

**NC Department of Health and Human Services
Division of Health Benefits**

2023 - 2028 CAP/C Waiver Overview

CAP/C Waiver
IHA/PNA Overview of Program Operations
May 2023

CAP/C Coverage Overview

Coverage

Application approval period: March 1, 2023 – February 29, 2028

Target population: 0-20 medically fragile and chronically ill individuals who meet a nurse facility level of care(LOC)

3 service options:

- Provider-led
- Consumer-directed
- Coordinated Caregiving

Coverage

18 [home and community-based services](#)

Initial independent assessments planning

Legally responsible person to become paid caregiver, when qualifying conditions are met

Coordinated transition plan from COVID-19 flexibilities to regular program administration by Nov. 2023

Operational Processes

CAP/C Operations

Maximum participant enrollment

- 6,000 by 2028; 500 each waiver year

Program enrollment requirements:

- Referral
- Meet LOC
- Determination of need (initial independent assessment) to confirm medical fragility & identification of unmet needs/risk factors

Person-centered planning: service plan specific to family needs including goals & preferences

CAP/C Operations

Enrollment service options:

- Provider-led
- Consumer-directed
- Coordinated caregiving

Categories of home and community-based services:

- Hands-on
- Supportive services
- Modification services

Managing beneficiary health, safety and well-being via:

- Monthly case management
- Quarterly face-to-face in-home visits

Person-Centered Planning

- A planning process directed by the waiver participant/caregiver that builds services around their strengths, preferences, and desired outcomes
- The planning process enables a personalized mix of paid and non-paid services and supports that assist the waiver beneficiary with achieving personally defined outcomes within the community



Service Options Descriptions

Provider-Led	Consumer-Directed	Coordinated Caregiving
<p>Hands on support for assistance with ADLs and IADLs managed by an In-Home agency or a Home Health Agency:</p> <ul style="list-style-type: none"> • CAP In-Home Aide • Pediatric Nurse Aide • Congregate Care • Respite services <p>A legally responsible person can seek employment with an In-Home/Home Health Agency to become the paid caregiver for the above listed services other than respite</p>	<p>Personal assistance with ADLs/IADLs and other identified needs as directed by waiver participant/employer of record:</p> <ul style="list-style-type: none"> • CAP In-Home Aide • Pediatric Nurse Aide • Congregate care • Attendant Nurse Care • Respite services <p>A legally responsible person can qualify to be the paid employee for the above services other than respite</p>	<p>Supportive services to assist with ADLs/IADLs, adaptive skill development and skill-level intervention:</p> <ul style="list-style-type: none"> • CAP In-Home Aide • Pediatric Nurse Aide • Congregate care • Attendant Nurse Care <p>A stipend is paid to a live-in caregiver for providing supportive care to the waiver participant. Respite services can be arranged for the live-in caregiver.</p>
Meet the hiring requirements of the In-Home Aide/Home Health Agency	Meet the competency assessment requirements, CPR, background check	Live in same home and willing to be a live-in caregiver

Person-centered Choices

Hands-on service options minimal hiring requirements

Provider-Led	Consumer Directed	Coordinated Caregiving
<p>CAP In-Home Aide:</p> <ul style="list-style-type: none"> • CNAI or CNAII • 18 years and older <p>Pediatric Nurse Aide:</p> <p>CNAII</p> <p>18 years old and older</p> <p>Congregate Care</p> <ul style="list-style-type: none"> • CNAI or CNAII • 18 years old and older <p>Respite services</p> <ul style="list-style-type: none"> • 18 years old and older • Not a primary caregiver or live-in relative 	<p>CAP In-Home Aide</p> <p>Pediatric Nurse Aide</p> <p>Congregate Care:</p> <ul style="list-style-type: none"> • Meet competency assessment requirements • 18 years and older • Pass background check <p>Attendant Nurse Care:</p> <ul style="list-style-type: none"> • RN • LPN supervised by RN • 18 years old and older • Pass background check <p>Respite services</p> <ul style="list-style-type: none"> • 18 years old and older • Not a primary caregiver or live-in relative • Pass a background check 	<p>CAP In-Home Aide</p> <p>Pediatric Nurse Aide</p> <p>Congregate care</p> <p>Attendant Nurse Care:</p> <ul style="list-style-type: none"> • 18 years old and older • Live in the same home <p>Respite services</p> <ul style="list-style-type: none"> • 18 years old and older • Not a primary caregiver or live-in relative

