



Adult Family Care Homes



A New Home and Community Based Living Option

AFC Homes are private homes that are approved to provide continuous individualized supports in an environment that promotes:

 The health and wellbeing of the individual

 Family oriented home setting

 Long-term services & supports

 The individual's independence and dignity

Adult Family Care Homes enable more participants to live in the community setting of **their** choice

Person Centered Planning



Person centered planning is a process of continual listening and learning; focused on the strengths of the person, their goals now, and for the future; and acting upon this in alliance with their family and friends.

It is not simply a collection of new techniques, it is based on a completely different way of seeing and working with people with needs and disabilities, which is fundamentally about sharing power and community inclusion.

AFC Home Overview

- AFC Homes are unlicensed
- One or two waiver participants can reside in an AFC Home
- Quality Measures are in place to monitor the health and wellbeing of these participants
- Authorized Agencies are contracted with the State of Vermont to oversee AFC Home providers
- Approved Home Providers are matched with participants whose interests and needs are a good fit with the training and skill set of the home provider



AFC Home Development Team

Funding

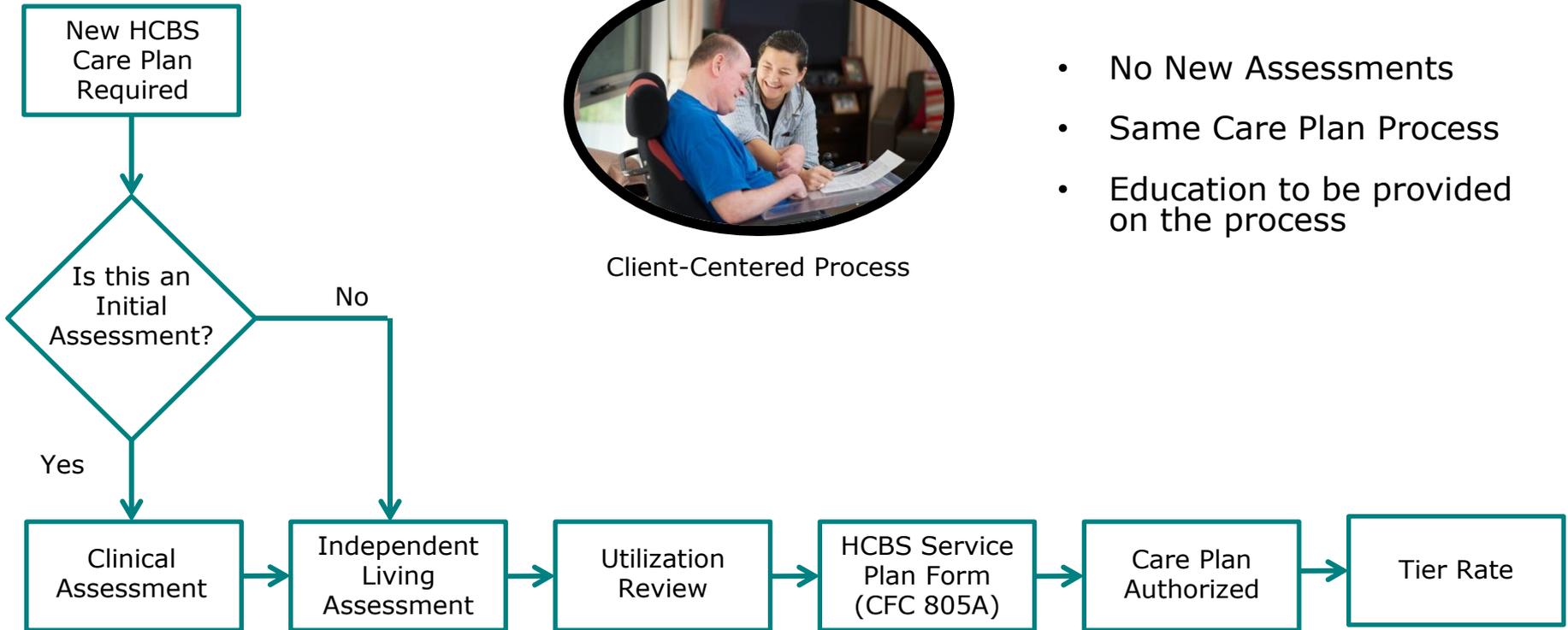
AFC homes for CFC participants are funded through Medicaid dollars.

DAIL has determined a tier based system for reimbursement based on the standard CFC Home and Community Based Service (HCBS) assessment process.

The personal care hours from the CFC assessment are used to determine the tier rate.



