

# Self-Directions Basics

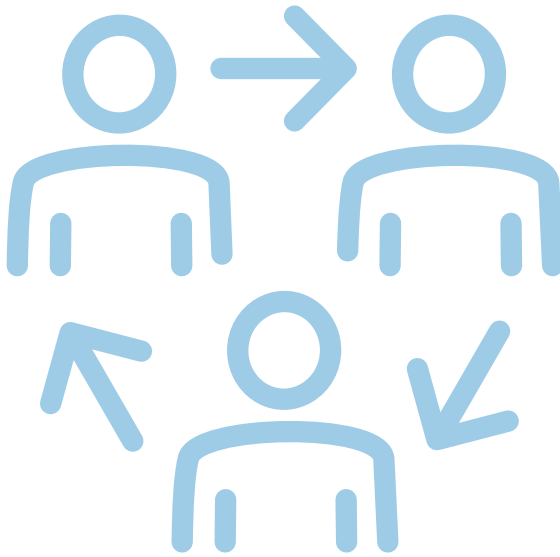
**An introduction to  
self-direction to support  
individuals and families.**

Content created by:



**WasatchSD**

Part of the AssuranceSD Family



For many individuals and families, the idea of self-direction is exciting. Who doesn't want more power and control over their services and supports? It is important to understand what it means to self-direct and the support available to you on your journey. None of us intuitively knows how to self-direct.

The goal of this Self-Direction Guide is to provide you with the basics. It gives an overview of self-direction, the people available to support you when you choose to self-direct, and some of the rules of the road that help you to stay on course.

What you will find included:

- Understanding Self-Direction
- Principles of Self-Determination
- History of Self-Direction
- Community Connections
- The Role of the FMS Provider
- Your Role as an Employer
- Steps for Hiring a New Employee
- Overtime Guidelines
- Fraud, Waste and Abuse
- How to Report Suspected Medicare or Medicaid Fraud
- Accident/Incident Procedure
- Your Partner for Success





# Understanding Self-Direction

## *What is Self-Direction?*

Self-direction is a service model that helps people, no matter their age or disability, stay independent at home and in their communities. In self-direction, you decide how, when, and who provides your services and supports. It's not like traditional agency services because you get to hire your own workers.

The focus is on giving you, the program participant, the choice, control, and flexibility that best fits your life. Over a million Americans currently use self-direction, and it's often funded by Medicaid.

## *Why Choose Self-Direction?*

At its core, self-direction is based on the belief that people with disabilities know their needs best and are in the best position to plan and manage their services. Self-direction promotes personal choice and control over the delivery of services. People who are selfdirecting often choose to hire family members and friends to provide their services.

## RESPONSIBILITIES OF THE PERSON CHOOSING SELF-DIRECTION

The individual choosing self-direction has responsibilities focused on the worker(s) they choose to hire. They are responsible for hiring, training (if needed), scheduling and managing those working for them.

## HOW TO GET STARTED

The first step is to find out if self-direction is offered in your state and what programs are offered. A great place to start is on your state's Department of Human Services website. Once you know which programs provide the option for you to self-direct, you can inquire about your eligibility for these services.



## *Key Support Roles and Responsibilities*

There are a number of individuals and organizations that are involved when self-direction is chosen, ensuring the individual has the needed support. The roles and names often vary by state and program, but there are typically two key roles.

### **FINANCIAL ADMINISTRATIVE MANAGEMENT**

Often called a Fiscal Intermediary, Fiscal Agent or Financial Management Service. The Fiscal Agent is responsible for paying the workers and vendors who are chosen by the person who is self-directing. The Fiscal Agent assists the workers and vendors in completing the necessary paperwork, issuing payments, and filing state, local, and federal taxes.

### **INFORMATION AND ASSISTANCE**

Often called Support Broker, Support Coordinator or Case Worker. This person works with the individual who is self-directing. They will often assist with program eligibility, developing a Service Plan, identifying providers, and assisting with other duties of a self-directed employer. They will check in with the individual self-directing on a regular basis to ensure they are healthy and safe.





