

# Self Determination Waiver Program (SDWP) Worker Training



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## **Agenda**

- \* Overview of the Self Determination Waiver Program (SDWP) and self-direction
- \* The roles and responsibilities within the program and Consumer Direct Tennessee (CDTN)
- Supporting children and adults with intellectual disabilities and children under age six with developmental delay
- Self-Direction of Healthcare Tasks
- Universal precautions and bloodborne pathogens
- Reporting Requirements













#### **SDWP Overview**

Consistent with the special terms and conditions for the State's approved 1115 demonstration and the June 2015 guidance issued by the U.S. Centers for Medicare & Medicaid Services (CMS), Tennessee utilizes tiered standards in its Home- and Community-Based Services (HCBS) programs, working to ensure minimum compliance across settings in its Section 1915(c) waivers while closing all new enrollment into these waivers and directing all new HCBS enrollment into the Employment and Community First CHOICES program.



#### **SDWP Overview**

The Tennessee Self-Determination Waiver remains available to Tennessee residents in the target population already enrolled in the waiver who:

- Meet TennCare ICF/IID level of care criteria and financial eligibility criteria and have a pre-admission evaluation approved by TennCare
- Have been assessed and found to have an intellectual disability manifested before age
   18 or have a developmental disability
- \* Do not require residential waiver services and have an established residence



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#### **Self Direction**

- Participants enrolled in the SDWP can choose self direction
- The Self-Determination Waiver does not include residential services such as supported living except for Semi-Independent Living services
- SDWP offers three service options:
  - Personal Assistance
  - Transportation
  - \* Respite -- including daily, hourly, and Federal Medical Assistance Percentage (FMAP)



#### **Personal Assistance**

- \* Designed to assist and individual with a disability to perform daily activities of living
- \* May be provided outside of the home if the outcomes are consistent with member's PCSP
- Services that are covered include the following:
  - \* Eating, toileting, personal hygiene and grooming
  - \* Training to individuals who choose to learn how to provide some of the services



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# **Transportation**

- . Helps the member get around the community
- Allow members to engage in typical day-to-day, non-medical activities
- When possible, family, neighbors, co-workers, carpools, or friends are utilized to provide this assistance without charge



# Respite

- Offered as needed for caregiver relief
- \* Only applies for routine family or other caregivers that are not paid to support the member
- \* Can be up to 216 hours per member per calendar year



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## **DDA Case Manager**

- Meeting with the member to identify needs
- \* Educating the member on SDWP
- Working with the member to develop a Person-Centered Support Plan (PCSP)
- Completing the Risk Assessment and Risk Agreement
- \* Ensuring the consumer direction backup plan meets the member's needs



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## **DDA Case Manager**

- Authorizing individual budgeted services
- Monitoring service provision for quality and appropriateness
- Receiving and reviewing all reports submitted by Consumer Direct Tennessee (CDTN) and the Supports Broker
- \* Maintaining monthly phone contact and completing face-to-face home visits
- \* Assisting members and representatives in understanding individual services
- Ensuring the PCSP stays up-to-date



# **Supports Broker**

- Assigned by CDTN
- Provides training and support to members and representatives on:
  - Understanding the program
  - Fulfilling the responsibilities of being an employer
  - \* Scheduling, training, and supervising consumer directed workers
  - Aiding in developing the initial backup plan



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# **Supports Broker**

- Provides training and support on (continued)
  - \* Annual fraud, waste and abuse prevention, identification, and reporting training
  - · Reportable events reporting training
  - \* Electronic Visit Verification (EVV) and the CareAttend app
- Processes all member and worker paperwork
- Tracks First Aid and CPR certifications



## **Consumer Direct Tennessee (CDTN)**

- Provides training and support to workers
- Serves as the Fiscal Management Agent
- Pays workers on behalf of the program members
- Withholds and deposits taxes and files tax and labor reports
- \* Ensuring the consumer direction backup plan meets the member's needs
- Provides regular reporting on authorized units
- Responds to questions from members, representatives and workers



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# **Consumer Direct Tennessee (CDTN)**

\* The CDTN website is available to assist with many other questions and concerns at:

# www.ConsumerDirectTN.com



#### **Member**

- \* Finding, interviewing, hiring and firing workers
- Determining worker duties and developing job descriptions
- Training workers to provide personalized support
- Scheduling and supervising workers
- \* Ensuring there are enough workers hired to provide necessary support
- . Ensuring the worker enters time, and approving the hours submitted