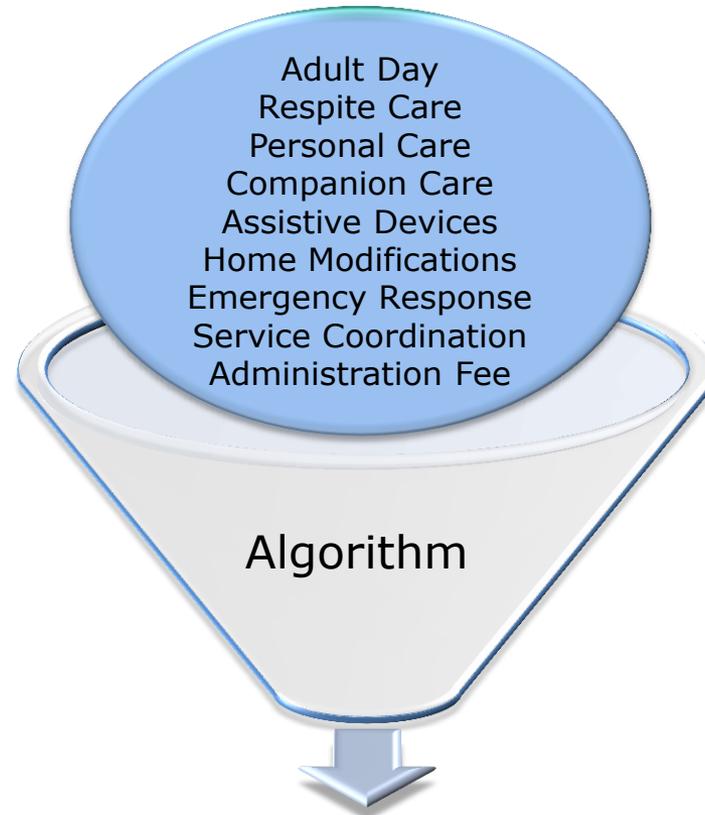
Current Care Plan Assessment Process



Client-Centered Process

- No New Assessments
- Same Care Plan Process
- Education to be provided on the process

A Fusion of Science And Art



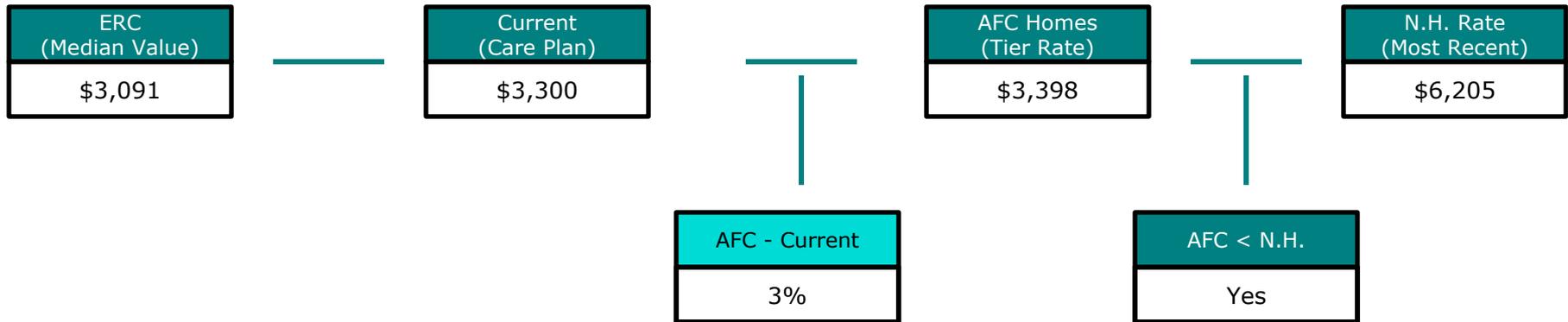
All-Inclusive Tier Rate

Vermont Department of Disabilities, Aging and Independent Living				
Choices for Care - Adult Family Care Service Plan				
Participant Name:		Soc. Sec. #		---
Services Provided In:		Start Date:		
Primary Diagnosis:		ICD-9 Code:		
Please Check Only One: <input type="checkbox"/> Initial Assessment <input type="checkbox"/> Reassessment <input type="checkbox"/> Change				
Services	Provider (Write in provider name)	Hours of Service	Rates	Cost / Month
<input checked="" type="checkbox"/> Case Management	<input type="checkbox"/> AAA: <input type="checkbox"/> Home Health:	24 hours/year (maximum)	\$ 67.44 (per hour)	\$ 134.88
Adult Family Care Home				
Tier Rate Schedule				
Tier #	Personal Care Hours Per Month	Daily Rate	Monthly Rate	
1	Less than 52 hours per month	\$ 75		\$2,271
2	From 52 to 66 hours per month	\$ 85		\$2,588
3	From 67 to 75 hours per month	\$ 91		\$2,768
4	From 76 to 86 hours per month	\$ 96		\$2,919
5	From 87 to 96 hours per month	\$ 101		\$3,082
6	From 97 to 106 hours per month	\$ 107		\$3,245
7	From 107 to 119 hours per month	\$ 113		\$3,431
8	From 120 to 135 hours per month	\$ 119		\$3,630
9	From 136 to 168 hours per month	\$ 131		\$3,982
10	Greater than 168 hours per month	\$ 152		\$4,624
<p>Monthly Personal Care hours are derived from the Choices for Care Independent Living Assessment and Utilization Review performed by the client's case manager and Long-term Clinical Care Coordinator.</p>				

Authorized Agency Controls Tier Dollars

Tier Rates Do Not Include Room and Board

Cost Impact Analysis (AFC Home Model Sample – 10 Tiers)



Program Sustainability

The State of Vermont has made every effort to provide fair compensation to the Authorized Agencies, who contract for the state, and Home Providers who care for our participants while providing **long-term** fiscal sustainability to Vermont's long-term care system.