Legally responsible person wanting to be the paid caregiver must meet the [extraordinary criteria](#) outlined in clinical coverage policy 3k-1

Parent Qualifications

Hands-on Service Options & Standard Minimum Qualifications	Consumer-Directed Qualifications	Coordinated Caregiving
<ul style="list-style-type: none"> CAP In-Home Aide/Congregate Care - CNA I Pediatric Nurse Aide/Congregate Care – CNA II or + four competencies Attendant Nurse Care - RN or LPN 	<ul style="list-style-type: none"> Competency evaluation Completion of background check (criminal and registry) CPR certification, when applicable Competency evaluation Completion of background check (criminal and registry) CPR certification, when applicable Competency evaluation RN or LPN Hours/experience in area of medical need Completion of background check (criminal registry) CPR/BLS 	<ul style="list-style-type: none"> Must be at least 18 years of age Must pass criminal and registry background check Competency evaluation CPR certified, when applicable Must be at least 18 years of age Must pass criminal and registry background check Competency evaluation CPR certified, when applicable Must be at least 18 years of age Must pass criminal and registry background check Competency evaluation CPR/BLS certified, when applicable

Individual Qualifications

- Legally responsible person can become a paid caregiver when the following conditions are met:
 - There are no available certified nursing assistants (CNAs) or personal care assistants in the CAP/C participant's county or adjunct counties through a Home Health Agency, In-Home Aide Agency or under consumer direction due to the impact of infectious viruses, and the CAP/C participant needs extensive to maximal assistance with bathing, dressing, toileting and eating daily to prevent an out-of-home placement.
 - The CAP/C participant requires short-term isolation, 90-days or less, due to experiencing symptoms of infectious viruses extensive to maximal assistance with bathing, dressing, toileting and eating, and the CAP/C participant chooses to receive care in his or her home instead of an institution.
 - The CAP/C participant requires physician-ordered 24-hour direct observation and, or supervision specifically related to symptoms of infectious viruses and the legally responsible person is not able to maintain full or part-time employment due to multiple absences from work to monitor or supervise the CAP/C participant; regular interruption at work to assist with the management of the CAP/C participant's monitoring or supervision needs; or an employment termination.
 - The CAP/C participant has specialized health care needs specific to infectious viruses that can be only provided by the legally responsible person, as indicated by medical documentation, and these health care needs require extensive to maximal assistance with bathing, dressing, toileting and eating to assure the health and welfare of the participant and avoid institutionalization.
 - Other documented extraordinary circumstances not previously mentioned that places the CAP/C participant's health, safety and well-being are in jeopardy resulting in an institutional placement directly related to infectious viruses.

