker who is experienced and well-trained and a fiscal intermediary will pay the provider on his or her behalf.

• Protect medical assistance recipients' access to and receipt of home care services.

What this means: After implementation, we need to ensure there is a sufficient number of homecare workers and personal support workers to meet the needs of those on Medicaid services. The goal is to attract additional workers, not deplete the number of providers available to serve consumers receiving Medicaid services. The Commission may suspend or reduce the number of referrals of private pay providers in the Homecare Choice Program if the Commission and Department determines that the supply of home care workers in inadequate to meet the needs of medical assistance recipients.

• Ensure the state incurs no liability for the cost of home care services or for any other associated program costs that exceed the amount of revenue generated by payments.

What this means: The payment rate the Commission establishes needs to cover the costs associated with the program (provider wages, benefits, training, staffing, etc.). The program must be self-sustaining and cost neutral. If the Commission determines that modifying the payment rates will not generate sufficient revenue to pay the costs of the program, the Commission can suspend the program following 30 days advance written notice to private payers and private pay providers. If the program is suspended, the Commission shall report to the Legislative Assembly no later than 30 days after the suspension begins.

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
Establish by rule the types and scope of	Compare services offered through	
home care services that may be offered	Medicaid in-home services	
by the Commission.	programs and In-home agencies.	
	• Create a home care services sub-	
	committee consisting of	

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
	stakeholders and partners.	
	Draft rule language & convene a	
	rule advisory committee.	
Provide information about the scope of	Provide information during intake	
services offered.	calls.	
	Partner with Aging and Disability	
	Resource Connection (ADRC).	
	 Incorporate language in the 	
	enrollment agreement and written	
	materials.	
Provide information about long-term	Provide information during intake	
care services & supports that are not	calls.	
available through the program.	Partner with ADRC.	
	Designate Administrative Specialist	
	as AIRS certified staff person.	
	Incorporate language in the	
	enrollment agreement and written	
	materials.	
Provide information about other	Provide information during intake	
community resources that are available	calls about all available services and	
to individuals seeking long-term care	supports.	
services & supports.	• Partner with ADRC.	

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
Adopt standards for home care services offered through the program that, to the greatest extent possible, are compatible with the standards of home care services reimbursed as medical assistance & by in-home agencies.	 Include in written materials (brochures, guides, etc.). Designate Administrative Specialist as AIRS certified staff person. Compare services offered through Medicaid in-home services programs and In-home agencies. Create a home care services subcommittee consisting of stakeholders and partners. Include information during private pay provider orientation & in printed materials. 	
Private payers must complete a standard assessment instrument prescribed by the Commission that evaluates the capacity & willingness of the individual receiving services to effectively manage & direct home care services.	 Create sub-committee to (1) review existing instruments & (2) create an instrument pulling from other national instruments, APD/ODDS assessment/service planning tools, & OPI. Include consumer-employer responsibilities in the enrollment form and written materials (compare 	

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
Private payer & private pay home care worker must enter into a written service plan based on the assessment instrument that is consistent with the private pay home care workers capabilities, training, and experience. The instrument must be completed prior to the commencement of services.	 with APD/ODDS). Identify criteria to determine (1) an individual's ability to self-direct services; (2) when an individual requires a representative and (3) disenrollment based on inability to direct services safely and adequately. Incorporate assessment tool into the registry. Incorporate service planning into registry. Specify requirement in enrollment form. Prevent services from beginning until service planning complete. 	
The Commission shall establish payment rates for home care services and shall publish the rates online showing the projected cost of each	 Hire Fiscal Analyst 3. Conduct market research and focus groups to determine interest and need. 	

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
component included in calculating the rate. The established payment rate is expected to generate total revenue	 Work with Aging and People with Disabilities' fiscal analyst in determining rate. Compare rates against agency rates 	
sufficient to reimburse up to 107% of the costs associated with the program:	and ensure rate does not exceed 107% of the costs associated with running the program.	
• Screening, registering, & training private pay providers		
 Maintaining and expanding the registry 		
Hiring additional staff		
 Providing referrals of private pay providers to private payers 		
 Paying the workers' wages 		
 Paying payroll taxes 		
• Paying health insurance & employee		
benefits, either directly or through a		
trust account		
 Processing payments from private 		
payers & payments to providers		

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
 Paying workers' compensation & unemployment insurance Publicizing the availability of the registry Other activities undertaken to ensure the quality of providers, adequate provision of home care services, and other administrative expenses associated with the program. 		
A private payer must pay in advance for services.	Include in enrollment form.Require a deposit.Utilize fiscal intermediary.	
The Commission shall establish the wage rates, pay the wages, and provide for employee benefits.	 Fiscal Analyst 3 will conduct research and incorporate into payment rate. Utilize fiscal intermediary for the payment of wages. 	
Private pay providers are subject to the same requirements as home care workers providing services reimbursed as medical assistance with respect to:	Compile and compare information regarding requirements outlined in Oregon Administrative Rules governing Medicaid in-home	

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
 Worker classifications Application & enrollment in the registry Suspension or termination of enrollment in the registry The commission may specify requirements & procedures, in addition to those above, for private pay providers. 	 Services programs. Convene worker classification subcommittee to establish requirements. Incorporate into rule and convene a rule advisory committee. 	
The Commission, with the assistance of DHS, may conduct periodic evaluations of private pay providers, or take other measures, to determine whether the private pay providers continues to meet provider enrollment requirements or for other appropriate purposes.	 Develop satisfaction survey. Partner with local offices regarding HCW/PSW enrollment status. Establish complaint process. Possible consumer access to HB 4151 abuse registry. 	
Convene a subcommittee of the Commission to define & establish classifications of home care workers based on the home care worker's level of skill and the scope of services provided by the worker. Subcommittee	 Commission voted to establish subcommittee during 9/4/14 meeting. Identify stakeholders and partners interested in participating in subcommittee. Convene meetings and determine 	

Required in Bill	<u>Draft Plan</u>	Stakeholder Recommendations
will be in place indefinitely.	frequency at the first meeting.	

Senate Bill 1542 Definitions

- "Home care services" means assistance with activities of daily living, activities of community inclusion, and self-management provided by a home care worker for an elderly person or a person with a disability.
- "Activities of daily living" includes, but is not limited to: Bathing and personal hygiene; dressing and grooming; eating; mobility; bowel and bladder management; and cognition.
- "Activities of community inclusion" includes, but is not limited to, volunteer activities, employment, development of community life skills, and participation in social and recreational community events.
- "Self-management" includes, but is not limited to, medication and oxygen management; transportation; meal preparation; shopping; and consumer-focused general household work.
- "Person with a disability" means a person with a physical disability, developmental disability, or mental illness.