Tier Participant Profile

Lives Alone

Mobility Devices

Incontinent



Age

Gender

Level of Care

All Cases are different! – But

Tier Participation Projections

		Tier Definition (Personal Care Hours / Month)	% of Population
A	Tier 1	Less than 52 hours	41%
	Tier 2	From 52 to 66 hours	
	Tier 3	From 67 to 75 hours	
	Tier 4	From 76 to 86 hours	
B	Tier 5	From 87 to 96 hours	29%
	Tier 6	From 97 to 106 hours	
	Tier 7	From 107 to 119 hours	
C	Tier 8	From 120 to 135 hours	30%
	Tier 9	From 136 to 168 hours	
	Tier 10	Greater than 168 hours	

Based on 1182 Current HCBS Care Plans

Profiling Tier Participants



Goal: Profile Categorically the Needs of the Targeted Populations

Sample #1 – MFP Participants

Sample #2 – Addison County Home Participants

Warning: This is a Qualitative Exercise based on 44 participants

Overall Participant Profile



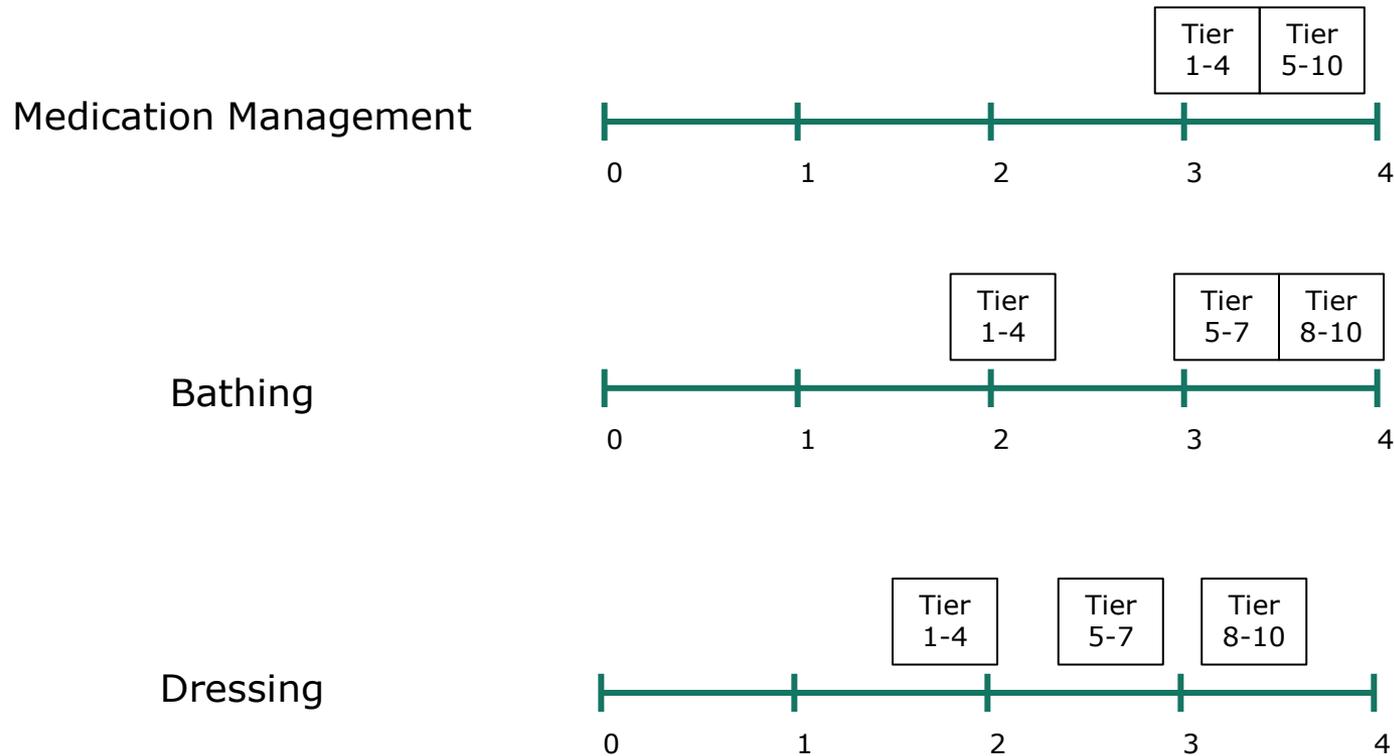
- The majority of participants use either a walker or wheelchair
- 73% of participants do not live alone
- 80% of participants are incontinent

Measures	Rating
Medication Management	3.6
Bathing	3.1
Dressing	3.0
Transfer	2.4
Mobility in Home	2.0
Cognitive Status	1.8
Eating	1.3

Rating Scale: 0 to 4
(0 – totally independent to 4 totally dependent)