Person-Centered Choices

Differences between the Service Options

Provider-Led	Consumer-Directed	Coordinated Caregiving
<ul style="list-style-type: none"> • Provider agency such as an In-Home or Home Health agency takes lead in advertising, recruiting, interviewing, hiring and supervising worker • Provider agency takes lead in bringing awareness to poor performance of the worker • Provider agency sets the pay and pays the worker • Provider agency finds a replacement when worker can't come to waiver participant's home • Provider agency's RN provides quarterly monitoring of the worker to ensure care plan needs are being implemented • Provider agency brings awareness of health care needs to the case manager or physician for follow up • Provider agency reports and tracks critical incidents of the waiver participant • Provider agency (closely) ensures compliance with fraud, waste and abuse 	<ul style="list-style-type: none"> • Parent/representative create job descriptions, advertise, recruit, interview, and hire employees • Parent/representative evaluates skills and experience to ensure interested worker can carryout the medical needs of the waiver participant • Parent/representative set a wage for employees that aligns with skills and experience within the Medicaid limits and authorize payroll for the employee(s) • Parent/representative manages employees and ensures that employees are following work plan and program rules • Parent/representative is aware of fraud, waste and abuse and report any occurrences to FMS or CM • Parent/representative meets monthly with the CM to keep case manager aware of changing needs and progression of waiver participant • Parent/representative keeps in close contact with medical professionals to ensure medical needs of child are being met and addressed • Parent/representative reports and tracks critical incidents of the waiver participant 	<ul style="list-style-type: none"> • Provider agency supports the live-in caregiver through: <ul style="list-style-type: none"> ➢ coaching ➢ supervision • Provider agency is available 24/7 to provide needed support • Provider agency brings awareness of healthcare needs to the case manager or physician for follow up • Provider agency sends a professional to the home to assist live-in caregiver with managing a new medical condition or other changing needs • Provider agency reports and tracks critical incidents of the waiver participant

Person-Centered Choices

Consumer-Directed Services Requirements

Waiver participant or Representative must:

- Inform CM of desire to self-direct
- Participate in consumer-direction training
- Complete a self-assessment questionnaire
- Collaborate with financial management agency to obtain an EIN & follow guidelines of IRS and Department of Labor Laws
- Make decisions about criminal charges found on a background check
- Collaborate with FMS to execute an employer & employee agreement
- Have a designated representative

Waiver participant or Representative must:

- Be willing and qualified to direct care through evidence of a self-assessment questionnaire
- Post ads/notification of hire
- Validate staff competencies
- Hire/manage self-recruited staff
- Negotiate wages based on employee's experience background
- Train/supervise staff
- Collaborate with financial manager to pay employees/resolve payment issues/assure budget management
- Adhere to fraud/waste/abuse reporting and compliance requirements

Financial Management Agency must:

- Train and onboard waiver participant/representative and employee in consumer-direction
- Obtain competency validation form
- Complete background checks
- Validate CPR or BLS certification
- Validate whether extraordinary conditions were met
- Validate RN or LPN license through BON
- Establish the hourly rate based on negotiated wage and associated taxes
- Pays employee(s)
- Pay employer/employee taxes
- Comply with IRS and DOL

Person-Centered Choices

Weighing Decisions about Service Options

Provider-Led	Consumer Direction	Coordinated Caregiving
<ul style="list-style-type: none"> • Provider agency takes total lead in advertising, recruiting, interviewing and hiring workers • Provider agency takes lead in managing disciplinary actions of hired workers • Provider agency takes lead in soliciting replacement workers • Provider agency manages all payroll processes • Provider agency conducts quarterly monitoring visits to ensure services are meeting waiver participant needs.= 	<ul style="list-style-type: none"> • Parent/representative must be willing and qualified to direct care through evidence of a self-assessment questionnaire • Parent/representative takes total lead in advertising, evaluating, hiring, training and supervising employees • Parent/representative must maintain employment records in their home and fully comply with IRS and Department of Labor laws • Parent/representative takes lead in assuring workers are paid through a financial management entity and assists with resolving payroll issues • Parent/representative takes total lead in negotiating payment issues and paying, out-of-pocket, any amounts over their budget 	<ul style="list-style-type: none"> • Live in the same home of the waiver participant • Willingness to be available for care needs of waiver participant, when needed (stand-by support) • Willingness to accept support and coaching from a supporting entity to meet the needs of the waiver participant • Keeping case manager and supporting entity informed of changing needs of the waiver participant • No requirement of certification of license as required for minimal hiring requirements

