

**FLEXIBLE
CASE MANAGER
TRAINING**



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INTRODUCTION TO FLEXIBLE CASE MANAGER TRAINING

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INTRODUCTION TO FLEXIBLE CASE MANAGEMENT

The purpose of this training is to provide awareness, knowledge and understanding of Consumer Directed Community Supports; and the roles, responsibilities and skills needed to be an effective flexible case manager. The Consumer Directed Community Supports (CDCS) service is available through the Medical Assistance waiver programs.

A. What is a Flexible Case Manager?

Flexible case managers assist recipients with disabilities or recipients who are elderly who use CDCS. They may provide support in a variety of aspects of Community Support Plan development and implementation. Flexible case managers provide supports that are over and above what is required for the county to provide to recipients.

The flexible case manager option may be chosen by the recipient, by a family member, or be recommended by the county. Flexible case management is not a required service to use CDCS, but a county may recommend it when a person's situation requires additional supports in this area. The costs associated with Flexible Case Management are included in a recipient's Community Support Plan and are paid with funds from the recipient's CDCS budget.

The county may recommend a flexible case manager when a recipient chooses CDCS, but the recipient or family needs significant assistance planning for and implementing their plan on an ongoing basis beyond what county staff is able to provide. Flexible case managers do not take the place of county staff.

B. What is the role of a flexible case manager?

A flexible case manager's role is determined by the recipient/family, and is defined in the recipient's Community Support Plan. Some activities the Flexible Case Manager may perform include (but are not limited to):

- Provide information about CDCS and provider options
- Facilitate development of a person-centered community support plan
- Monitor and assist with revisions to the community support plan

- Assist in recruiting, screening, hiring, training, scheduling, monitoring, and paying workers
- Facilitate community access and inclusion (i.e., locating or developing opportunities, providing information and resources, etc.)
- Monitor the provision of services including activities such as interviews or monitoring visits with the consumer or service providers
- Provide staff training that is specific to the consumer's plan of care

C. What do I need to know about being a Flexible Case Manager?

- Flexible Case Management supports are paid for out of the recipient's CDCS budget.
- Flexible Case Managers must not have any direct or indirect financial interest in the delivery of the services in the plan, other than payment for Flexible Case Management services.
- Flexible Case Managers cannot be the Employer of Record, although they can assist with employee-related functions
- Flexible Case Managers will coordinate efforts with the county to ensure that there is no duplication of services.
- When developing the recipient's plan, Flexible Case Managers must use the Community Support Plan template or a community support plan format that includes all of the information required to authorize CDCS.

D. How do I become a Flexible Case Manager?

There are established requirements to be a Flexible Case Manager.

Flexible Case Managers must provide the recipient or their representative with evidence that they meet the required qualifications. The following is a list of requirements to be a Flexible Case Manager:

- 18 years of age or older,
- Successfully pass a DHS-approved training module on person-centered planning approaches, the Vulnerable Adult Act and the Maltreatment of Minors Act,
- Provide a copy of their training certificate to the recipient, and
- Any additional requirements requested by the recipient.

PART ONE

INTRODUCTION TO CONSUMER DIRECTED COMMUNITY SUPPORTS

Purpose:

To obtain a broad understanding of the philosophy and practical application of Consumer Directed Community Supports.

Outcomes:

Obtain basic knowledge of Medical Assistance eligibility and use.

Obtain basic knowledge of waiver programs that have Consumer Directed Community Supports in the waiver service menu.

Understand the 4 key principles of Consumer Direction.

Understand the process for implementing Consumer Directed Community Supports.

A. MEDICAL ASSISTANCE (MA)

Medical Assistance is an entitlement program based on income. An entitlement means that if a person is eligible, they have a right to receive the program. There are asset and monthly income limits. Medical Assistance is managed through a recipient's county of financial responsibility, which is usually the county where they live, but not always. Medical Assistance is provided by a combination of state and federal tax dollars.

Medical Assistance eligibility is redetermined regularly. It is important that recipients complete required reporting in order to keep their access to MA and the services it funds.

B. WAIVERED SERVICES

Waivered services are not entitlements. The State of Minnesota determines the number of recipients who may receive waived services, based on an agreement with the federal Centers for Medicare and Medicaid Services (CMS).