Population Needs Breakdown

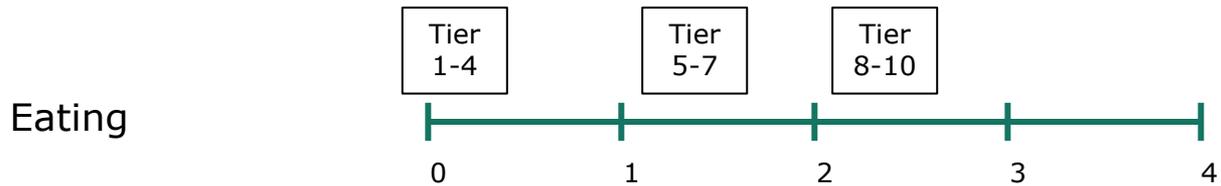
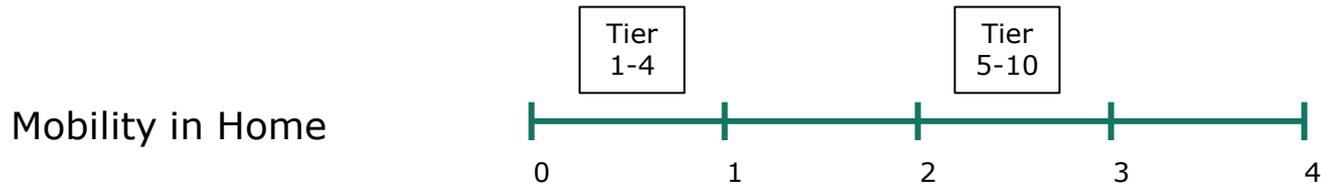
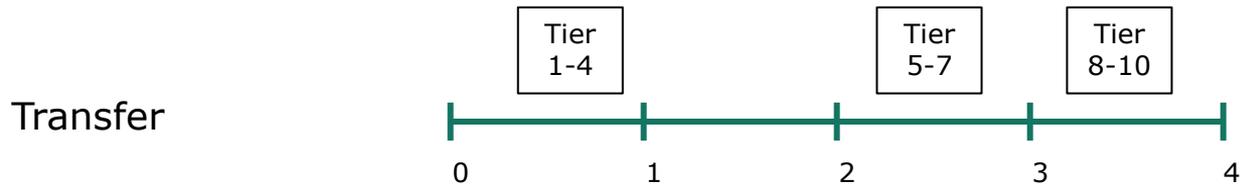
(By Tier Groups)



Rating Scale: 0 to 4
 (0 – totally independent to 4 totally dependent)

Population Needs Breakdown

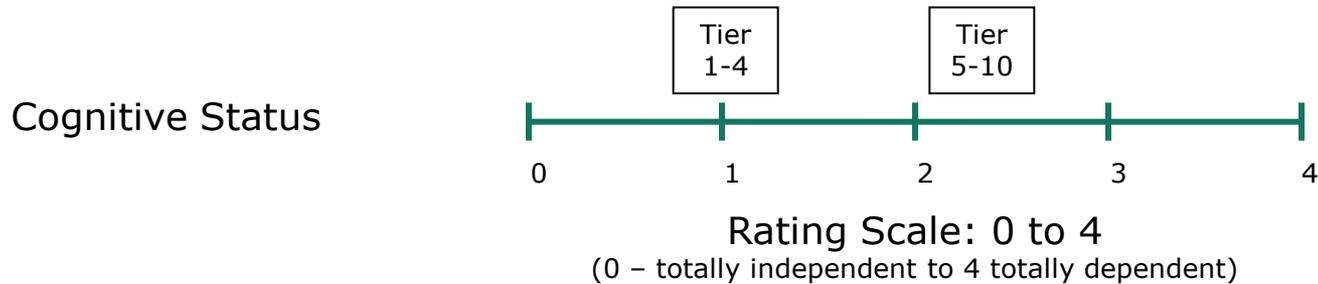
(By Tier Groups)



Rating Scale: 0 to 4
 (0 – totally independent to 4 totally dependent)

Population Needs Breakdown

(By Tier Groups)



Cognitive Status	Tier 1-4	Tier 5-7	Tier 8-10
No to Minimal Difficulty	75%	46%	53%
Some to Severely Impaired	25%	54%	47%

