



CDASS
**Program Training
Manual**



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C Consumer
D Directed
 A Attendant
 S Support
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Key Terms and Abbreviations

This manual includes terms, concepts and abbreviations that may be unfamiliar to participants new to directing their own care, and the CDASS service delivery option. For ease of reference, they are collected below. Entries include the term itself and its abbreviation in parenthesis ().

Each of these terms are also defined as they appear in the text.

Attendant Support Management Plan (ASMP):

Attendant Support Management Plan means the documented plan detailing management of Attendant support needs through CDASS.

Authorized Representative (AR):

Authorized Representative means an individual designated by the client or the client's legal guardian, if applicable, who has the judgment and ability to direct CDASS on a client's behalf and meets the qualifications defined in the CDASS Rules and Regulations (see Appendix A)

Colorado Department of Health Care Policy and Financing (The Department):

Department means the Colorado Department of Health Care Policy and Financing, the Single State Medicaid Agency.

Consumer Direct for Colorado (Consumer Direct/CDCO):

The state of Colorado training and operations vendor for CDASS, contracted by the Department to provide training and customer service for self-directed service delivery options to clients, Authorized Representatives, and Case Managers.

Consumer Directed Attendant Support Services (CDASS):

The service delivery option that empowers clients to direct their care and services to assist them in accomplishing activities of daily living when included as a waiver benefit. CDASS benefits may include assistance with health maintenance, personal care, and homemaker activities.

Electronic Visit Verification (EVV):

A technology solution that verifies service provision through mobile application, telephony, or web-based portal. It is used to ensure that home or community-based services are delivered to people needing those services by documenting the precise time service begins and ends.

Financial Management Services (FMS):

An entity contracted with the Department and chosen by the client or Authorized Representative to complete employment-related functions for CDASS Attendants and to track and report on individual client CDASS Allocations.

Fiscal/Employer Agent (F/EA):

A Fiscal/Employer Agent (F/EA) provides FMS by performing payroll and administrative functions for clients receiving CDASS benefits. The F/EA pays Attendants for CDASS services and maintains workers' compensation policies on the client-employer's behalf. The F/EA withholds, calculates, deposits and files withheld Federal Income Tax and both client-employer and Attendant-employee Social Security and Medicare taxes.

Home and Community-Based Services (HCBS):

Means a variety of supportive services delivered in conjunction with Colorado Medicaid Waivers to clients in community settings. These services are designed to help older persons and persons with disabilities to live in the community.

Post Training Assessment (PTA):

A test that solidifies the completion of training with Consumer Direct and ensures the Client/AR understand all of the important information associated with utilizing CDASS.

Service Plan Authorization Limit (SPAL):

Determines the amount of funds that an SLS waiver recipient has for the service year to access services that fall within the SPAL. In CDASS, three services affect the SPAL: Homemaker, Enhanced Homemaker, and Personal Care.

Supported Living Services Waiver (SLS):

This waiver provides necessary services and supports for adults with intellectual or developmental disabilities so they can remain in their homes and communities with minimal impact to the individuals' community and social supports.



SECTION 1

Purpose of the Program

C Consumer **D** Directed **A** Attendant **S** Support **S** Services

Introduction to Colorado Consumer Directed Attendant Support Services

Colorado Consumer Directed Attendant Support Services (CDASS) was established in 2002 giving Medicaid Home and Community-Based Services (HCBS) waiver recipients (Clients) the opportunity to direct their care and have full control over their attendant support services. Clients hire, train and manage Attendants of their choice to best fit their unique needs. Through CDASS, Clients may receive personal care, homemaker and health maintenance services rather than working through a home health or personal care agency.

Clients in CDASS work closely with Case Managers to determine the amount of services needed to support assessed needs. Clients are able to use Medicaid dollars to pay for services.

- CDASS is intended to:
- Increase independence and self-sufficiency.
 - Offer greater control over attendant care.
 - Improve the quality of support services.
 - Enable Clients to have a healthier and more productive life.
 - Provide opportunity for greater flexibility and control in managing support needs.

Eligibility Requirements

CDASS is available to individuals who meet the following eligibility requirements:

- Medicaid members who qualify for one of the HCBS waivers in which CDASS is an approved service delivery option.
- Demonstrated need for personal care, homemaker or health maintenance services.
- Stable health and ability to direct own services or assign an Authorized Representative (AR).

Authorized Representative (AR):

If a doctor indicates a Client requires assistance with certain responsibilities, or if a Client wants help with all or certain aspects of directing care, the CDASS service delivery option allows for the Client/guardian to choose to delegate these responsibilities to an AR. An AR in CDASS has different responsibilities than an SLS Client Representative. See Section 2, “Role of a Client or Authorized Representative” for details.