# Principles of Self-Determination

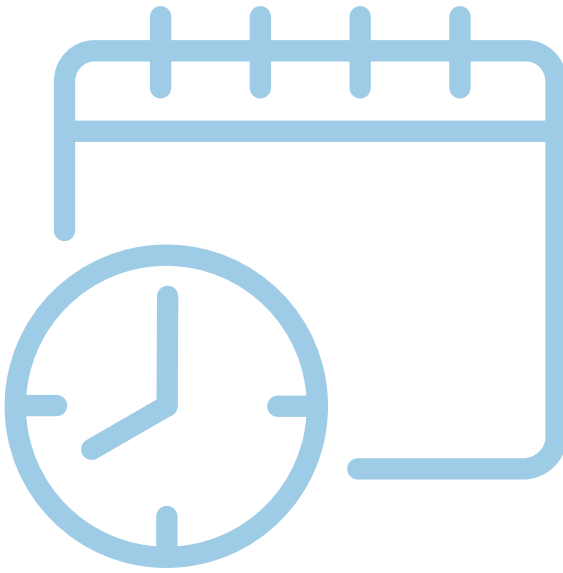
**FREEDOM** – to decide how to live your life.

**AUTHORITY** – over available resources including people and a specified budget. This authority looks different for each individual and the program from which the person receives services. Many programs provide limited budget authority and may provide a specific amount of service with limited ability to make change without the approval of the entity.

**SUPPORT** – to organize resources in ways that are life-enhancing and meaningful to the individual. The level of support around a person is dependent on the outcomes, needs, and desires of the individual.

**RESPONSIBILITY** – for the wise use of public dollars and recognition of the contribution individuals with disabilities can make in their communities. This includes managing a monthly/annual budget/allocation/authorization and ensuring an individual is not overspending or utilizing more service than they were authorized.

**CONFIRMATION** – of the important role that self-advocates play in a redesigned system. Systems cannot do the work of system change without partnership with self-advocates.



## History of Self-Direction

Beginning in the 1990s, a number of states began to offer “consumer-directed” personal care services under section 1905(a)(24) of the Social Security Act. The Robert Wood Johnson Foundation followed by awarding grants for Self-Determination demonstrations in 19 states from 1997 to 2001; they later implemented the Cash and Counseling demonstration and evaluation in three states (Arizona, Florida, and New Jersey) and replicated it in 12 additional states from 1996 to 2013.

Following these projects, self-direction emerged as an important option for the delivery of Medicare funded Home and Community Based Services (HCBS). Since then, there have been a number of federal and privately funded initiatives that have advanced the development and implementation of self-directed service options nationally.

## SELF-DIRECTION FAST FACTS

- ④ Medicaid is the primary funding source for self-directed services. Each of the Medicaid HCBS authorities has differences in what is allowed in a self-directed services program.
- ④ Every state and the District of Columbia has implemented at least one Medicaid waiver program or state plan option with a self-directed option, with most states offering self-directed services statewide.
- ④ In 2023 it was reported that there are 1,520,260 people nationwide who were self-directing their services. This is a 23.16% increase since the data was last collected in 2019.

### *The Benefits to Individuals & Families*

**Provides the opportunity to customize** services to meet a person's goals, desires, and support needs.

**Provides choice and control** over the services received, including recruitment, work schedules, service delivery, wages, benefits, training, and discharge (when necessary).

**Provides the opportunity to hire relatives** with options to hire legally responsible individuals (e.g., spouse or parent of a minor child) when permitted by the state, for services identified in a person-centered service plan. This can often result in better, more consistent care by people with whom the individual is most comfortable.

### *The Benefits to Direct Care Workers*

**Provides options to work for individuals of their choice**, such as a relative or friend who needs supports.

**Creates the opportunity to develop close personal relationships** with the individual they are caring for.



## Community Connections

Communities are more vibrant when people are involved and connected. Thriving communities need the gifts and talents of all of their members. Assets and strengths, not deficits and needs, are the true building blocks of healthy communities. Every individual has assets that can contribute to community well-being and justice. Being connected in a community fosters a sense of belonging and gives individuals a sense of purpose. Having people with disabilities connected in the community helps our communities to become more diverse and inclusive.

### *The benefits are significant for individuals with disabilities*

#### COMMUNITY CONNECTION PROVIDES:

- Opportunities to learn, work, and play alongside everyone else.
- Practical life skills that lead to enhanced independence.
- A path to recovery for those who feel isolated and unwanted.
- Access to activities and services not available in segregated environments.



- The chance to engage with others and the satisfaction of being part of a diverse community.
- The opportunity to improve physical health, emotional well-being, and self-confidence.