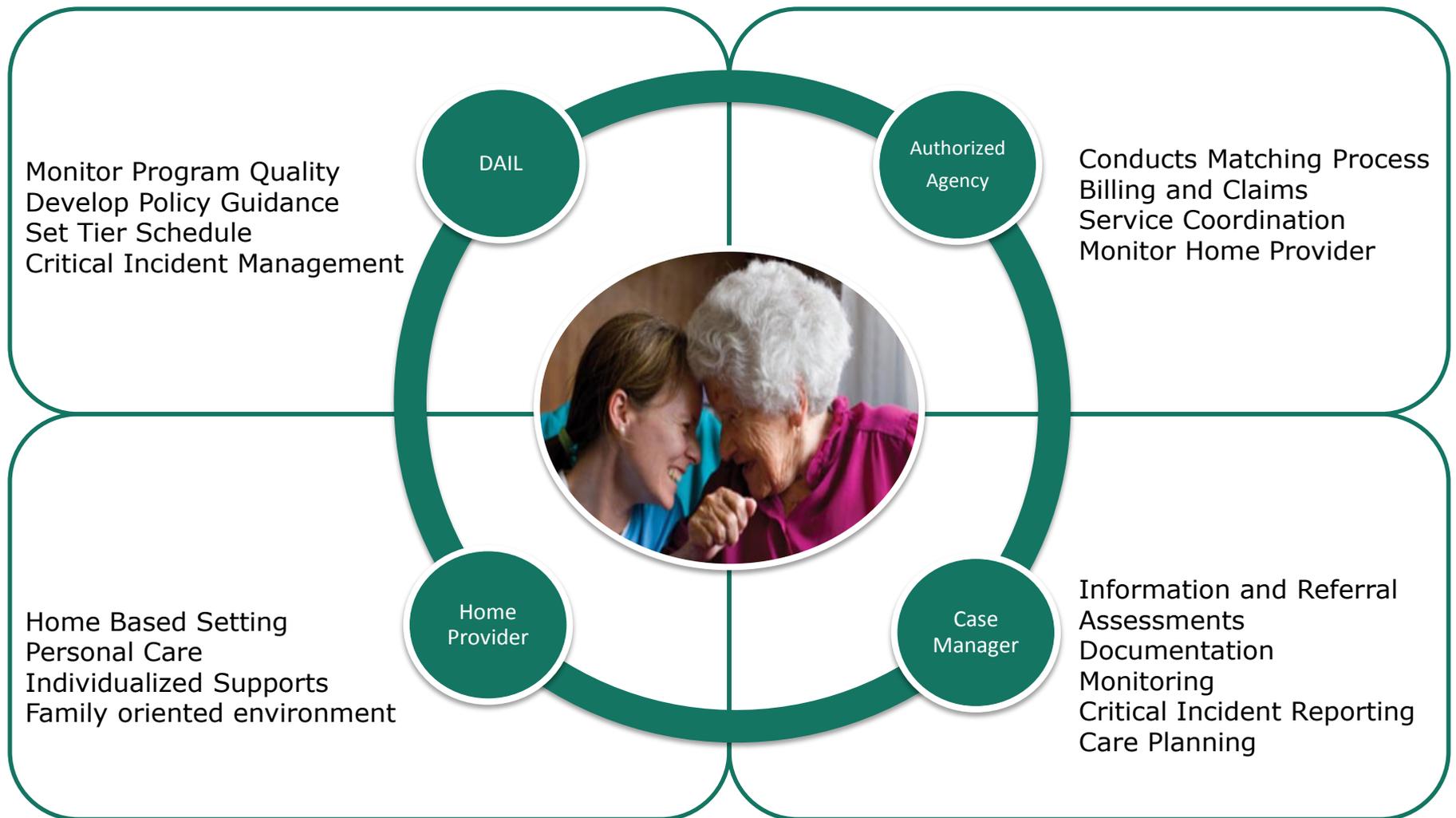
There are two distinct groups of cognitive status within the populations



Adult Family Care Homes



Roles And Responsibilities



Authorized Agency (AA)

Authorized Agencies are authorized by the Vermont Department of Disabilities, Aging and Independent Living (DAIL) to identify and approve the service plan, monitor those providing AFC services, and manage the payments to the direct service providers.

Qualifications

1. Be authorized by DAIL to provide AFC services under CFC
2. Be in compliance with CFC Provider Standards set forth in the CFC Highest/High manual, including applicable Federal/State regulations
3. Have and maintain an up-to-date Provider Agreement with DAIL
4. Be enrolled as a Vermont Medicaid Provider

Matching Process

A person centered matching process is conducted by the participant, Authorized Agency, legal guardian and support team.

Considerations:

- Client needs, preferences, wishes and goals
- Interviews
- Background checks and compliance with state and federal laws
- Training/Qualifications of Home Provider
- Guardian approval



Home Provider

An AFC Home Provider delivers individualized services, outlined in the service plan, to a Choices for Care participant.

The Home Provider must pass background checks, complete training and develop an agreement with an Authorized Agency to become a Home Provider.

The home can be owned or rented but must pass the Housing Safety and Accessibility Review.



Difficulty of Care Payment

The Home Provider Receives a monthly tax-free stipend from the Authorized Agency for their services.

The following are not funded:

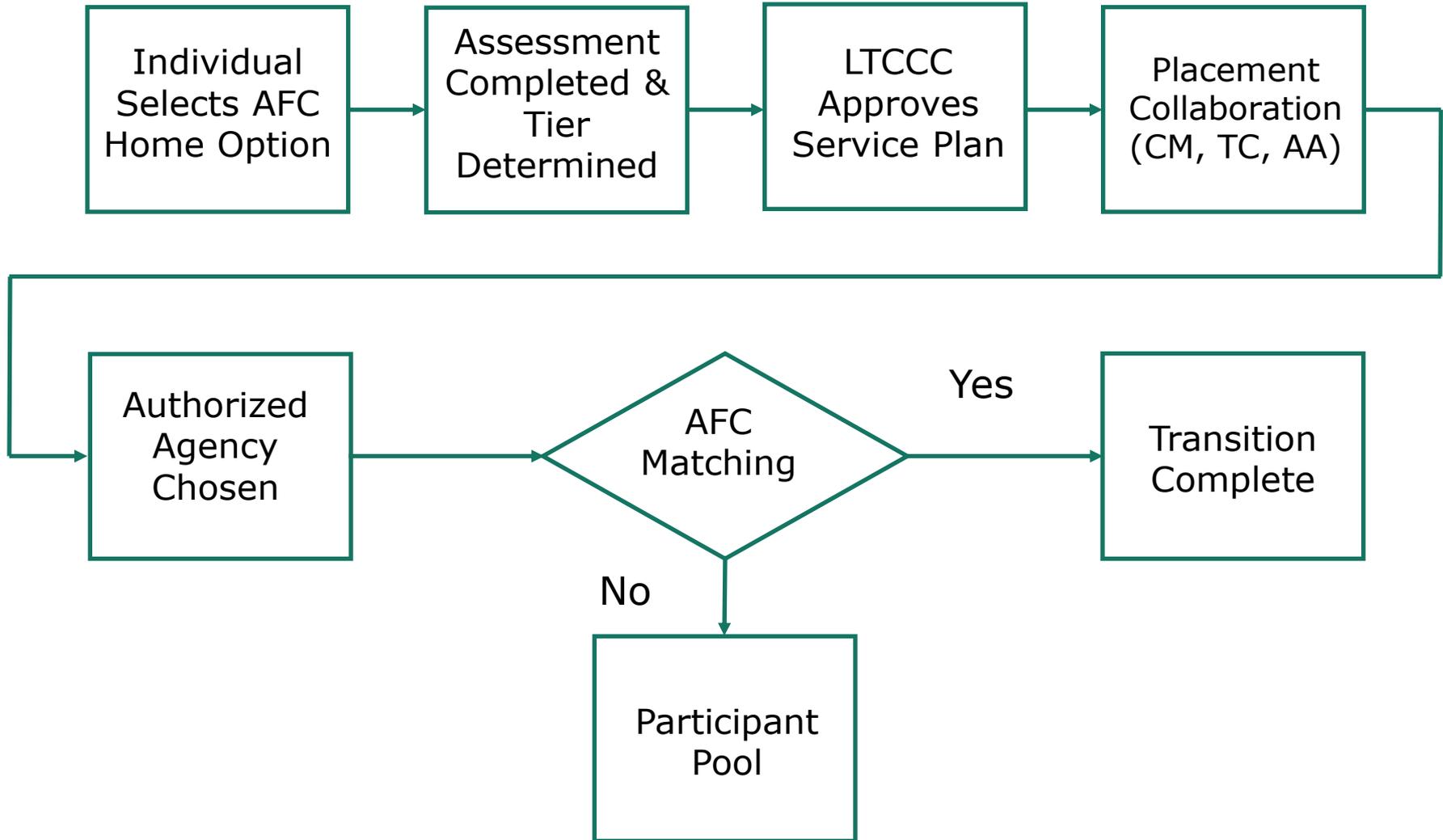
- Home maintenance and repair
- Room and board
- Any service already paid to the live-in caregiver as described in the room and board agreement, or in a separate, private arrangement