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#### **Member**

- \* Ensuring that no worker provides more that 40 hours of support per week
- Managing services
- Evaluating worker performance
- Setting wages
- \* Reviewing and ensuring proper documentation for services provided
- Developing and implementing the backup plan





# **Dignity of Choice**

- The right of a person to make an informed decision to engage in experiences which are necessary for personal growth
- The occurrence and reporting of a Reportable Event does not necessarily mean that anyone should have done something differently to prevent the Reportable Event
- SDWP is designed to encourage members to pursue and achieve their goals, which can mean taking informed, reasonable risks



## Reporting

- As a worker in a TennCare program, you are required to report any instances of Medicaid fraud and abuse, as well as the abuse, neglect, or exploitation of a member
- \* Reportable events are separated into Tier One and Tier Two events, with other events that also need to be reported.
- Any reportable event needs to be reported via a Reportable Event Form (REF) on the DDA website to CDTN within four hours.



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#### **Tier One Events**

Tier One events include:

- Alleged emotional or psychological abuse when medical intervention or treatment is necessary
- Alleged exploitation exceeding \$1000
- Alleged neglect which requires medical intervention or treatment and all neglect that is potentially felonious in nature when there is not an injury



#### **Tier One Events**

Tier One events include:

- \* Alleged physical abuse when medical intervention or treatment is necessary
- Alleged sexual abuse
  - Excluding when an exception is granted by DDA, members are required to immediately remove a worker or volunteer alleged to have acted in a manner consistent with physical or sexual abuse until DDA has completed their investigation



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#### **Tier One Events**

Tier One events include:

- Unexpected or unexplained death of the member
- Serious injury of an unknown cause
- Suspicious injury in which abuse or neglect is suspected and requires medical intervention or treatment

If the member you are caring for is at immediate risk, please dial 911



# **Reporting Tier One Events**

Tier One Reportable Events must be reported no later than four hours after the occurrence or discovery of the event and be reported to DIDD's Abuse Hotline (1-888-633-1313), Adult Protective Services (APS), Department of Children's Services (DCS) or law enforcement as required by law. Report the event to CDTN, the Supports Broker, or online to DDA using the REF Submission Link



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# **Reporting Tier One Events**

If a Tier One Reportable Event, or any other event, poses an immediate threat to the health and safety of a member, workers are required to remain with the member until the threat is removed or the member receives needed medical treatment, if appropriate.

All abuse, neglect, and exploitation events also must be reported to Adult Protective Services (APS) or the Department of Children's Services (DCS) within four hours.



# **APS and DCS Reporting**

To contact Adult or Child Protective Services regarding an event, use their toll-free number:

1-888-277-8366 for APS, or 1-877-237-0004 for DCS

Additionally, local offices can be reached with these phone numbers

- \* Knoxville 1-865-594-5685 for APS, or 1-865-329-8879 for DCS
- \* Chattanooga 1-423-634-6624 for APS, or 1-423-296-1234 for DCS
- Nashville 1-615-532-3491 for APS, or 1-615-360-4320 for DCS
- \* Memphis 1-901-320-7220 for APS, or 1-901-578-4001 for DCS



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# **APS and DCS Reporting**

Callers will need to provide:

- Name of the member
- Address
- Age
- Phone Number
- Specifics of the reportable event



#### **Tier Two Events**

- \* Must be reported to DDA investigation within one business day
- \* Report the event to CDTN, the Supports Broker, or online to DDA using the REF Submission Link



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#### **Tier Two Events**

Tier Two events include:

- Alleged emotional or psychological abuse when no medical intervention or treatment is necessary, crisis intervention is not required, and the member is not at continued risk
- Alleged exploitation valued between \$250 and \$1000
- Alleged neglect when no medical intervention or treatment is necessary, and the member is not at continued risk of serious harm



#### **Tier Two Events**

Tier Two events include:

- Alleged physical abuse when no medical intervention or treatment is necessary, and the member is not at continued risk of serious harm
  - CDTN, after seeking the member's preference, shall determine at their discretion and in accordance with their policy whether to remove a worker or volunteer named in a Tier Two reportable event from any or all direct support until DDA has completed their investigation



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## **Tier Two Events**

Tier Two events include:

 Suspicious injury in which abuse or neglect is suspected but does not require medical treatment or intervention.