There are 5 MA waivers in Minnesota which provide services to specific populations:

- CAC- Community Alternative Care
- CADI- Community Alternatives for Disabled Individuals
- EW- Elderly Waiver
- MR/RC- Mental Retardation and Related Conditions
- TBI- Traumatic Brain Injury

Recipients of waived services must meet MA income and asset guidelines, or, be "deemed" eligible due to their disability. "Deeming" creates access to waived services for minor children, who because of parental income and assets would not otherwise be eligible. Parental fees, based on parental income, apply. "Deeming" also creates access to waived services for adults, who because of household income and assets would not otherwise be eligible. Copays and spenddowns may apply.

An Asset Assessment is completed when an EW client has a community spouse. Asset assessment policy is a result of federal and state laws

regarding spousal impoverishment. An asset assessment protects a specified amount of assets for the community spouse. An EW client may allocate a portion of his/her income to his/her spouse, and/or certain relatives for living expenses. If a community spouse has income below the maximum monthly income allowance (\$2319 currently), the EW spouse may transfer income and income producing assets to the community spouse.

Each Waiver has its own eligibility criteria and menu of available services. Some services are available across all of the waivers and some are not. The state's goal is to have a common service menu across all waivers.

Consumer Directed Community Support (CDCS) is one of the services that are available in all of the Medical Assistance waiver programs. The recipient's CDCS budget, which is the amount of dollars available to a recipient using CDCS, is set by the Minnesota Department of Human Services. Some factors used to determine the budget include age and severity of disability/support need. The data used to set the individual budget comes from the most recent full-team screening of the recipient that is completed by the county and entered into the Medicaid Management Information System (MMIS). For the CAC, CADI, and TBI waivers, that budget amount is available to the county in the CCT Waiver Management System. For the MR/RC waiver, that budget amount is available to the county in the MR/RC Waiver Management System (WMS). For the Elderly waiver, that budget amount is available to the county in MMIS.

Recipients accessing CDCS must take responsibility for developing, implementing and managing their individual plans, including their individual budgets. If unable to do so, they must have someone who can do so on their behalf. Funds may be used to purchase support, goods and services within and outside of the traditional service system.

Specific criteria for what may be purchased apply. Funds may be used for support, goods and services that reasonably relate to meeting the recipient's need for:

- Services that maintain their ability to remain at home
- Health and safety

- Skill enhancement or maintenance
- Community inclusion
- Family involvement
- Personal development
- Decreased dependence on formal services
- Increased independence for the recipient.

C. WHAT IS CONSUMER DIRECTION?

Consumer Direction has four key principles:

FREEDOM	To plan and live a life you choose.
SUPPORT	To arrange and receive the help you need.
AUTHORITY	To control the money allocated to you within established parameters.
RESPONSIBILITY	To accept the benefits and risks for choices made, and to be accountable for the money you spend.

Consumer Directed Community Supports is about FLEXIBILITY AND CHOICES-

- About shifting decision-making authority from the “system” to those who receive support.
- About not just the flexibility to choose but the flexibility to create.
- About not just the right to get help, but the flexibility and authority to direct it.
- About not just the hope for a better life, but the power to make it one’s own life.

The flexibility to manage one’s life can be directly related to control of the funding and information. Consumer Directed Community Supports provide an opportunity for people with disabilities, or those who are elderly, and

their families, to have the information they need as well as control of the funding so they can design a flexible system of support that works for them.

D. HOW DOES CONSUMER DIRECTED COMMUNITY SUPPORTS WORK?

The recipient with disabilities/elderly recipient must first be eligible for and authorized to receive funding from a Medical Assistance (MA) waiver.

In Minnesota, the Consumer Directed Community Support (CDCS) service is available under five MA Waivers:

- MR/RC – Mental Retardation & Related Conditions
- CADI – Community Alternatives for Disabled Individuals
- CAC – Community Alternative Care
- TBI – Traumatic Brain Injury
- EW – Elderly Waiver

The Recipient who chooses to receive their waiver services through CDCS:

1. Receives an Individual Budget

This is the amount of annual funding the recipient has available for support. Individual budget amounts are determined by the Minnesota Department of Human Services. The recipient can find out their Individual budget amount from their county case manager / service coordinator. The individual budget amount is determined through a formula based on the person's most recent full-team screening entered into MMIS. Some of the factors used to determine the budget include age, severity of disability and level of support needed.