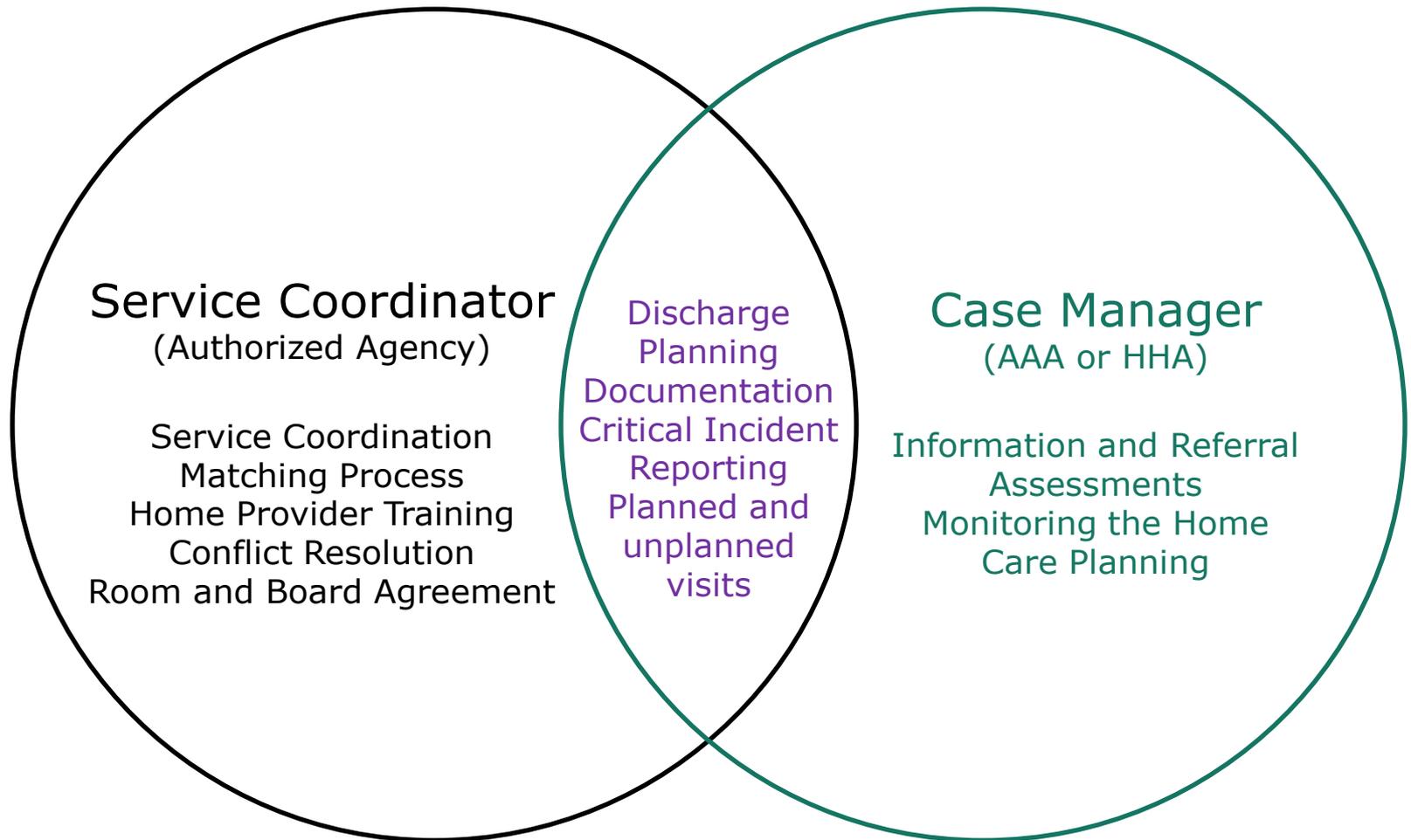
Community Supports

When an individual is temporarily hospitalized, home and community based services funding can be used to provide personal care type services in the hospital setting.

Agencies can be reimbursed for 94 percent of the tier rate for 30 continuous inpatient days. If a person remains in the hospital for 31 days or more, home and community-based services must be suspended.



Service Coordinator and Case Manager Responsibilities



Participants Rights and Responsibilities

- Participant has the ultimate choice in where they live
- Involvement in care plan development process



See AFC Home Guidance for all 26 Rights and Responsibilities

Quality Outcomes

1. AFC Home participants had a choice in where they live
2. AFC Home participants will experience an improved Quality of Life
3. Critical Incident Reporting
4. Target to transition 18 MFP participants to AFC Homes
5. 14 of 18 MFP participants remain in the community and complete their 365 days for Money Follows the Person

(40 MFP enrollees are waiting to transition due to lack of housing)

Money Follows the Person

Eligible participants will receive:

- Transition Coordinator Assistance
- Weekly calls and monthly visits for the first 90 days post transition
- \$2,500 in Transition Funds

Housing Specialists

- Three specialists to be hired
- Report to Project Director
- Role is to act as a broker between the case manager and local housing authorities



MFP eligible individuals meet all of the following conditions:

- Vermont resident
- Receiving nursing facility services
- Meets CMS requirements for 90 consecutive days in facility (excluding rehab days)
- Enrolled with Medicaid coverage for a minimum of one day prior to transition
- Expresses a desire to return to a community setting

Housing Safety and Accessibility Review



- Initial and follow-up to be done by DAIL contracted agency
- The home inspection will be done every three years
- This review follows the home not the consumer

Critical Incident Reporting

Reporting Policy

**Division of Disability and Aging Services
Money Follows the Person
Critical Incident Reporting Policy**

Division of Disability and Aging Services (DAIL) Quality Improvement Program includes a critical incident reporting and management system. Critical incident reporting provides DAIL timely notification of a threat to a Money Follows the Person (MFP) participant's welfare, information to address problems experienced by provider agencies and data to identify systemic problems.

DAIL will ensure appropriate action is taken to address or remediate critical incidents involving participants enrolled in MFP. A *critical incident* reportable under MFP is defined as:

- any actual or alleged event, incident or course of action involving the perceived or actual threat to an MFP participant's health and welfare; or
- any actual or alleged event, incident or course of action involving the perceived or actual threat to his/her ability to remain in the community.

Examples of critical incidents include but are not limited to: untimely or unexpected death; unexpected occurrence resulting in death; suspicious or unexplained cause of death; suspected abuse, neglect or exploitation; serious injury or medical condition; criminal act by person receiving services; criminal act by staff or worker; use of restraint; medication error; unexpected hospitalization; events or incidents that cause harm to MFP participants; events that serve as indicators of risk to participants health and welfare; fire; theft; destruction of property; other criminal acts and unusual events.

Within 24 hours of a critical incident, service providers, MFP transition coordinators, case managers and any person who becomes aware of a critical incident is required to complete the *Division of Disability and Aging Services Vermont Money Follows the Person Critical Incident Form* (Appendix A). The reporter must fax the report to DAIL MFP.

Quality Specialists (802.871.3052 fax). While an initial verbal report is allowable (802.871.3067 office), a written report is required within 48 hours of the incident.