### BUILDING AND ENHANCING COMMUNITY CONNECTIONS INCLUDES:

- ✓ Identifying interests and passions, gifts, and talents – gifts of the hands, heart, head, and human connections
- ✓ Identifying places to share gifts and talents

# The Role of the FMS Provider

The FMS role is to support individuals in managing their services without handling payroll. Self advocates and families have control through hiring, training, supervising, and, if necessary, terminating their own staff.

WasatchSD provides FMS for EPAS and all Utah waiver programs including:

- Acquired Brain Injury Waiver (ABI)
- Aging Waiver
- Community Supports Waiver
- Community Transitions Waiver
- Limited Supports Waiver
- Medically Complex Children’s Waiver
- New Choices Waiver
- Physical Disabilities Waiver
- Technology Dependent Waiver

These self-directed programs offer choice and control, and provide individuals with the ability to decide.



# Your Role as an Employer

## *Recruiting, Interviewing, and Selecting Staff*

Before recruiting a worker, it is important to consider what tasks need to be performed. As well as the knowledge or skills a person needs to have. Also consider your schedule. When do you want care? Finding the right worker can take time and patience. Even when you are fully staffed, it is important to plan for unexpected situations. These may include a worker quitting or being ill. Resources and tools for recruiting are available. This includes a pool of already employed workers.

## *Hiring*

We will work with you to get your workers hired and started. This process includes completing paperwork and submitting documentation. It also includes completing State and Federal background checks. It is important to understand the hiring process. In particular, you cannot tell your worker that they can start working until your FMS has told you that they have been approved. You may also want to develop an agreement with your worker. This would include their schedule and specific expectations you may have.

## *Training*

Providing care is very personal to each individual. This is why training is often a task done by you, the self-directing Employer. Some states/programs may want caregivers to have specific training like CPR and First Aid certification. The focus is on your care preferences. This includes teaching the worker about your routines and lifestyle. You should also provide a detailed orientation of your home. Include a review of any equipment and medical devices used.

## *Managing/Supervising Staff*

Providing feedback to your workers about their performance is important. This feedback helps build a healthy working relationship. It can be difficult to give feedback to workers you may be close to, such as a family member or friend. Having a schedule for feedback can ease anxiety and ensure a safe place to discuss issues or concerns. Providing feedback is also a good way to make sure that workers are thanked and praised for their work. If performance issues arise, be sure to address them. Discuss the problems and agree to improvement plans. It is also good to take some notes about the conversation. You may need to refer to them later if you have continued concerns.



## *Termination*

There will be times when you decide that the supports a worker provides are no longer meeting your needs. You may choose to end a worker's employment. When doing so, it is important to communicate calmly and directly. Be clear about the issues that have arisen and make it clear you no longer want the person to work for you. It is also important to communicate to the FMS/Care Team immediately about the termination/dismissal. There may be documentation that the FMS requires.

## *Following Employment Laws and Program Rules*

It is important that you understand employment laws. You may have a friend or relative who can provide you with support with these laws. Your FMS provider can also assist. Most common are issues about wages. This includes minimum wage, limits on work hours, and overtime. The other area of importance is the Federal laws that prohibit discrimination. You cannot discriminate because of the person's race, color, religion, sex, national origin, age, or disability. Sex includes gender identity, sexual orientation, and pregnancy.



## Fraud, Waste and Abuse

It is important to know that research done by Applied Self-Direction indicates that, contrary to often-held beliefs, there is not a high prevalence of fraud in self-directed programs. In fact, it is estimated that the rate is as low as .02% and there are very few fraud convictions. Most of the concerns that arise in self-directed programs are due to a lack of understanding and/or confusion about how the programs work. By and large, people utilizing self-directed programs are strong stewards of the public dollars they receive.

### WHAT IS FRAUD AND ABUSE?

- ✓ Fraud is an intentional deception or misrepresentation to take money from Medicaid long-term care programs. It is important to remember that this is an intentional act.
- ✓ Abuse is committed when providers, caregivers, or vendors perform actions that directly or indirectly result in unnecessary costs to the program.

*The most common types of fraud and abuse***BILLING FOR SERVICES THAT WERE NOT PROVIDED**

This can most often occur when a person may be scheduled to receive a service and be unable to attend and then the provider continues to bill for the service even though the person did not receive it.

**BILLING FOR HOURS/TIME NOT WORKED**

This can occur when a direct care worker may be scheduled, not show up for the shift, and then indicate on their timesheet/invoice that they worked the scheduled shift.