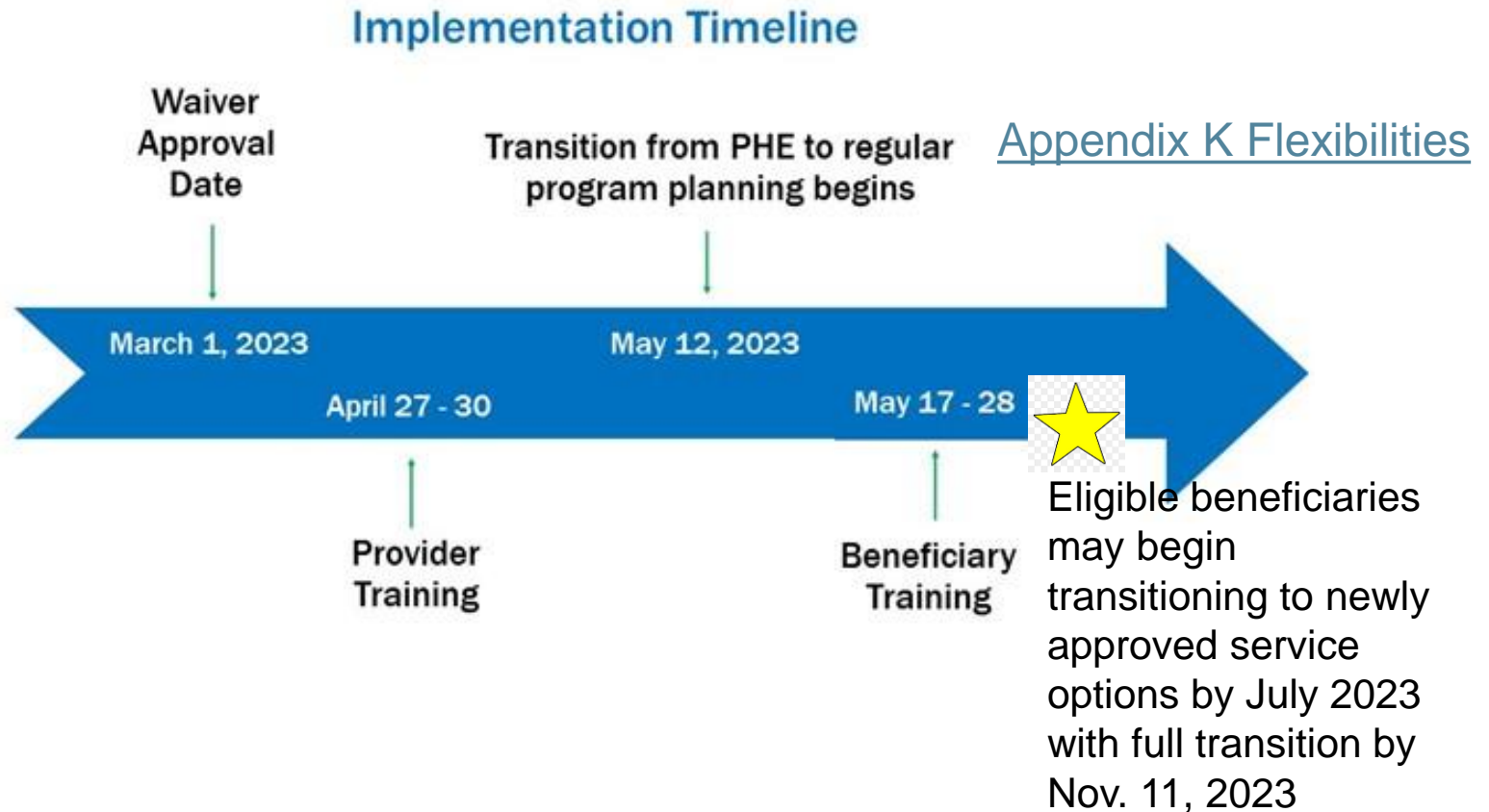
Determining What Service Option Works for my Family