Client Experience: Christina Ulmer, Arvada

“Consumer Directed Attendant Support Services (CDASS) has been a life changer for me. I was injured in May of 1993 when I broke my neck, paralyzing me from the shoulders down. I was instantly in a position of needing daily care for everything. I had home health care agency services 24 hours a day for a month, then it dropped to 18 hours a day, still covering nights because of my need for a ventilator. In 2003, Medicaid dropped my hours to 3 per day, leaving me to cover 21 hours a day or go into a nursing home.

I was fortunate to have a special needs trust, but it was being depleted quickly. I signed up for CDASS services in 2006. Since then, this program has relieved a lot of emotional and financial stress, allowing for a much better life.

Not only have I found terrific caregivers, they have become my friends too. I have been able to travel and take my caregivers with me. I have met and am engaged to a man from California, who is also one of my caregivers. And, last but not least, my parents, who have taken care of me my whole life, can be paid for their help.”

Consumer Direction Explained

Consumer direction (also known as self-direction) provides individuals and families with choice and control over the publicly-funded services for which they are eligible. Consumer direction is defined as:

“...a service model [which] empowers public program participants and their families by expanding their degree of choice and control over the long-term services and supports they need to live at home.”¹

History and Growth of Consumer Directed Services

Consumer directed service models have been available in the United States since the 1950s and 60s. Services in those early decades were limited. Participant direction grew slowly during the 70s, 80s, and 90s. In the 2000s, participant direction became a standard service offering within Medicaid waiver programs. Since that time, participant direction has expanded to a wide variety of populations and has steadily grown in popularity.

National surveys conducted from 2001-14 found that:

- Nearly 300 programs exist nationwide.
- There is at least one program in every state.
- Over 800,000 individuals are enrolled nationwide.²

NOTE



Consumer directed service models are founded on the principles of self-determination and reflect the hopes and desires of individuals. The five principles of self-determination are: **Freedom, Authority, Support, Responsibility, and Confirmation.**

Principals and Benefits of Consumer Direction

Consumer direction represents a shift in the way home and community services are delivered and evaluated. The individual and his or her family have the opportunity and support to choose:

- Amount and type of services, based on personal assessment.

¹ Boston College, *Developing & Implementing Participant Direction Programs & Policies: A Handbook*, <http://www.bc.edu/schools/gssw/nrcpds/tools/handbook.html> (accessed January 2, 2015)

² Kaiser, *Medicaid Home and Community-Based Services Programs: 2011 Data Update*, <http://kff.org/medicaid/report/medicaid-home-and-community-based-services-programs-2011-data-update/> (accessed January 2, 2015)

- Who will provide the services?
- Where and when services will be provided.
- How services will be provided.

FREEDOM – The opportunity to choose where and with whom you live, as well as how you organize all important aspects of your life with freely chosen assistance as needed. It means deciding for yourself:

- What choices you want to make about your life.
- What kind of services and supports to use (if any).

BUDGET AUTHORITY – You make decisions about how your Medicaid dollars are spent, within certain state and federal rules and regulations. You develop your own spending plan to determine how your monthly allocation will be used to support you in your home or the community.

EMPLOYER AUTHORITY – You may select, hire and manage the employees who support you, including friends and family members.

SUPPORT – The ability to organize your support in ways that are unique to you. You may want or need support/assistance to:

- Care for yourself.
- Be an active part of your community.
- Take care of your home.

RESPONSIBILITY – The obligation to use Medicaid dollars wisely. Along with freedom and choice, you have the responsibility to follow the rules of the CDASS service delivery option including:

- Making responsible choices.
- Staying within your monthly budget/allocation.

CONFIRMATION – The recognition that individuals with disabilities should have a leadership role in the redesign of the long-term care service system.

PERSON-CENTERED PLANNING – You develop your own Attendant Support Management Plan (ASMP) with the support of people you choose. Case Managers, Training Coordinators and Peer Trainers are available to assist you if needed.

SUMMARY



Section 1: Purpose of the Program

- To utilize the CDASS option, you must meet the Medicaid waiver eligibility requirements.
- The five principles of self-determination are as follows. Consumer directed services are founded in these principles.
 - Freedom
 - Authority
 - Support
 - Responsibility
 - Confirmation
- The Colorado Department of Health Care Policy and Financing (The Department) reinforces the principles through CDASS, which is intended to increase independence, quality, control and flexibility over services, and promote a healthier and more productive life.
- Consumer directed services have been available since the 1950s and 1960s. The option continues to grow and expand across the United States.