# **Other Reportable Events**

- Additional reportable events and interventions, which are not related to abuse, neglect, or exploitation, should also be reported using the REF
- Report the event to CDTN, the Supports Broker, or online to DDA using the REF Submission Link



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# **Other Reportable Events**

Other reportable events include:

- \* Administration of routine psychotropic medication without consent
- Emergency situations including fire, flooding and serious property damage that result in harm or risk of harm to the member
- · Fall with injury minor or major
- Medication variance or omission
- The member goes missing for greater than one hour



## **Other Reportable Events**

Other reportable events include:

- \* Failure to implement emergency backup plans
- Unsafe environment
- Vehicle accident minor or serious
- Victim of fire
- Required use of a behavior safety intervention or restrictive behavioral procedure that is not captured as an appropriate response in the PCSP



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# **Reporting Requirements**

- \* CDTN must immediately report all instances of suspected abuse, neglect, and exploitation
- All reportable events occurring during the provision of HCBS services by a CDTN employee must be reported following REF reporting guidelines and copied to the member within the required timeframe



#### **Reporting Requirements**

- \* If a representative is alleged to have committed abuse, neglect, or exploitation:
  - They are removed from representative capacity during the investigation
  - During the removal, participation in the program is suspended unless another representative can be identified within five days
  - If the allegations are unsubstantiated, participation will be reinstated
  - If the allegations are substantiated, CDTN and DDA will work with the person to identify



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## **Abuse, Neglect, and Exploitation**

Abuse is defined as, "The knowing infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish"

Some examples of abuse may be:

- The member is over-medicated or over-sedated
- \* A worker hits the member
- \* A worker yells at a member to hurry up or do things differently



#### **Abuse, Neglect, and Exploitation**

Neglect is defined as, "A failure to provide goods or services necessary to avoid physical harm, mental anguish, or mental illness, which results in injury or probable risk of serious harm." Some examples of neglect may be:

- \* The member becomes dehydrated because a worker is not tending to their basic needs
- \* A worker does not keep the member's personal dwelling free from hazards
- A worker leaves a member with balance problems alone in the bathroom



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# **Abuse, Neglect, and Exploitation**

Exploitation is defined as, "The deliberate misplacement, misappropriation, or wrongful, temporary, or permanent use of belongings or money with or without consent."

Some examples of exploitation may be:

- \* A worker reads or withholds the member's mail
- A worker has the member make purchases for them and does not repay the member
- A worker uses their relationship with the member to manipulate items from them, including jewelry, money, or other valuable personal belongings



## Fraud, Waste and Abuse of Medicaid Funds

There are different types of misuse of Medicaid funds that you should be aware of:

- \* Fraud is using Medicaid funds to pay for something that is not allowed on purpose
- \* Waste is overusing, underusing, or misusing funds without knowing
- Abuse is behavior that results in Medicaid funds being used incorrectly or unnecessarily

The main difference between fraud and abuse is intent. There can be consequences, even if it was not done on purpose, including fines, disenrollment from the program, or jail.



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# Fraud, Waste and Abuse of Medicaid Funds

Fraud by a worker includes, but is not limited to:

- . Being paid for care that the employee did not or is not allowed to provide
- Misrepresenting the hours worked/falsifying timesheets
- Using someone else's identity to work
- Helping someone else commit fraud



## Fraud, Waste and Abuse of Medicaid Funds

Fraud by a member includes, but is not limited to:

- \* Allowing a worker to clock in and clock out for work without providing care
- Asking a worker to provide support or services to family members, or perform duties not outlined in the plan of care
- \* Receiving more units or hours of service than needed
- Approving worker time with the member is hospitalized or in a skilled nursing facility



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# Fraud, Waste and Abuse of Medicaid Funds

All program members, representatives, family members, workers, Supports Brokers, and Nurse Care Managers/DDA Case Managers are responsible for reporting Medicaid fraud, waste, and abuse.

If you learn about fraud being committed you can report it to CDTN, the Supports Broker, or online.



# Fraud, Waste and Abuse of Medicaid Funds

To report fraud and abuse online:

- · Go to www.tn.gov/finance/fa-oig
- Click on "Report Fraud" on the left hand side of the page

You can also call the following numbers to report fraud or abuse:

- \* Office of the Inspector General (OIG) 1-800-433-3982
- \* Tennessee Bureau of Investigation (TBI) 1-800-433-5454



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