- ☐ Do I have the time to manage employees?
- ☐ Do I have people I know to be my workers?
- ☐ Do I know how to detect FWA?
- ☐ Do I know how to find resources I need?
- ☐ Do I know how to manage a budget?
- ☐ I prefer someone else to take lead in finding/hiring my workers?
- ☐ I don't know people in my community who can work for me
- ☐ I have stand-by ability to take care of my child
- ☐ I know how to develop a care plan
- ☐ I prefer someone to find a replacement worker if my worker is absent
- ☐ I feel comfortable talking with healthcare professionals

Program Assurances

- Respite services can not be provided by the paid caregiver or a live-in caregiver
- Respite hours can not be used to offset hour overage; respite needs must be identified at least 12 hours prior to use
- A legally responsible person or a close kinship live-in relative can not exceed more than 40 paid work hours per week
- Transitioning to CAP/C service options must be planned and coordinated to include training and assurances of no gaps in services or payment.

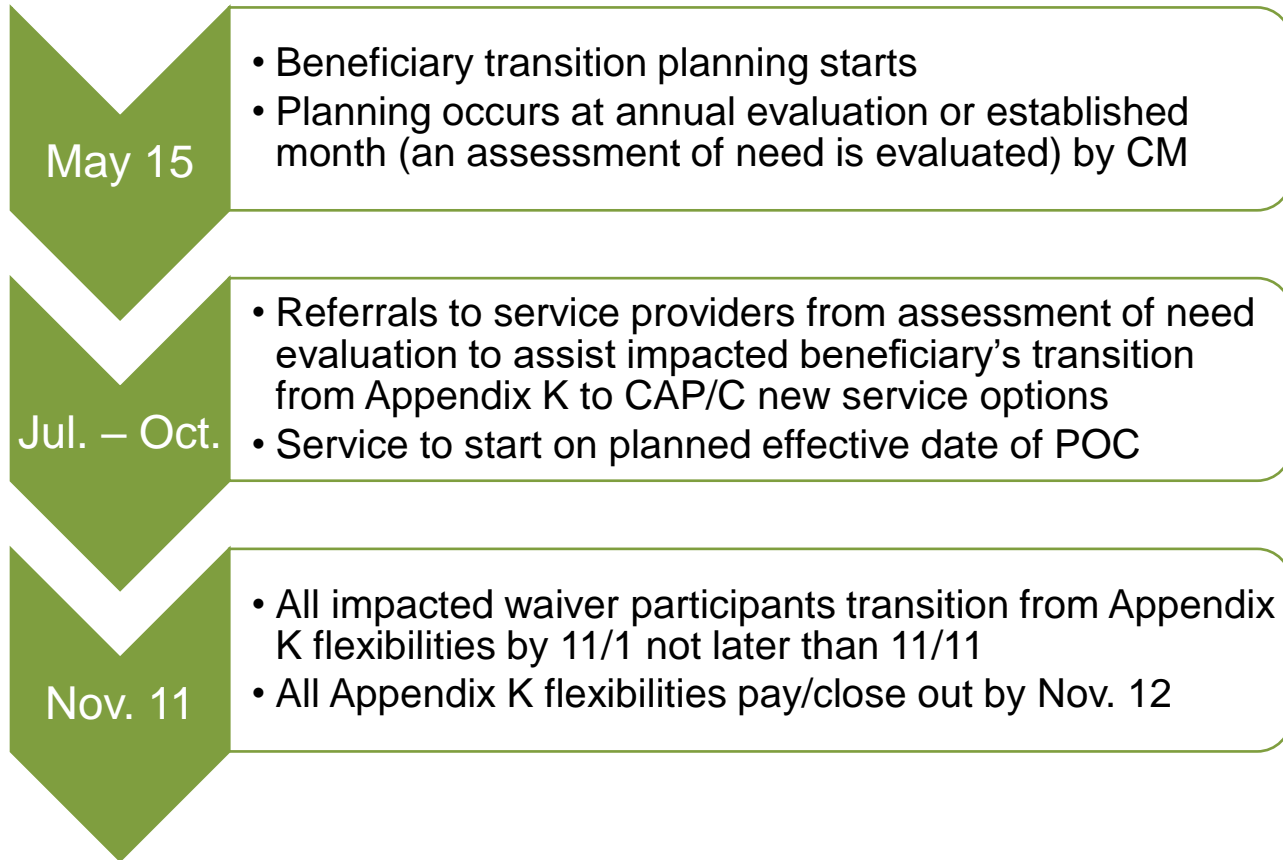
Rollout/Implementation Plan



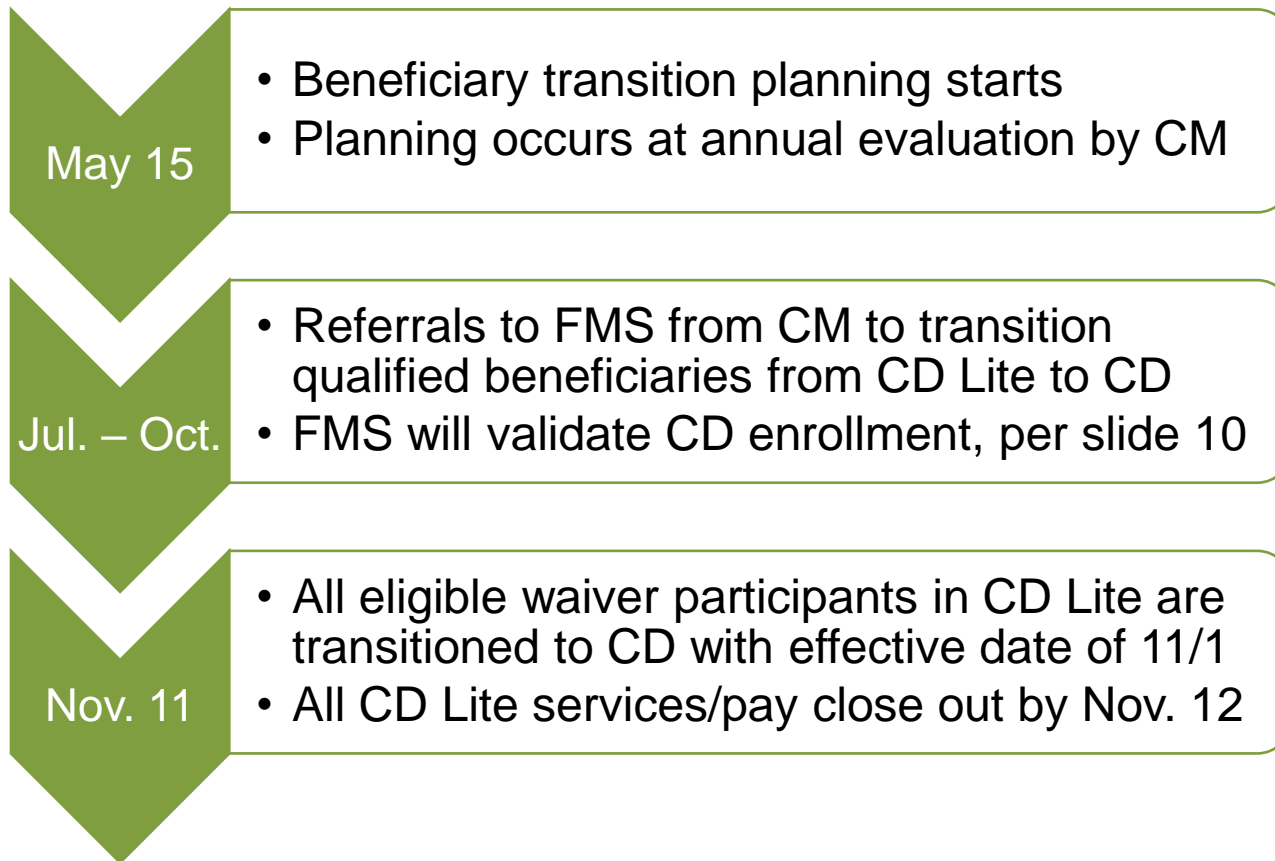
Supporting Waiver Participant to Transfer to CAP/C Service Options