**SERVICES PROVIDED DURING INSTITUTIONAL STAYS**

In most situations, long-term care services cannot be billed when a person is in a hospital, nursing home, or some other institutional setting. Direct care staff cannot be paid for care they may provide in an institutional setting or for work they may do to maintain the home while the person is in an institutional setting.



### FALSIFYING SIGNATURES AND/OR HOURS ON A TIMESHEET OR INVOICE. THIS CAN OCCUR IN SEVERAL WAYS.

1. If a direct care staff person fills out a timesheet or invoice, signs it, and also signs for the person for whom they provide care
2. If the direct care worker submits their time to the person for whom they provide care and then after that individual signs the timesheet/invoice, the direct care worker adds hours to the timesheet/invoice.
3. If the program participant terminates a direct care worker and does not inform the FEA and the worker continues to submit hours and signs for both parties.

### DOUBLE BILLING

This most often occurs when a direct care staff submits hours for the same time and day for two different program participants who do not live in the same location.

### KICKBACKS

The two primary situations that can occur are a program participant who hires a direct care worker and asks the worker to give them a percentage or set amount from their check or if a provider/vendor negotiates to provide services for a program participant with the agreement that the program participant receives a portion of their reimbursement.

# How to Report Suspected Medicare or Medicaid Fraud

Call: 1-800-MEDICARE (1-800-633-4227)

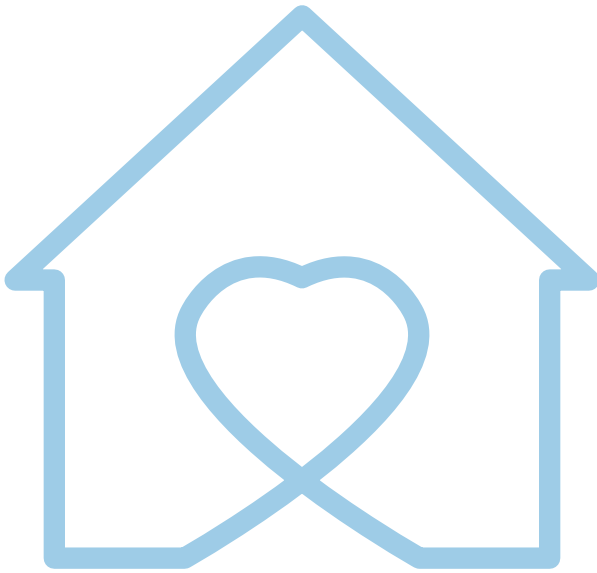
Report online to the Office of the Inspector General

Call the Office of the Inspector General at:

1-800-HHS-TIPS (1-800-447-8477) or TTY at 1-800-377-4950

*Before reporting, have the following information:*

- Provider's name and any ID number
- Service or item in question
- Date the service/item was provided
- Payment amount approved by Medicare
- Date on your Medicare Summary Notice (MSN)
- Your name and Medicare number
- Reason you believe Medicare should not have paid for the service/item



# Steps for Hiring a New Employee

Each prospective employee must complete specific requirements before they can begin work. Employees cannot start work until all paperwork is completed and a start date is provided.

- Contact WasatchSD to let them know that you are ready to hire a new employee.
- Have the employee complete the required paperwork, background screenings, and any additional requirements.
- Submit all required items to WasatchSD.
- Do not have the employee begin working until a start date is provided by WasatchSD. Keep in mind that many programs may require direct supervision of the employee until the background check is approved.



## Overtime Guidelines

Overtime rules vary by program. Please check with your program before having your employees work more than 40 hours in a week - Sunday-Saturday.



# Accident/Incident Procedure

## *Reporting Accident/Incident or concerns*

- Contact your Support Coordinator about any incidents or concerns.
- All employees are covered by Workers Compensation.
- If an incident is related to a potential Workers Compensation claim, contact WasatchSD as soon as possible after the incident to start the required paperwork.



## Your Partner for Success

At WasatchSD, our goal is to provide the support you need to successfully navigate your best life. For the best experience, always remember to follow program guidelines, submit accurate information, and stay within your service plan authorization or assessment.

*Contact WasatchSD for the following. All other questions or concerns should be directed to your Support Coordinator:*

- Enrollment
- Onboarding new staff
- Billing
- Payroll
- EVV

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