



Children's Personal Care Services Program Guidelines



STATE OF VERMONT
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Disability and Aging Services
July 2006

For additional copies or information, or to obtain this report in a different format, contact:

Agency of Human Services
Department of Disabilities, Aging & Independent Living
Division of Disability and Aging Services
103 South Main Street
Weeks Building
Waterbury, VT 05671-1601
Phone: 888.268.4860
Fax: 802.241.4224



TABLE OF CONTENTS

WHAT IS THE CHILDREN'S PERSONAL CARE SERVICES (CPCS) PROGRAM?	1
WHO QUALIFIES FOR CPCS AND HOW DO WE APPLY?	2
WHAT IF WE NEED TO REQUEST MORE HOURS?	4
WHAT ARE OUR APPEAL RIGHTS?	5
WHO CAN BE A CPCS EMPLOYEE?	6
WHAT ABOUT TRAINING?	7
WHAT CAN CPCS EMPLOYEES DO?	7
WHAT CAN'T CPCS EMPLOYEES DO?	8
WHAT IS MEDICAID FRAUD?	10
WHAT HAPPENS WHEN MY CHILD BECOMES AN ADULT?	10
HOW DOES DDAS ASSURE SATISFACTION AND QUALITY?	11
IS MY CHILD'S INFORMATION CONFIDENTIAL?	11
WHO CAN PERFORM ASSESSMENTS?	12
WHO DO WE CALL WITH QUESTIONS?	13

ATTACHMENTS:

CPCS ASSESSMENT OF NEED AND PLAN OF CARE
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING BACKGROUND
CHECK POLICY
APPEALS NOTICE
LIST OF ASSESSING AGENCIES
EXAMPLES OF MEDICAID FRAUD

What Is the Children's Personal Care Services (CPCS) Program?

The Children's Personal Care Services (CPCS) program is a state-plan Medicaid service available to children under the age of 21, with a significant disability or health condition that substantially impacts care giving needs and/or the development of self care skills. The goal of CPCS is to provide supplemental assistance with self-care and activities of daily living to Medicaid eligible children with significant disabilities or health conditions at home and in the community. This support is intended to supplement, not supplant, parental roles and responsibilities. It is not intended as a substitute for age appropriate child care needed while parents are working.

CPCS is designed to assist the child with their activities of daily living, but may not be the appropriate service to address all the challenges or problems the child and family face.

Medicaid Enrollment

To qualify for Children's Personal Care Services, recipients must have and maintain Medicaid enrollment. The recipient can be eligible for Medicaid through the Dr. Dynasaur program, the Disabled Child Home Care/Katie Becket eligibility process, Supplement Security Income (SSI), the Reach Up program, Medically Needy Program (Spend Down), and Medicaid waiver services to access Children's Personal Care Services.

Children's Personal Care Services are available for Medicaid eligible individuals who qualify until the individual's 21st birthday. Once the individual turns 21, s/he no longer qualifies for the program, regardless of Medicaid eligibility. Services provided on the child's 21st birthday and after are not reimbursable.

Note about Dr. Dynasaur and VHAP

If Medicaid eligibility is based on Dr. Dynasaur criteria, Medicaid eligibility ends at age 18. Unless Medicaid coverage is obtained through SSI or waiver services, Children's Personal Care Services will not continue beyond the recipient's 18th birthday.

The VHAP program (including VHAP-Pharmacy, VHAP-Limited and VHAP-Managed Care/PCP+) does not cover Children's Personal Care Services. VHAP is an insurance program administered by the Office of Vermont Health Access but is not Medicaid.

Who Qualifies for CPCS and How Do We Apply?

To apply for Children's Personal Care Services, the child must have active Medicaid enrollment and at least one significant disability/health condition which substantially impacts care giving needs of young children (birth to three) and the development of self-care skills in older children and young adults. Medical necessity and service level is determined through the Children's Personal Care Services Assessment of Need.

Initial applicants are referred to the Children's Personal Care Services program through a number of avenues. Referrals should be made to the Children's Personal Care Services program or directly to an assessing agency.

Assessing agencies include the Visiting Nurses' Association, Home Health agencies, Professional Nurses Service, local mental health agencies, developmental services agencies and VDH—Children with Special Health Needs. See attached list with contact numbers.

The CPCS Assessment of Need is designed to identify the difference between the child's self-care skills and those of typical age peers. For young children, the assessment identifies the increased care giving needs related to activities of daily living (i.e., dressing, grooming, bathing, feeding).