An individual budget is the maximum amount available to a recipient. The recipient's Community Support Plan must indicate how the individual budget will be used in the recipient's plan year. If a person does not use all of his or her budget, the unspent funds do not carry over to the next plan year.

2. Develops a Community Support Plan

A Community Support Plan is required for each recipient who uses CDCS. The plan must include the following:

1. What the recipient plans to do or accomplish;
2. The kinds of support he or she will use;
3. Where he or she is going to get the support;
4. How much the support will cost; and
5. How monitoring will occur.

Plans for children are developed by the parent(s)/guardian, with input from the child. Adults develop their plans themselves, or with their legal representative if they have one. Recipients also have the choice to hire qualified persons to perform flexible case management duties to assist with the development and implementation of the Community Support Plan. Other people are included in the planning process as needed and wanted.

Information to help develop plans can be obtained from social workers, family members, coworkers, service providers, friends, the DHS Consumer Direction toolkit and website, and generic community resources. Support can be provided by friends, neighbors, coworkers and relatives, as well as by agencies. Goods and services can be formal or informal supports and can be purchased from general community resources, as well as those that are disability specific.

The Community Support Plan must be approved by the county prior to implementation. Services need to be approved by the county before they can be provided or paid for.

3. Implements the Plan

Support, goods and services identified in the approved Community Support Plan are purchased and/or created. Community Support Plans may be amended and revised during the plan year per state and county procedures. Funds are dispersed as designated in the Community Support Plan. In CDCS, the recipient must use a Fiscal Support Entity (FSE) to do the billing and make payments.

4. Maintains and Submits Required Records, Receipts and Documentation

The recipient's Community Support Plan documents what is needed and who will do what tasks. The recipient is responsible to provide information to the FSE for each CDCS service agreed to and approved by the case manager / service coordinator in the Community Support Plan. This includes information on the amount of services, what kind of service it is, what it includes, how often the service is to be delivered, and documentation that it was provided. The recipient must keep clear written records and have a safe place to store any receipts. Written receipts for services and supports (including timesheets) must match the services and supports detailed in the Community Support Plan. Each service must be completed before payment is made. Failure to comply may result in the loss of the ability to use CDCS.

The County of Financial Responsibility:

1. Provides training and assistance in plan development.

Information about policies, procedures and funding parameters is provided to those responsible for plan development. Assistance is provided as needed and/or requested.

2. Approves individual plans.

Plans are approved within the parameters of the federally approved waiver plan language, including that specific to CDCS.

If the county must deny a good or service included in the Community Support Plan because it is not an allowable expenditure under CDCS, the person may use CDCS for their other goods and services. In this situation, the Medical Assistance fair hearing and Medical Assistance notice requirements apply, and the other CDCS goods and service may continue to be purchased.

3. Authorizes the disbursement of funds through a Fiscal Support Entity.

A recipient using CDCS is required to use a Fiscal Support Entity (FSE) who will submit the bills to the state and will receive the money from the state to pay for the recipient's CDCS goods and services as authorized in the Community Support Plan.

The FSE is the Medicaid-enrolled provider. A list of approved FSEs is available to the recipient from their case manager / service coordinator.

The recipient's FSE may not participate in creating that recipient's Community Support Plan. If the FSE has any direct or indirect financial interest in any of the other services in that recipient's Community Support Plan (personal assistance, treatment and training, environmental modifications and provisions), that interest or relationship must be disclosed to the recipient in writing.

4. Monitors the implementation of plans.

The recipient's Community Support Plan must indicate who will monitor each service, when, and how frequently. The county will monitor the implementation of the plan according to the waiver plan language.

5. Determines if access to CDCS is to be withdrawn.

When immediate health and safety concerns, maltreatment of consumers, suspected fraud or misuse of funds, or an involuntary exit occurs, consumers will be **immediately** returned to other waiver and / or state plan home care services. Consumers who make purchases or engage in practices not allowed within CDCS will be returned to other waiver or state plan home care services.

