

March VDC Office Hours

Veteran Intake Process and Person-Centered Assessment

March 22, 2023



Menti Poll – Icebreaker

Go to www.menti.com and enter code: 9506 3104 How long have you been a VDC provider?



Please enter the code

9506 3104





Agenda

- Welcome and Announcements from the Administration for Community Living (ACL)
- □ FAQs from the Educational Webinar
- Focused Topic Discussion: Intakes and Assessments
 - Intake Process
 - Assessment Process
 - □ Allowable Expenditures
- Open Question and Answer (Q&A)Closing





Victoria Wright, Program Officer for Veteran Directed Care and Inclusive Transportation Programs

VDC Operations Manual Template Overview

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- Informed by the U.S Department of Veterans Affairs VDC requirements and VDC program best practices
- Purpose:
 - To inform the development of a VDC provider's VDC operations manual
 - ► To support program consistency, access, and efficiency
- Organized by key operational areas
 - Program Background
 - Referral and Intake
 - Assessment and Spending Plan
 - Initiating Services and Hiring Workers
 - Ongoing Monitoring
 - Billing and Invoicing
 - Quality



Questions from the February VDC Educational Webinar





FAQ: VAMC Standard Operating Procedures

Question: Unique to the VAMC that "we" are working with, does that mean the agreement is fluid depending on the VDC Coordinator/VAMC in making program choices?

- The Operations Manual Template is informed by the U.S Department of Veterans Affairs (VA) VDC requirements, as well as program best practices to support program consistency, access, and efficiency.
- VDC providers enter into a "Veteran Care Agreement" that is standard across VA.
- VDC providers may use the template to guide the development of their local program operational policies in accordance with VA requirements and *individual Veterans Affairs Medical Centers'* (VAMC) standard operating procedures which may vary from one VAMC to another.



FAQ: Authorization Period

Question: We receive referrals before the authorization period starts. Do you want us to complete assessment before authorized?

- It is strongly advised to complete the Veteran assessment within the date range of the VDC authorization.
- VDC providers and VAMCs should work collaboratively to identify processes for engaging Veterans prior to the start of the authorization.
 - For example, VDC providers may have a process for reaching out to Veterans to schedule assessments prior to start of the authorization period.
- VA is not obligated to pay for assessments completed prior to the start of a Veteran authorization.



FAQ: Communication with VAMCs

Question: Can we hold the VAMC accountable for late authorization or untimely certs?

- VDC providers and their partnering VAMCs are encouraged to establish a communication plan regarding authorizations.
- For example, the VAMC and VDC provider should communicate any reauthorizations at least 90 days in advance.
- If the authorization is not received 30 days prior to the date expected, VDC providers must follow up with their partnering VAMC to determine the timeline for when they should expect to receive the authorization and determine if there are any risks.



FAQ: Direct Personal Care Hours

Question: Our VA contact wants us to use "All" the budget on direct personal care hours. Is this normal, or should this come from the actual assessment and be needs based?

- In general, the majority of a Veteran's budget will be used on direct personal care services. However, the VDC provider should work with the Veteran to determine a budget that is based on preferences, needs, and goals as identified by the Veteran.
 - In 2019, VA identified that 97% of Veteran's budgets are used on direct personal care. Based on this, a Veteran with a \$3,000 monthly case-mix will spend approximately \$1,000 on non-direct care in a year.
- Any non-personal care needs must be documented in the Veteran's spending plan and approved by the VAMC.



Menti Poll

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Focused Topic Discussion





Intake Process



Intake Process

Steps to Consider During the Intake Process

- VDC provider receives the Veteran referral from the VAMC through HealthShare Referral Manager (HSRM)
- Within two business days, VDC provider contacts the Veteran to ask or answer any initial questions, confirm the Veteran's interest in proceeding with the assessment process, and schedule the intake visit with the Veteran according to their stamina and preferences
- Within five business days, the VDC provider conducts a face-to-face intake home visit with the Veteran

Delays in the intake process are allowable at the request of the Veteran. The VDC provider shall discuss any delays with the VAMC and document in the Veteran's HSRM referral and any internal VDC provider files.