The on-going need for services is reassessed annually to determine level of need. This is done by using the CPCS Assessment of Need and an update of the care plan. Recipients will be notified of the need to renew their services and provided instructions, in order to have services continued.

Approximately 6 weeks prior to the end of the authorization period, recipients and their families will be notified, in writing, of the need to reassess with the necessary instructions to schedule the reassessment. While Children's Personal Care Services staff do not perform assessments, they can assist in scheduling an assessment with a local assessor, if needed.

Sometimes the assessment indicates that the level of care required does *not* differ significantly from that required of typically developing age peers. In these cases, CPCS hours are not approved.

Applications and assessments must be completed by an assessor. Assessments should be performed during a face-to-face interview with the parent/guardian and other respondent(s) of the individual's/family's choosing.

The child must be present for the first assessment with an assessor (including reassessments with a new assessor), but it is not necessary for the child to participate in responding to assessment questions unless it is appropriate for that child to participate.

Once complete, the assessment of need and care plan are forwarded to the CPCS program for review.

Once the assessment is received, Medicaid enrollment is verified. In cases where the Medicaid enrollment is not active, the applicant's family will be notified. The family will be instructed to contact the CPCS program when Medicaid is obtained or reinstated. At that time, the assessment will be reviewed.

In some instances, the Department of Disabilities, Aging and Independent Living will choose to verify the recipient's diagnosis(es). The recipient's family will be notified, in writing, if a diagnosis is going to be verified. The assessment will not be reviewed until verification is complete. For current recipients, existing services will be continued during this process. For new applicants, the application will not be processed until verification is complete.

If there are additional questions about the child's skill level, the Department of Disabilities, Aging and Independent Living may ask for an independent respondent to complete the form with the assessor as a way to get additional information. Families will be notified, in writing, of the request for an independent respondent.



The assessment will be reviewed to determine the child's medical necessity and level of need. All appropriate sections of the assessment must be completed in order to be processed. Questions left unanswered will be assumed to be either not applicable or at age appropriate mastery level. Responses may indicate that the level of care required does not differ significantly from that required of typically developing age peers and CPCS services will not be approved.

New Applicants

Families of new enrollees will be notified in writing of the decision, and explained their choices to have the service provided. For individuals who do not qualify for Children's Personal Care Services, they will be notified of the denial and their appeal rights. Before services can be used, the family must notify the CPCS program of their choice between family-managed and agency-directed services. The start date for services will be the day that the family notifies the Children's Personal Care Services program of their choice. A Notice of Decision (NOD) will be processed authorizing use of service.

For those recipients using the family-direct option, the Children's Personal Care Services program will notify the Intermediary Service Organization (ISO) and request an enrollment package be sent to the family. To request additional forms, assistance in completing enrollment forms or to follow up on status of enrollment, families should contact the ISO directly.

What if We Need to Request More Hours?

The Department may entertain requests for a temporarily increased level of service, based on both a change in recipient's level of need and extreme care giver situation.

Requests for long-term increases in authorized hours will require a reassessment; temporary increases based on either individual needs or extreme care giver circumstances must be made in writing to the Children's Personal Care Services program.



At the time that a temporary increase is granted, the duration of the increase is determined. Following a temporary increase, the allocation reverts to the level determined by the current assessment of need.

What Are Our Appeal Rights?

If a recipient or family is not satisfied with a decision made by the CPCS program, they can request a reconsideration of the decision. A reconsideration of the decision can be made up to 15 days from the day the decision is received. A reconsideration may be requested in writing or over the phone to the Children's Personal Care Services program at:

**Children's Personal Care Services
103 South Main Street
Weeks Building
Waterbury, VT 05671
888-268-4860**

Recipients also have the right to request a Fair Hearing. If the individual or parent/guardian is dissatisfied with the outcome of the reconsideration or wants to request a Fair Hearing directly, it can be made in person, in writing or over the telephone to the Children's Personal Care Services program at the above address and phone number, or directly to the Human Services Board. Requests made directly to the Human Services Board must be in writing and sent to:

**Human Services Board
120 State Street
Montpelier, VT 05620-4301**

A fair hearing can be requested any time up to 90 days after this notice is received. The recipient may ask to have the hours continued at their previous level while the appeal is pending. This must be requested within 10 days of receiving the notice

Only the individual, parent/guardian or a legal representative can appeal a decision.

Who Can Be a CPCS Employee?