When such actions are taken, it is only the CDCS waiver service that is terminated, not the waiver program itself. Person centered planning and informed choices remain priorities. The Medical Assistance fair hearing and Medical Assistance notice requirements apply. However, CDCS is **not** available to the consumer during an appeal when the Involuntary Exit criteria are met. The ability to discontinue CDCS service due to an Involuntary Exit, pending appeal, is unique to this service and differs from other waiver services that require services stay intact pending an appeal hearing.

RESOURCES:

The DHS website on Consumer Directed Community Supports:
http://www.dhs.state.mn.us/main/groups/disabilities/documents/pub/dhs_id_017635.hcsp

The DHS website on Consumer Directed Options:

http://www.dhs.state.mn.us/main/groups/disabilities/documents/pub/DHS_id_004644.hcsp

PART TWO

EMPLOYMENT RELATED INFORMATION FOR HIRING SUPPORT

Purpose:

To obtain a broad understanding of relevant parts of Federal and State employment and labor laws.

Outcome:

Understand the application of employment law and Department of Labor accountabilities when consumers/families hire individuals to provide support, and options available for meeting these responsibilities.

Understand Flexible case manager responsibilities for compliance with applicable Federal and State laws when employed by the consumer, affiliating with an agency, and when working as an independent entity.

A. Employment Related Information for Consumers

Those *who are hired* to provide support are subject to all state and federal laws governing employees. Those *who hire them* are responsible for meeting all of the obligations of an employer under state and federal laws. Consumers/families have three options to meet these responsibilities:

- Become an Employer themselves
- Hire an Employer of Record agency / common law employer as the legal employer of the individuals they select to provide support
- Hire an individual as an Independent Contractor to provide employer services. Those who qualify as independent contractors are limited by federal definition.

Money paid to those who provide support is always income, and therefore taxable. When parents/spouses hire themselves to provide support, it is income. For those who pay parental fees, this income could affect their parental fee. For those receiving other benefits such as food stamps, disability payments or other assistance, this income may affect these benefits. For those who must meet work requirements under MFIP (Minnesota Family Investment Program – a welfare to work program), this is applicable work. Considering all of the implications and consequences is important when determining who will be paid, and how much they will be paid.

As part of this module, please read the CDCS Consumer Manual It provides information on obligations and responsibilities, and options for meeting them.

Those who decide to become employers themselves may want to seek relevant advice. If so, they should seek advice from qualified employment and labor law professionals to make decisions regarding meeting their employer responsibilities. Or, the FSE may be able to provide information to help them make decisions.

Flexible case managers may be asked to assist consumers/families with their employment obligations. While the Flexible case manager can provide some assistance with these activities, they are not responsible for or liable for the actions of those the recipient/family hires.

B. Employment Information for Flexible Case Managers

The payment that flexible case managers receive for the work they do is always income. A flexible case manager (FCM) must determine how to meet tax responsibilities. There are several options:

1. Become employed by the recipient.
2. Become an employee of an agency who provides FCM services
3. Be employed by a Fiscal Support Entity (FSE)
4. Work as an independent contractor
5. Incorporate your own business

In the first option, the recipient employs the flexible case manager. The FSE is responsible for meeting all of the employer obligations, including FICA, withholding, workers' compensation, unemployment insurance and liability insurance.

In the second and third options, the flexible case manager is an employee of an established agency. That agency is responsible for meeting all of the employer obligations, including FICA, withholding, workers' compensation, unemployment insurance and liability insurance. As their employee, the flexible case manager is responsible for following applicable agency policies and procedures.

In options 4 and 5, the flexible case manager is responsible for meeting all tax obligations. Whoever pays them is responsible for providing them and the government with appropriate documentation of payment made. For independent contractors paid directly by the recipient/family and for those paid through a fiscal intermediary (an agency who makes payment on behalf of the recipient/family but who is NOT the employer), a 1099 must be provided to the flexible case manager and the IRS and MN Department of Revenue.

In options 1, 4 and 5, the flexible case manager must also secure their own liability insurance. For information on obtaining professional liability insurance, contact an insurance agent.

If needed, flexible case managers should seek advice from qualified tax professionals to make decisions regarding meeting their tax responsibilities.

PART THREE

UNDERSTANDING ROLES

Purpose: To have knowledge of the expectations and boundaries of the flexible case manager and other parties involved in Consumer Directed Community Supports.

Outcomes:

Acquire information about the waiver plan requirements for required case management and flexible case management.

