

Consumer Directed Personal Assistance Program (CDPAP)

Presented by:

Center for Disability Rights

Consumer Directed Personal Assistance Association of New York State

New York Association on Independent Living

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Who we are

Center for Disability Rights (CDR)

CDR is the largest Independent Living Center (ILC) in the State. Headquartered in Rochester, with satellite offices in Corning and Geneva, as well as a policy office in Albany, CDR represents the concerns of thousands of people with disabilities. CDR has operated as a Fiscal Intermediary in CDPAP since 1999 and serves eleven counties in Western New York.

Consumer Directed Personal Assistance Association (CDPAANYS)

CDPAANYS is the only association whose sole mission is to represent the interests of and educate people about CDPAP. Provider membership in the Association is based on a fiscal intermediary's adherence to the principles that are the basis of the Program. Currently, the organization represents fiscal intermediaries that work with over 5,000 consumers across the state. These consumers employ approximately 9,000 personal assistants.

New York Association on Independent Living (NYAIL)

NYAIL is a statewide association of ILCs dedicated to removing barriers to full community integration and safeguarding the civil rights of people with disabilities of all ages. ILCs are disability-led, cross-disability, local not-for-profit organizations that provide community-based services and supports. Nearly 40% of the Fiscal Intermediaries in NYS are ILCs.

What is CDPAP?

- CDPAP provides personal care and home health services for assistance with **Activities of Daily Living**, such as bathing and dressing, as well as **health-related tasks**, such as catheterization.
- CDPAP is not a traditional home care program.

CDPAP by the numbers

- CDPAP is, on average, **\$2.16/hr less expensive** than traditional personal care. The savings grow when compared to other models of long term care, in particular Certified Home Health and Private Duty Nursing.
- 10,285 consumers: 3,085 NYC; 7,200 rest of State (2010 figures)
- Approx. 35 FIs providing services to consumers across the State
 - Note: There are also several FIs in Westchester County that have a contract but do not provide any services.
- Three counties do not have a FI providing CDPAP services

Self-direction in Other States

- Case study: Texas
 - Requirement that Consumer Directed Services be offered first
- 298 Medicaid or state-funded participant-directed programs operating in the U.S., with approximately 810,000 individuals enrolled across those programs

National Resource Center for Participant-Directed Services, 2011 Annual Report

- National average: 22 people per 1,000 adults with disabilities enrolled in a participant-directed program

A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers. Produced by AARP, Commonwealth Fund, and the SCAN Foundation, September 2011.

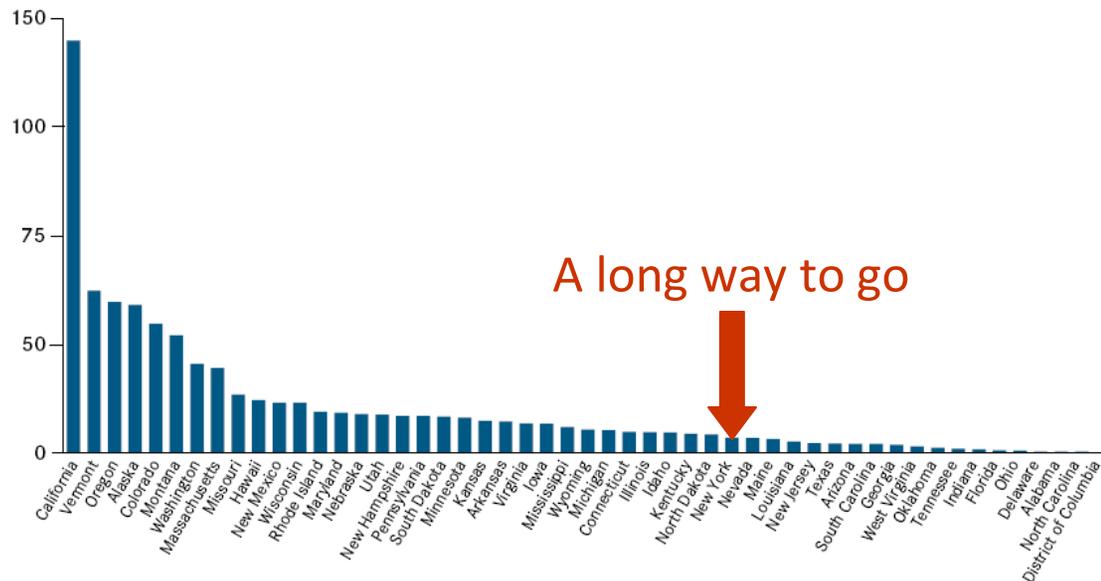
Nat'l Rate of Consumer Direction per 1000

CHOICE

Exhibit 12

State Rates of Consumer Direction of Services for Adults with Disabilities

Number of people receiving consumer-directed services per 1,000 adults age 18+ with disabilities



Data: The SCAN Foundation, Financial Management Services in Participant Direction Programs, 2011; 2009 American Community Survey.
Source: State Long-Term Services and Supports Scorecard, 2011.

Standards

- 18 NYCRR §505.28
- NYSDOH GIS and ADM (dating 1995 to present)
- Fair Hearing decisions (dating 1995 to present)

Best practices/research available upon request

Why do people enroll in CDPAP?