 ADFS Division of Disability and Aging Services,
Money Follows the Person, 103 S. Main St. Weeks Bldg.,
Waterbury, VT 05671-802-871-3067
Fax 802-871-3052 • AHS.MFP@state.vt.us

 MFP_CIR_PP_V2

DAIL Money Follows the Person Critical Incident Reporting Policy & Procedures
Page 1 of 3

Reporting Procedures

**Division of Disability and Aging Services
Money Follows the Person
Critical Incident Reporting Procedures**

- Determine if the incident meets the definition of a Money Follows the Person Critical Incident:
 - any actual or alleged event, incident or course of action involving the perceived or actual threat to an MFP participant's health and welfare or
 - any actual or alleged event, incident or course of action involving the perceived or actual threat to an MFP participant's his/her ability to remain in the community.
 Including but not limited to:
 - Untimely death
 - Unexpected event resulting in death
 - Suspicious death
 - Unexplained death
 - Suspected abuse, neglect or exploitation
 - Serious injury or medical condition
 - Serious injury or medical condition requiring treatment by a physician
 - Criminal act by person receiving services
 - Criminal act by staff or worker
 - Use of restraint
 - Unexpected hospitalization
- To report a Money Follows the Person (MFP) critical incident, complete *Division of Disability and Aging Services Money Follows the Person Critical Incident Report* (Appendix A) within 24-hours of incident or within 24-hours of learning of the critical incident. To request a report form, contact MFP offices at 802.871.3067 or AHS.MFP@state.vt.us
- If the critical incident involves abuse, neglect or exploitation, the reporter must report the incident to Adult Protective Services per the reporter's regulation/policy/statute mandates (800.564.1612).
- Fax the completed form to MFP offices (802.871.3052 secure fax). If the reporter does not have access to the form or a fax, verbal

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DAIL Money Follows the Person Critical Incident Reporting Policy & Procedures
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Reporting Form

**Division of Disability and Aging Services,
Vermont Money Follows the Person
Critical Incident Reporting Form**

Report this incident within 24-hours of discovery to Money Follows the Person (MFP) by fax 802.871.3052 or HIPAA secure email AHS.MFP@state.vt.us

Note: If fax is unavailable, phone reports must be followed by a written report mailed or faxed within 48-hours of discovery of incident. For phone notifications or questions, contact Money Follows the Person offices at 802.871.3067.

Report Date ___/___/___

Date of Critical Incident ___/___/___

Time of Incident _____

Date Incident Discovered ___/___/___

MFP Participant Last Name _____ First Name _____ Middle _____

Participant Date-of-birth (if known) ___/___/___

Participant Address _____ City _____ Zip _____

Participant Telephone Number _____

Agency Involved or Individual(s) Involved _____

Guardian _____ Guardian Contact # _____

Type of Guardian (select one) _____ Public _____ Private

Type of Incident – check all that apply (X):

Untimely death or unexpected occurrence resulting in death

Unexplained or suspicious cause of death

Unexpected hospitalization

Serious Injury/medical condition requiring physician treatment

Use of restraint

 ADFS Division of Disability and Aging Services,
Money Follows the Person, 103 S. Main St. Weeks Bldg.,
Waterbury, VT 05671-802-871-3067
Fax 802-871-3052 • AHS.MFP@state.vt.us

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Critical Incident Reporting Policy Appendix A
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Training Sessions To Follow

A New Home and Community Based Living Option

Documents

Adult Family Care Home Guidelines

- Outlines the roles and responsibilities for the Authorized Agency, Home Provider and Participant

Authorized Agency Agreement

- Application required to become an Authorized Agency with DAIL

Home Provider Agreement

- Contract between the Home Provider and Authorized Agency

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Education and Awareness

Rollout Meetings:

- Designated Agencies
- Specialized Service Agencies
- Traumatic Brain Injury Providers
- Long-term Care Clinical Coordinators
- DAIL Advisory Board
- Area Agencies on Aging
- Home Health Agencies
- AFC Home External Stakeholders



AFC Home External Stakeholders

Meeting Schedule

April 18th 2-4 pm

July 18th 2-4 pm

October 17th 2-4pm

AFC Home External Stakeholder Group

Heather Shepard (Addison County Home Provider)

Mary Bingham (Addison County Home Provider)

Kim Daniels (PRIDE)

Sue Chase (Care Partners VT)

Heather Johnson (ADRC)

Peter Cobb (VA HHA)

Greg Mairs (Counseling Services of Addison County)

Ellen Gagner (VNA)

Catherine Collins (CVAA)

Joyce Lemire (Senior Solutions)

DDAS Staff

Kelley R. Homiller (Champlain Community Services)

Bart Mair (Lincoln Street Inc.)

Carrie Shamel (VNA/LTC)

Marilyn Carter (Sterling Area Services)

Gini Milkey (Community of Vermont Elders)

Rita Laferriere (VNA of Vermont & New Hampshire)

Kirby Dunn (Homeshare Vermont)

Jill Allen (Project ABLE)

Laura Pelosi (VHCA)

Jackie Majoros (Vermont Legal Aid)

Program Marketing

Choices For Care
MFP
AGENCY OF HUMAN SERVICES

Adult Family Care Homes

Adult Family Care Homes offer:

- Safe family-oriented home setting
- Personal care services and individualized supports
- A new Choices for Care Home and Community-Based Service

- Press Release
- Brochure
- Website

Contacts

Email Us: Ahs.afc@state.vt.us

Linda Martinez RN, Project Director

Phone: 802-871-3361

Email: linda.martinez@state.vt.us

Rio Demers, Quality Management Specialist

Phone: 802-871-3364

Email: rio.demers@state.vt.us

Next Steps

