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Roles and Responsibilities in a Self-Direction Program

In Medicaid self-direction programs, individuals may direct many or all of their home- and community-based services, including selecting and managing direct service workers and/or managing a budget (which may also be referred to as a service cost maximum) for needed services. Several individuals and entities are involved to ensure that self-direction operates smoothly and that individuals receive the high-quality services to which they are entitled. This document describes the role of each person involved in a self-direction program (e.g., the individual, an individual's representative (if applicable), the case manager, direct care workers) and supporting entities (information & assistance provider; and financial management services provider) in carrying out major program activities.

Activity	Individual	Representative (if applicable)	Case Manager	Information & Assistance	Financial Management Services	Directly Hired Worker
Person- Centered Planning (PCP)	Understands, participates in, and is at the center of the PCP process	Conveys the preferences & desires of the individual using the PCP process	Assists the individual in assessing needs & developing the service plan using the PCP process	Provides information and assistance on using the PCP process	Provides user friendly customer service about timesheets, budget balances, or pending invoices	Listens to the individual and follows his or her instructions about how and when he or she wants services to be delivered (e.g., meals prepared, bathing schedule, where shopping is done, etc.)
Employment Assistance	Recruits, interviews, and hires worker	Hires the worker selected by the individual	Refers the individual to the Information & Assistance Specialist, if one is present; otherwise, assists the individual with recruiting, hiring, managing and dismissing the worker	If this function is different from the case manager, Information & Assistance may assist the individual with recruiting, hiring, managing, and, if appropriate, dismissing the worker	Processes employment documentation and receives and processes timesheets, processes invoices for goods and services, and pays workers	Completes employment documentation

Activity	Individual	Representative (if applicable)	Case Manager	Information & Assistance	Financial Management Services	Directly Hired Worker
Training	Requests assistance with additional training, if needed	Requests assistance with additional training if the individual desires or if there is a demonstrated need	Refers the individual to the Information & Assistance Specialist if one is present; otherwise, assists the individual with obtaining additional training, if needed	Assists the individual with obtaining additional training, if needed	Not applicable	Agrees to additional training, if needed
Processing Timesheets	Reviews and signs timesheets	Approves & signs timesheets and other documents on behalf of the individual	Refers the individual to the Information & Assistance Specialist if one is present; otherwise, assists the individual with questions about timesheets	Provides support to the individual with questions about timesheets	Withholds, reports and pays state & federal taxes, FICA, Medicare, and state & federal insurance; verifies citizenship, and brokers workers compensation; processes timesheets and pays invoices in an accurate and timely manner	Works with the individual or representative to complete accurate and timely timesheets
Monitoring the Delivery of Services	Monitors the delivery of services and takes corrective action if services are not provided as intended	Assists the individual to monitor the delivery of services and take corrective action if services are not provided as intended	Monitors service delivery, risk assessment and mitigation plan	Assists the case manager to monitor the delivery of services and communicate to the case manager if services are not delivered as intended	Reports to the case manager any discrepancies with timesheet submissions or questionable activity in the home of the individual	Provides services as specified in the service planning document and according to the preferences of the individual; reports changes in the individual's functional, physical, or cognitive condition to the case manager

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Reporting Changes (functional, behavioral, or cognitive condition; or living arrangements)	Contacts the case manager to report changes in medical condition(s), living arrangements, or admission to an institution including a hospital	Contacts the case manager on behalf of the individual to report changes in medical condition(s), living arrangements or admission to an institution including a hospital	Issues modifications to the plan, as needed	Reports changes in medical condition, living arrangements or admissions to an institution including a hospital	Changes address of individual if reported or stops timesheet processing if individual is institutionalized or hospitalized	Contacts the case manager if changes in condition or living arrangements; stops billing if required when individual is institutionalized or hospitalized
Emergency Back-Up Plans	Works with case manager to develop a viable emergency back-up plan when the worker fails to show	Works with the individual and the case manager to develop a viable emergency back-up plan when the worker fails to show	Discusses and documents the emergency back-up plan with the individual or representative	Reports instances to the case manager where the back-up plan was used and it failed to work	Reports instances to the case manager where the back-up plan was used and failed to work	Agrees to a schedule to report for work and, if unable to complete commitment, calls the individual immediately to determine if the emergency back-up should be arranged
Mandatory Reporting	Reports incidents of abuse, neglect, exploitation, and fraud	Reports incidents of abuse, neglect, exploitation, and fraud	Reports incidents of abuse, neglect, exploitation, and fraud	Reports incidents of abuse, neglect, exploitation, and fraud	Reports incidents of abuse, neglect, exploitation, and fraud	Reports incidents of abuse, neglect, exploitation, and fraud

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The *Integrated Care Resource Center* is a national initiative of the Centers for Medicare & Medicaid Services Medicare-Medicaid Coordination Office to help states improve the quality and cost-effectiveness of care for Medicare-Medicaid enrollees. The state technical assistance activities provided by the *Integrated Care Resource Center* are coordinated by Mathematica Policy Research and the Center for Health Care Strategies. For more information, visit www.integratedcareresourcecenter.com.