- Independence
- Control
- Dissatisfaction with other models
- Lack of services, particularly in rural communities
- Supports cultural/language needs
- Social component
- Ability to use paid family caregivers

Who is eligible?

Must be:

- Medicaid eligible
- Self-directing OR have a Designated Representative
- Require personal care, home care, or skilled nursing services

Self-directing

- What does it mean to be self-directing
 - Capable of understanding the impact of decisions
 - Capable of training and supervising care
- What is NOT a part of self-directing
 - Making decisions that are “right” based on the assessor’s perspective
 - Setting a time and schedule based on the perspective of the assessor

Important Terms

- **Fiscal Intermediary (FI)** – An entity with a contract to provide support functions, such as wage and benefit processing.
- **Personal Assistant** – The consumer's worker.
 - May be a family member, except for a spouse or parent.
 - FI and Social Services Districts are prohibited from being involved in consumers' decisions regarding recruitment and hiring.

Important Terms (cont.)

- **Designated Representative (DR)** – An adult to whom a consumer has delegated his or her responsibilities under the Program.
 - Can be a parent, spouse, or any other responsible adult surrogate who is willing to fulfill the role.
 - Can NOT be the personal assistant or a Fiscal Intermediary's employee, agent, or affiliated individual.

CDPAP Framework: Liability protections by design

**Each entity must not assume the
roles or responsibilities of the other.**



Responsibilities

Fiscal Intermediary

- Support functions (e.g. processing payroll; maintaining personnel records of each assistant)
- Monitoring the consumer's continuing ability to comply with the consumer's responsibilities
- FIs are NOT responsible for fulfilling responsibilities of the consumer
- Due to the structure of the model, FIs will provide a layer of liability protection for the Plans

Responsibilities

Consumer (or Designated Representative)

- Supervisory and management responsibilities (e.g. recruiting, hiring, training, scheduling, dismissing)
- Notifying the Fiscal Intermediaries of changes in the employment status of assistant
- Attesting to the accuracy of time sheets

Responsibilities

Social Services District

- Assessment and authorization
- Contracting with FIs to provide support functions
- Discontinuing the consumer's participation in CDPAP, after timely and adequate notice, and making referrals to other services that the consumer may require when it is determined the consumer can no longer fulfill his responsibilities

Systems to Minimize Fraud

Case Study: CDR

- Shared timesheets (per consumer) that promote peer monitoring
- Attestations signed by consumers and personal assistants to facilitate conviction for identified fraud
- Timesheet review and follow-up by FI
- Verification statement mailed to consumers and personal assistants



**Benefits of CDPAP:
Peer reviewed research**

CDPAP helps individuals maintain health

“Cash & Counseling [Consumer Directed] participants in all age groups in all three states were no more likely to suffer any care-related health problems than those receiving traditional agency services. In some cases, Cash & Counseling enrollees demonstrated a reduced risk of experiencing health problems, such as urinary tract infections, and adverse events, such as falls. In almost one-third of the comparisons made for the separate age groups in each state on 11 different health-related measures, Cash & Counseling participants were significantly less likely to experience health problems than those receiving traditional services.”

Choosing Independence: A summary of the Cash and Counseling Model of Self-Directed Personal Assistance Services. Robert Wood Johnson Foundation, 2007.

CDPAP resolves workforce shortages

“Over the past several decades, self-direction has proven to be increasingly popular. It can help address workforce shortages, as many people choose to hire family members or other individuals they already know who would not otherwise be in this occupation.”

Raising Expectations: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers. Produced by AARP, Commonwealth Fund, and the SCAN Foundation. Susan C. Reinhard, Enid Kassner, Ari Houser, and Robert Mollica, September 2011.

CDPAP reduces unmet needs

“Cash & Counseling participants were far less likely to report unmet needs for personal assistance services than those enrolled in the control group. Cash & Counseling reduced the percentage of people reporting unmet needs by 10 to 40 percent in each of the three states, and significantly increased the percentage of consumers receiving services in Arkansas and New Jersey.”

Choosing Independence: A summary of the Cash and Counseling Model of Self-Directed Personal Assistance Services. Robert Wood Johnson Foundation, 2007.

The risks of not reducing unmet needs

- Significantly greater probability of adverse consequences
- Secondary conditions, such as falls and injuries due to falls, bedsores, and contractures at a significantly higher rate
- Ten times as likely to go hungry, twenty times as likely to miss a meal and five times as likely to lose weight unintentionally
- Greater incidence of nursing home care

LaPlante, M., et al. "Unmet need for personal assistance services: Estimating the shortfall in hours of help and adverse conditions." *Journal of Gerontology: Social Sciences*. 2004, Vol. 59B(2), S98-S108.

Doty, P., et al. "New state strategies to meet long-term care needs." *Health Affairs*. 29(1), 2010. Pp. 49-56.

CDPAP allows individuals to hire workers who meet their needs culturally and linguistically

“...they [personal assistants] report receiving considerable on-the-job, client specific training...The average [personal assistant] may be better trained to work with a given recipient and may acquire skills better tailored to the needs of the client.”

Benjamin, A.E., et al. “Comparing consumer-directed and agency models for providing supportive services at home.” *Health Services Research*. 35(1), Part II (April, 2000). 351-66.



THANK YOU

POTENTIAL FUTURE DISCUSSIONS

Social Model

Liability

Contract Language

Contact Information

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