FY23 Individual and Family Directed Services
Notice to Providers

• As a contracted provider with Alliance Health, it is your responsibility to be familiar and comply with all federal and state laws, rules and regulations governing the provision of Individual and Family Directed Support services and the processes outlined in the Individual and Family Directed Support Manual.

• Failure to comply with the Manual may constitute a material breach of your Contract with Alliance and could result in sanction or administrative action by Alliance, up to and including termination from the Network.
Notice to Providers

- Manual documents information about Alliance including our purpose, mission, vision, and core values and describes our processes related to participating in the Provider Network including obtaining referrals and authorizations, submitting claims and resolving many issues or problems.

- Your compliance with the requirements of the Manual will assist Alliance in providing you with timely service authorizations and claims reimbursement.

- Providers must also comply with the requirements outlined in Clinical Coverage Policy No: 8-P, NC Innovations.
IFDS Overview

• The NC Innovations waiver offers beneficiaries both agency-directed and beneficiary-directed supports options
  o Beneficiary directed services are known as Individual and Family Directed Services (IFDS)

• Two options for IFDS under the Innovations waiver:
  o Employer of Record
  o Agency With Choice

• At Alliance the orientation to IFDS is done as part of the annual ISP planning process by Care Management
IFDS Overview

The following services can be self-directed:

• Community Living and Supports
• Community Networking
• Individual Goods and Services (in conjunction with at least one other self-directed service)
• Natural Supports Education
• Respite
• Supported Employment
• Supported Living
Agency with Choice (AWC)

• A form of Self-Direction available to individuals on the NC Innovations Waiver

• Managing Employer (member/LRP) screens, interviews, and recommends applicants for hire

• Managing Employer will work with their chosen agency to train and onboard staff, provide supervision and determine continued employment status

• This model affords access to Individual Goods and Services once self-directed services have been billed and are active
Employee of Record (EOR)

• Under the EOR model the Managing Employer and/or their appointed representative is responsible for fulfilling all requirements for managing direct care staff and completing required documentation

• The EOR must select a Fiscal Agent, also referred to as the financial support service (FSS) provider, to partner with the EOR to perform certain functions

• The EOR also receives assistance from a Community Navigator
Financial Supports Agency

• Assists by assuring that services are managed, and funds distributed as required

• Ensures the required paperwork that is submitted to the Internal and State Revenue Services and facilitates the employment of support staff.

• Provides the EOR with an auto-calculator tool to assist the EOR with determining the direct care staff pay rate.

• Alliance has two providers that beneficiaries may choose from for this service, Acumen and GT Independence
Getting Started with EOR

1. Individual/family expresses an interest in Employer of Record

2. Referral to an Alliance contracted Community Navigator for EOR training – three months

3. Referral to Acumen or GT Independence for Financial Support Services (FSS)

4. Upon completion of all needed trainings and documentation (Employer of Record Training Certificate, Assessment and Agreement) EOR goes live

5. The FSS and selected Community Navigator remain in place to support the EOR
Alliance Care Manager Role in IFDS

- Acts as primary contact for the individual or their family
- Completes referrals and ISP updates
- Provides orientation to the Individual and Family
- Family-Directed Supports
- Offers choice of providers
- Assists the individual or LRP to identify a person to act as managing employer and discuss potential need for a representative
Alliance Care Worker Role in IFDS

• Supports engagement in services
• Monitors IFDS service provision including IFDS training
• Completes IFDS assessment
• Assists with the completion of the EOR agreement needed to begin as an Employer of Record
EOR ISP Process

• Care Manager revises the ISP to request community guide services to start training for Individual and Family-Directed Supports

• Care Manager will add a long-range outcome to the ISP to address training needs if the ISP already includes Community Navigator

• Upon receipt of the certificate of completion of EOR training the Care Manager updates the ISP to request Community Navigator, EOR supplies, and Financial Support Services (FSS) as member begins self-direction
EOR ISP Process

• If member is going from provider led services, the ISP update will include services previously authorized and request for new services