Acquire information about the requirements to be paid as a flexible case manager.

Acquire information about the expectations of the people involved and what responsibilities can be negotiated.

Obtain an awareness of potential boundary issues.

Understand relevant Data Privacy practices.

CASE MANAGEMENT FUNCTIONS IN CDCS

Case management for a recipient using CDCS is separated into activities that are required and those that are flexible. The chart at the end of this section identifies those activities.

- Required case management functions are provided by county agencies and are not included in the recipient's CDCS budget.
- Flexible case management supports are included in the recipient's CDCS budget.

Direct support functions are flexible in terms of who provides them and whether they are covered as a paid service. CDCS consumers must have a care plan that is developed through a person-centered process. Consumers must also manage and monitor their CDCS services. If consumers need assistance with these tasks, support may be purchased through traditional county case management, provided by private providers, or someone else the consumer may make arrangements with and not pay. If the service is paid for, the cost related to flexible case management tasks are included in the consumer's budget.

A. FLEXIBLE CASE MANAGER REQUIREMENTS

People who are paid through CDCS to assist with the development and implementation of the recipient's person-centered community support plan must:

- be 18 years of age or older;
- successfully pass a series of training modules approved or developed by DHS on person-centered planning approaches, and the vulnerable adult or maltreatment of minors act;
- provide a copy of their training certificate to the recipient;
- use the community support plan template or a community support plan format that includes all of the information required to authorize CDCS; and
- be able to coordinate their services with the county case manager to assure that there is no duplication between functions.

Recipients or their guardian / representative may require additional provider qualifications tailored to their individual needs. These will be defined in the recipient's community support plan. The provider must provide the recipient or their guardian / representative with evidence that they meet the required qualifications. This includes providing a copy of training completion certificate(s) for any related training.

Flexible case managers may also provide assistance with employee related functions. Flexible case managers cannot be the employer of record / common law employer.

People or organizations paid to assist in developing the community support plan (e.g., flexible case managers) must not have any direct or indirect financial interest in the delivery of services in that plan. **NOTE:** This provision does not apply to: spouses, parents of minors, legally responsible representatives, or case managers employed by county agencies or, for MnDHO enrollees, health plan representatives.

Fiscal Support Entities (FSEs) or their representatives cannot participate in the development of a community support plan for recipients who are purchasing FSE services from them.

B. ROLE DISTINCTION

Those listed below have, at a minimum, the following responsibilities:

County:

- Communicate policy and procedures of Consumer Directed Community Supports (CDCS).
- Communicate individual CDCS budget.
- Provide the recipient and/or guardian/legal representative with information regarding CDCS, including training and forms.
- Provide the recipient and/or guardian/legal representative with assessment information and results as determined by the screening / assessment.
- Inform the recipient and/or guardian/legal representative of available supports and resources.
- Approve the community support plan.
- Monitor services.

- Approve changes to the plan and inform appropriate parties.
- Act as a liaison between licensed service providers.

Recipient and/or Guardian / Legal Representative:

- Follow the CDCS policies and procedures as set by the Minnesota Department of Human Services.
- Determine and communicate the support needs of the recipient.
- Develop and follow the Community Support Plan using a person-centered process.
- Manage and monitor the CDCS services.
- Coordinate and/or purchase of services (respite, speech, occupational therapy) equipment, and miscellaneous other items.
- Recruit, hire, train and coordinate the work of the support staff.

Flexible case manager:

- Provide information, service, and supports as identified in the Community Support Plan.
- Follow the job description and negotiate any new responsibilities requested, which may include:
 - Facilitate development of a person centered community support plan.
 - Monitor and assist with revisions to the community support plan.
 - Assist in recruiting, screening, hiring, training, scheduling, monitoring, and paying workers.
 - Facilitate community access and inclusion (that is, locating or developing opportunities, providing information and resources, etc.).
 - Monitor the provision of services including activities such as interviews or monitoring visits with the consumer or service providers.
 - Provide staff training that is specific to the consumer's community support plan.
- Give updates to the designated county staff person on a regular basis. The recipient or guardian/ legal representative and the designated county staff should determine method and timeframe; this is documented in the community support plan.
- Contact the designated county staff when the recipient or responsible party needs additional supports or service.
- Attend training required by the recipient or state.