- The PHE expired on May 11, 2023; Appendix K extends six months after the expiration of the PHE (Nov. 11, 2023).
- CM will begin transition planning with waiver participant in May 2023 during the waiver participant's annual reassessment.
- Discussion will assist in evaluating health and well-being that leads to a plan of care and appropriateness to enroll in new service option.
- Transition from Appendix K to new service options may occur when there are no gaps in service provision or pay and when qualifying conditions are met for a legally responsible person to be the paid caregiver.
- The CM will assist with assuring a smooth and efficient transition from Appendix K to renewed CAP/C waiver.

Appendix K Transition



CD Lite to CD Transition



CAP/C Services by Categories

Hands-on	Supportive Services	Modification Services
<p>Personal care type services:</p> <ul style="list-style-type: none"> • *Attendant Nurse Care • CAP In-Home Aide • Congregate Care • *Coordinated Caregiving • Pediatric Nurse Aide • Respite services 	<ul style="list-style-type: none"> • Care management/care coordination • Community transition • *Community integration • Financial management services • *Individual/participant goods and services • Non-medical transportation • Nutritional supplements • Pest eradication • Specialized medical equipment and supplies • Training, Educational and Consultative services 	<ul style="list-style-type: none"> • Assistive Technology • Home accessibility and adaptive services • Vehicle modification <p>Service requests for new budgets are being processed</p>

The CM must authorize the service through a POC-I or revision based on a justification of need evaluation (initial or annual assessment) through collaborative input of the multidisciplinary team, before the FMS can seek reimbursement.

Supporting Waiver Participant to Hire Qualified Employees

- EOR bring awareness of training needs as result of competency validation (employee isn't hired until competency is checked off)
 - CM in collaboration of the FMS completes a plan of care to include training before the hiring of the employee
 - FMS submits the claim to NCTracks for payment and issue payment
- EOR bring awareness the employee does not have CPR certification and can't afford the training prior to employment
 - CM collaborates with the FMS and EOR to create an IRA to address HSW concerns while the EOR and employee work to save money to pay for the CPR training (employee isn't hired until an IRA is in place and fully addresses HSW)
- EOR hires an LPN (employee isn't hired until RN is confirmed, per slide 8)
 - FMS confirms the name of RN and obtain hiring documents (IRS forms, etc.)
 - FMS checks BON for RN listing
 - FMS adds RN as an employee, similar to how respite employees are added



All questions will be compiled and addressed in a FAQ document.
Please type your questions in the chat or raise your hand to state a question.

Virtual Training Schedule

- Virtual training schedule for Providers, CMEs and FMS:
 - For **all provider** - Willing and Qualified provider of Hands-on services; April 28 at 3 pm
 - Registration link:
<https://attendee.gotowebinar.com/register/3757656185287168342>
 - For **CMEs only** – What I need to know as a CAP Case Manager; May 8 at 10 am
 - Registration link:
<https://attendee.gotowebinar.com/register/581328720851656282>
 - **For Financial Management Agencies only**; May 11 at 1-2:30 pm - Assisting families to direct their care through consumer-directed services
 - Registration link:
<https://attendee.gotowebinar.com/register/112766343159979866>

Virtual Training Schedule

- Virtual training schedule for **beneficiaries/families only**:
 - Becoming a paid caregiver for **In-Home and Pediatric Nurse Aide services**; May 17 at 9 am and 12 pm
 - Registration links:
<https://attendee.gotowebinar.com/rt/579766314828632156>
 - **Attendant Nurse Care**, hiring my own nurse; May 22 at 9 am and 12 pm
 - Registration links:
<https://attendee.gotowebinar.com/rt/1494903036766167388>
 - What is **Coordinated Caregiving** and how does it work? May 24 at 9 am and 12 pm
 - Registration links:
<https://attendee.gotowebinar.com/rt/6874293362474229086>