Any number of people can become a CPCS employee. The program allows for family members—including grandparents, aunts/uncles, adult siblings, to be employed. Qualifications for employees should be based on the individual needs of the child and are determined by the employer.

Employees must be 18 years of age or older. A request for a variance of the age requirement can be made, in writing, for potential employees as young as 16. Requests will not be considered for potential employees younger than 16 due to child labor laws. Variance requests must be made to the Children's Personal Care Services program and should provide the qualifications of the prospective employee, the prospective employee's date of birth and a rationale of appropriateness.

Potential employees are required to submit to a comprehensive background check pursuant to the Department of Disabilities, Aging and Independent Living's (DAIL) background check policy. For families who choose the family-managed option, background checks will be performed by the Intermediary Service Organization (ISO). The background check includes the Vermont Criminal Information Center record check, the Department of Motor Vehicle operating record, Department of Children and Families registry, and the Adult Protective Services Abuse Registry. The DAIL background check policy specifies restrictions to hiring potential employees (see attached).

Federal law prohibits parents (biological and adoptive) and step-parents from being paid to provide personal care services to their minor children. The Children's Personal Care Services Program extends this prohibition to include parental domestic partners, developmental home providers, foster parents and all persons serving as the child's primary care provider, as well as to parents and step-parents of adult children.



What About Training?

It is the responsibility of the employer to ensure appropriate training of employees based on the child's individual needs. For families who are family-managing the program, it is the parent/guardian's responsibility.

The employer is responsible for training employees on the proper reporting of hours worked on timesheets.

What Can CPCS Employees Do?

The CPCS program pays the hourly wage for direct staff to work with the child authorized to receive CPCS. The CPCS program is intended to provide individual support to aid in the development of self-care skills or to aid in care giving to young children.

Allocations are determined based on the average number of hours per weeks of additional assistance needed to complete activities of daily living. Allocations are granted in as bank of hours. Hours can be scheduled flexibly within the time period authorized. Hours can be scheduled to meet the individual and family's need; however, the total number of hours used cannot exceed the total number authorized for the time period.

CPCS workers can assist with a variety of activities related to the individual's care needs, such as dressing, grooming, bathing, toileting, etc., including a broader array of activities in the community.

- ✓ CPCS work can accompany the recipient to summer camp and family vacations (including trips out of state).
- ✓ CPCS workers can transport the individual, but the CPCS program does not pay for mileage.
- ✓ CPCS does not provide for overtime pay, even in cases where the employee works more than 40 hours in a week.

- ✓ The care provider must be awake for hours to be billed to the CPCS program.
- ✓ CPCS can be used to support adult recipients at college (including out of state colleges) with activities of daily living. It is not intended to be used to provide academic support.
- ✓ CPCS can be used to support recipients in their place of employment with activities of daily living. It is not intended to supplant job coaching.

Under the agency-management option, the policies of the providing agency apply to CPCS workers. These policies may affect ability to transport, maximum weight allowed for lifting, available hours and activities performed.

What Can't CPCS Employees Do?

- ✓ *Delegation of Nursing Activities to Personal Care Attendants:* CPCS attendants are not allowed to perform nursing activities such as tube feeding, suctioning, medication administration, etc., without proper delegations by a nurse or under the supervision of parents.
- ✓ *Behavior Supports:* The Children's Personal Care Services program is administered by the Division of Disability and Aging Services (DDAS). DDAS has adopted guidelines regarding the use of behavior supports. Individuals providing CPCS must adhere to those guidelines. Briefly, employees paid with CPCS funds cannot use corporal punishment or lock a child in a room. Physical restraint is very dangerous for the child and the caregiver. Rules about restraint are in the attached guidelines.
- ✓ *Child Care:* CPCS is intended to address the child's medically necessary extra assistance, not to meet a family's need for age appropriate child care ("baby-sitting").



- ✓ *Respite:* CPCS is not intended to be used for out of home, overnight respite.
- ✓ *2:1 Coverage:* CPCS provides funding for one staff person to work with the child; it does not allow multiple staff to be paid for the same hours worked. CPCS can be bundled with other services to provide 2:1 coverage when necessary, but 2:1 coverage not provided exclusively through the CPCS program.
- ✓ *Supervision of multiple children:* The intent of the program is to provide individualized attention and assistance. CPCS is not intended to be used to supervise multiple individuals. When services are provided in a setting with other people present, the other individuals must not be dependent upon the CPCS worker to provide support, assistance or supervision.
 - This also applies to day care facilities. It is permissible to use Children's Personal Care Services to provide a 1:1 aide in a daycare setting but CPCS workers must not be used as general staff.
- ✓ *School Settings:* CPCS cannot be used in educational settings or during an educational program and is not to supplant school services.
 - CPCS is not intended to be used at a residential school. Tuition for such a program should include staffing to provide for all of the students needs, including those related to personal care. CPCS cannot be used to augment the salary of residential facility staff.
 - CPCS can be used during vacations and on weekend visits home for students of residential schools.
- ✓ *Hourly supplementation of wages:* The CPCS hourly wage is set by Medicaid and cannot be supplemented. To do so is considered Medicaid Fraud.