- Follow tax and labor laws.
- Follow CDCS policies and procedures as set by the state.

Fiscal Support Entity (FSE):

- Make timely payments.
- Bill MMIS.
- Follow contracts/service agreements as set with the recipient and/or responsible party and the designated county staff.
- Monitor expenditures against the authorized amount.
- Follow tax and labor laws.

Support Staff:

- Follow job description, performing duties as assigned by the recipient and/or guardian/ legal representative or the flexible case manager.
- Complete timecards accurately.
- Follow tax and labor laws.

Refer to the following document for the waiver plan language on required case management activities and flexible case management activities:

http://www.dhs.state.mn.us/main/groups/disabilities/documents/pub/dhs_id_017637.pdf

C. BOUNDARIES

Boundary setting involves discussing, negotiating and drawing lines of what is acceptable and unacceptable. These are limits that enable safe and healthy relationships and define what flexible case managers can and cannot do in their relationships with recipients and families. When working in a person's home, it can become difficult to maintain boundaries. Having clear boundaries from the start will help make your job easier. A clear job description will also help with determining boundaries. You will find that some recipients/families will have boundaries that more clearly match yours in comparison to other recipients/families. This is important in determining whether you can work with that recipient or family.

D. DATA PRIVACY AND HIPAA

The Minnesota Data Practices Act and the federal Health Insurance Portability and Accountability Act (HIPAA) protect privacy and give individuals the right to be informed about the information that is maintained about them by the medical community, counties, and other social service and provider agencies. These entities must inform individuals about:

- Why the information is needed.
- What is done with the information.
- What will happen if the information is or is not provided.
- Who the information is shared with.

As a flexible case manager you will learn many things about those with whom you work. It is critical to respect the privacy of individuals and hold in confidence all information obtained in the course of your work. You cannot share information except:

- As mandated law.
- To prevent a clear and present danger to a person.
- If given specific permission.

Written and verbal information about a recipient and their family should only be shared with other staff when they need the information to fulfill their job responsibilities. All information, both written and verbal, about the recipient and their family is to be kept confidential.

Resources:

Information on the federal Health Insurance Portability and Accountability Act (HIPAA):

http://www.dhs.state.mn.us/main/groups/business_partners/documents/pub/dhs_id_000091.hcsp

PART FOUR

SAMPLE JOB DESCRIPTION FOR FLEXIBLE CASE MANAGER

SAMPLE

FLEXIBLE CASE MANAGER JOB DESCRIPTION

Position Purpose:

The Flexible Case Manager (FCM), under the direction and supervision of the waiver recipient, is responsible for FCM services as defined in the recipient's Community Support Plan. The FCM is accountable for client support services which provide support, care and assistance to a person for the development and maintenance of daily and community living skills, community integration and staffing service support assistance. Services may include but are not limited to: supervision, counseling, training or direct personal care, home management, money management, medical equipment assistance, staffing service support, sensory/motor development, reduction/elimination of challenging behavior, community living, mobility, leisure and recreation.

Qualifications: Professional and Personal:

1. Have successfully completed a training program for FCM approved by the Minnesota Department of Human Services.
2. Possess a general knowledge of disabilities and/ or brain injury that may affect a person's ability to live independently in the community.
3. Possess knowledge of a person-centered planning process.
4. Possess the ability to read, write, and carry out directions.

5. Possess the maturity to deal effectively with the demands of the job.
6. Have demonstrated dependability, tact, and ability to follow orders.
7. Have US citizenship or evidence of valid Alien Work Permit.

Specific Functions/ Responsibilities:

1. Assist the person with the development of their Community Support Plan.
2. Assist the person with the implementation of their Community Support Plan.
3. Provide FCM services directed at the development and maintenance of community livings skills and community integration.
4. Report changes in the client's condition and needs to the county case manager / service coordinator.
5. Complete the appropriate and accurate records to document cares given and the person's activities and other pertinent observations.
6. Respond and attend to the person's requests promptly.
7. Maintain client confidentiality, according to Data Privacy statutes and regulations.
8. Assure that client rights are observed.
9. Transport/ accompany client to appointments and/ or activities as determined by the Community Support Plan.
10. Participate in training or in-service programs to meet Community Support Plan requirements.