• FSS is a required service for individuals who choose the EOR model of Individual and Family Directed supports
  ○ Cost of FSS is paid out of the individual budget as an add-on to that budget

• EOR responsible for development of the short-range goals for self-direction
IFDS Assessment

• Purpose – to determine the EOR/representative’s IFDS competency and to help determine continued support needed to self-direct services

• Assessment is performed by Care Worker staff employed by Alliance
IFDS Assessment Competency Areas

• Role and responsibilities of EOR/representative
• Employment: recruitment, training and termination
• Finance: taxes, insurance, budget and reports
• Contract/service agreements
• Confidentiality/HIPPA
• Documentation and service definitions
IFDS Assessment – What’s Next?

• Following completion of the assessment, the care worker will assist the EOR/representative with completing and submitting the EOR agreement, assessment and EOR training certificate to the provider network department.

• Provider network will review and route to executive leadership for approval prior to the ISP update to implement EOR services.

• Signed copies of the EOR agreement (contract), assessment, and certificate of completion submitted by a member of the care management team to enrollment@alliancehealthplan.org.
IFDS Assessment – What’s Next?

• All documents are forwarded to the responsible provider network member for review
  o Should the submission be incomplete, or corrections are needed, care management will be notified

• Documents are filed and submitted to the CEO for signature via DocuSign and Care Management receives a copy

• Once signed by the CEO, the final Agreement is filed
EOR Accrued Funds

• The FSA will inform EORs of the maximum pay rate available to staff based upon the service rate
  ◦ EORs must set the pay rates for their staff

• Employers of Record accrue funds when the pay rate decided upon for staff is less than the portion of the rate allowed for direct service payment

• These accrued funds may be used for staff expenses or costs outside of the base pay rate
EOR Accrued Funds Limits

• Medicaid funds accrued through the plan year for a participant that has chosen the Employer of Record or Agency with Choice model will be limited as follows:
  o Funds that have not been used by the first of the month that occurs two months after the end of the participant’s plan year will be recovered by Alliance from the agency that performs the financial support functions
  o Bonus payments to employees are limited to $5,000 per employee every 12 months
EOR Accrued Funds Limits

• Communication to affected parties
  o Limits established by this policy are reflected in the NC Innovations Individual and Family Directed Supports Handbook
Employer Supplies

• Employer supplies are supplies that are necessary for the EOR to complete work tasks
• Requests for these items cannot be duplicative
• They include items such as computers, office supplies, and printers
• EOR supplies can be requested anytime throughout the plan year
• An itemized list with the cost of items is required to request supplies
Employer Supplies

• These items should be the most cost-effective items necessary to complete self-directed activities
• EOR supplies are not supplies for the member but specifically for self-directed tasks completion
• All supplies must be requested through the ISP process
• The authorization is for the Financial Support Services agency who will be responsible for obtaining the supplies
Alliance Benefit Plan

- Will be updated effective July 1, 2022
- Use the new Alliance Benefit Plan Tool found at [AllianceHealthPlan.org/services/](AllianceHealthPlan.org/services/)
### Updated Alliance T2041Self Directed Service Matrix (codes not site specific)

<table>
<thead>
<tr>
<th>CODE</th>
<th>RATE</th>
<th>NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>T2041- Community Navigator</td>
<td>$150/month</td>
<td>No change to this code provider would bill this code for members not receiving self-directed services</td>
</tr>
<tr>
<td>T2041 22 Z1- Community Navigator Self Directed Training</td>
<td>Effective 7/1/2022 Alliance Rate shall be as follows for all EOR/AWC providers: $620.00</td>
<td>Training for the Employer of Record Model is typically authorized for three months, while training for the Agency with Choice Model is authorized for two months</td>
</tr>
<tr>
<td>T2041 U1- Community Navigator Self Directed</td>
<td>$150.00/month</td>
<td></td>
</tr>
</tbody>
</table>

**EFFECTIVE 7/1/2022**

- Alliance’s Self Directed service codes will be condensed down to three codes
- All three IFDS codes available to all EOR/AWC providers
- No Provider Application Requests required