What Is Medicaid Fraud?

Medicaid fraud is a federal offense. It includes lying about a disability or health condition to get services, overstating the level of need, and filing claims for services not provided in any service paid for by Medicaid.

Medicaid fraud can be committed by either the employer or the employee. If something questionable is observed, it must be reported. Reports can be made directly by calling the Medicaid Fraud and Residential Abuse Unit at 1-802-241-4440. The report will be investigated by specially trained individuals. The process may be uncomfortable, but it is a responsibility of accepting Medicaid services and funds.

See the attached list for examples of Medicaid fraud.

Misuse of the Children's Personal Care Services program, either inadvertent or intentional, is considered Medicaid fraud and may be investigated by the Medicaid Fraud and Residential Abuse Unit Office of the Attorney General.

Medicaid fraud is serious; penalties can include a maximum fine of up to \$1,000.00 or up to an amount equal to twice the amount of assistance, benefits or payments wrongfully obtained or imprisonment for not more than ten years depending on the conduct, or both. If the person convicted is receiving assistance, benefits or payments, these may be reduced to repay the amount falsely claimed.

What Happens When My Child Becomes an Adult?

The Children's Personal Care Services program ends at midnight on the day before the child's 21st birthday.

The Agency of Human Services administers and oversees a number of programs which may be available to children aging out of the Children's Personal Care Services Program.



To assist with the transition process, staff from the appropriate programs will meet quarterly to review the transition process and discuss specific individuals as they begin to transition.

Staff will review file information to determine if an adult service might be an appropriate referral. This review serves only to determine referral, individuals will have to complete the full application process for adult services. There may be some individuals for whom there is not an appropriate referral and some individuals who are not found to be eligible for adult services.

The referrals made by staff do not preclude individuals from applying to other, or multiple, adult service programs. The referral process is simply designed to help identify potential adult options.

How Does DDAS Assure Satisfaction and Quality?

The Division of Disability and Aging Services (DDAS) will conduct periodic reviews of satisfaction and program quality. This information will be used to help improve the program in an on-going manner.

Is My Child's Information Confidential?

As part of the Medicaid application process, individuals (or the parent/guardian) authorize information sharing between service providers, the Office of Vermont Health Access, departments within the Agency of Human Services and physicians in accordance with HIPPA guidelines. Information contained in the Medicaid application, Children's Personal Care Services application and assessment will not be made public

Who Can Perform Assessments?

The Children's Personal Care Services program will accept assessments performed by a variety of qualified assessors including:

- ✓ Registered Nurses
- ✓ Licensed Practical Nurses
- ✓ Qualified Developmental Disability Professional (QDDP)
- ✓ Clinicians including school clinicians
- ✓ Physicians
- ✓ Physicians Assistants
- ✓ Social Workers
- ✓ Public Guardians
- ✓ Family, Infant, Toddler staff
- ✓ Children with Special Health Needs staff
- ✓ Staff of other organizations who have received training

Assessors must have a Children's Personal Care Services specific Medicaid provider number to bill the cost of the assessment.

To obtain a CPCS provider number or with questions about billing, contact Electronic Data Systems (EDS) directly at (802) 878-7871.

Who Do We Call With Questions?

For questions or issues regarding policy or application status or with the payroll agent, contact the Children's Personal Care Services program at 888-268-4860.

For questions or issues regarding Medicaid and Medicaid enrollment, contact the Office of Vermont Health Access through Maximus—the customer service agent—at 800-250-8427.

For questions or to report any issues regarding Medicaid fraud, contact the Medicaid Fraud and Residential Abuse Unit at 802-241-4440.

For questions or issues regarding family managed payroll or to request additional timesheets or enrollment forms, contact ARIS at 800-798-1658.

For families who choose to family-manage this service, they should contact the CPCS program with any questions or requests for assistance. The CPCS assessor does not have a responsibility beyond submitting the application in timely manner.

