

Reference: ARM 37.40.1005, 37.40.1106, 37.40.1107, 37.40.1008, 37.40.1016, and 37.40.1023

PURPOSE This policy outlines the provider agency responsibility to provide the appropriate staff and services to ensure quality services are provided through the Self Directed (SD) Community First Choice/Personal Assistance Services (CFC/PAS) program.

In the SD CFC/PAS, the member assumes responsibility for many aspects of the program. The provider agency assumes the responsibility of program oversight, including oversight of the member's participation in the program to ensure that member is directing their services within the parameters of the program. The provider agency must provide appropriate staff to meet the oversight and person-centered planning requirements of the program. Staff members performing these functions must meet minimum qualifications.

STAFF POSITIONS QUALIFICATIONS

Program Oversight Staff:

SD CFC/PAS providers must employ a staff member to perform the duties outlined in the "Oversight Responsibilities-Program Oversight Staff" numbers 1-11 below. This person is referred to as the Program Oversight staff member. The Program Oversight staff member must meet the following minimum qualifications:

- 1. Have at least one year's experience in aging and disability service;
- 2. Receive training in the SD CFC/PAS program by the provider agency; and,
- 3. Be free of the conflict of interest criteria outlined in SD CFC/PAS 720.

Person Centered Plan Facilitation:

SD CFC/PAS provider agencies must employ a staff member to perform the duties of the Plan Facilitator as outlined in CSB 1101-1115. The person who performs these duties is referred to as the Plan Facilitator. The Plan

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Facilitator and the Program Oversight staff person may be the same person. The Plan Facilitator must meet the following minimum qualification:

- 1. Have at least one year's experience in aging and disability service;
- 2. Receive certification in the person-centered planning process outlined in SD CFC/PAS 1103; and
- 3. Be free of the conflict of interest criteria outlined in SD CFC/PAS 720

OVERSIGHT RESPONSIBILITIES

Program Oversight Staff:

The Program Oversight staff member must complete the following tasks:

- 1. Participate in Person Centered Planning visits;
- 2. When acting in the role of Plan Facilitator, the Program Oversight staff member is responsible for the completion of the Person Centered Plan (SLTC-200);
- Complete intake process according to policy (Refer to SD CFC/PAS 414 and 701);
- Educate the member/Personal Representative (PR) about the SD program;
- Complete re-certification visit at intervals not exceeding six months, or when there is a significant change in condition (Refer to SD CFC/PAS 703);
- 6. Complete the required paperwork to implement a temporary authorization when there is a change in condition (refer to SD CFC/PAS 417);
- 7. Schedule case conferences to address member care needs and complete required paperwork, as necessary;
- 8. Address any health and safety issues using the risk negotiation process (Refer to CFC/PAS 914);
- 9. Complete the Service Plan (SLTC-175) according to program parameters (Refer to SD CFC/PAS 421);
- 10. Complete the program Compliance Tool (SLTC-167) as necessary to

reevaluate member compliance with program rules (Refer to SD CFC/PAS 919); and,

11. Provide documentation to ensure the Personal Representative (when applicable) meets program participation criteria (Refer to SD CFC/PAS 715).

➢Other Agency Responsibilities:

Other on-going responsibilities may be assumed by the Program Oversight staff member or by other provider agency staff. This includes the following tasks:

- 1. Review member service delivery records to ensure that services are delivered according to the Service Plan Schedule;
 - a. If member is not receiving services according to the Service Plan provide appropriate follow-up with the member.
- 2. Ensure the member has a current Health Care Professional Authorization Form;
- 3. Participate in the Department's Quality Assurance process and respond to Quality Assurance Communications in the Department's Quality Assurance Management System (QAMS); and,
- 4. Report Serious Occurrence Reports according in QAMS (Refer to 708).
- 5. ➤Conduct an annual member survey of Medicaid recipients. At a minimum, the survey must go out to all current Medicaid members and members served in the prior six months. The member survey must include questions about member satisfaction and member experience on the CFC/PAS program.
 - a. ≻The provider agency must use the annual member survey to evaluate and improve program operations.