Information to Cover During Intake Process

Orientation to Veteran-direction

Roles of Veteran, PCC, VAMC, VDC provider, and FMS

Role as an employer

Veteran's ability to conduct tasks associated with Veteran-directed program, including risks and responsibilities

Option to select an authorized representative

Process and frequency for re-assessments

Process for changing the spending plan

Choice of VDC services and care providers, including family caregiver support

Veteran rights and process for resolving grievances

Resources for unpaid caregivers, if applicable

Gather any additional demographic information from the Veteran not collected during the initial referral



Assessment Process

VDC Provider Expectations

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To ensure Veterans' needs are being met, VDC providers are expected to:

- Conduct an initial assessment
- Conduct reassessments
- Work with the Veteran to develop service plans annually (semi-annual in the first year), or when there is a new service authorization
- Schedule monthly interactions with the Veteran, as well as caregivers and authorized representatives if applicable
- Conduct quarterly visits face-to-face to monitor well-being



Veteran Visit Expectations

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Monthly Visits

Monthly visits should cover operational updates and ensure the VDC program is running smoothly. Example discussion topics include:

- The Veteran's spending plan and whether it is meeting their needs
- Additional services and supports that may help the Veteran
- The status of hired workers including any signs of neglect or abuse of the Veteran and/or potential caregiver burnout

Quarterly Visits

Quarterly visits should attempt to understand the big picture of the Veteran's health and well-being. Example discussion topics include:

- Health status changes in the Veteran
- The Veteran's overall experience in VDC
- Identification of unmet needs

Person-Centered Assessment

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- Within 10 business days of the intake visit, the person-centered counselor conducts a person-centered assessment
 - Purpose: Document Veteran's goals, preferences, and needs as the foundation for the Veteran's spending plan
 - Tools: Functional assessment tool approved during the Readiness Review process, and additional tools as appropriate
 - Process: The VDC provider specifies how person-centered counselors will conduct a person-centered assessment, including the tools/forms to be used, the topics to be discussed, and the info to be collected

If the Veteran has an unpaid caregiver, the PCC will offer to use a caregiver assessment tool (e.g., <u>Modified Caregiver Strain Assessment</u>) to determine caregiver needs.



VDC Goods and Services



Allowable Expenditures

The purchase of goods and services must meet **all** the following criteria:

Meets the identified needs, goals, and outcomes in the Veteran's spending plan

Improves the Veteran's ability to remain safely in their home

Addresses the ADLs or IADLs needs of the Veteran

Be the least costly alternative that reasonably meets the Veteran's identified needs

Not be provided or paid for by VA, Medicare, Medicaid, TRICARE, or other agency, organization, program, service, or insurance

Not be the responsibility of the Veteran as a homeowner to maintain, repair, or replace goods and services

Be for the Veteran



Allowable Expenditures

If all the criteria are met, goods and services are appropriate purchases when reasonably necessary to meet **one or more** of the following Veteran outcomes:

Support the ability of the Veteran to remain in their home and access their community resources and network

Enhance community inclusion and family involvement

Develop, maintain, or improve personal, social, physical, or work-related skills

Decrease dependency on formal support services (i.e., reduce the need for purchasing services through other service providers)

Increase the Veteran's independence

Increase the Veteran's safety in their home and community

Enhance family involvement by increasing the ability of direct care workers and caregivers, including family members and friends, to receive education and skills training needed to support the Veteran

Allowable Expenditures

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The VDC provider discusses with the VAMC Program Coordinator any Veteran requests for goods and services that require clarification based on the VA's policy.

If state policy affects a Veteran's ability to purchase goods and services allowable under VA policy (e.g., nurse practice regulations), the VDC provider discusses the restriction with the VAMC and specifies how the Veteran will comply with applicable state and local policies.



Non-Employee Goods and Services

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- The VDC provider develops written procedures for the purchase of non-employee goods and services that:
 - Assure all purchases are approved by the VAMC and documented in the spending plan;
 - Specify the documentation the selected vendor submits to the FMS;
 - Specify the process by which the Veteran requests payment for the Vendor; and
 - Address how the person-centered counselor will support the Veteran to plan for emergency back-up care and planned purchases, as needed.



Questions? Comments?





Menti Poll

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What is one thing you will consider doing differently as a result of what you learned from this office hour session?



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Submit



Closing

- VDC Operations Office Hour series: Join us in April 2023
 - Dates and topics will be released in the April VDC Newsletter
- Post-event survey: Please share your feedback through the <u>post-event survey</u>. Additionally, you may enter questions that you would like to be addressed during the office hour series.
- ACL Technical Assistance (TA)-Community: Continue the conversation using the discussion board located in the VDC Community on the <u>ACL TA Community website</u>. Please email <u>veterandirected@acl.hhs.gov</u> for access.
- VDC Monthly Reporting Tool Data: Report your Veteran census data every month with the VDC monthly reporting tool.
- Technical Assistance: Please email the VDC Technical Assistance Team with any questions: <u>veterandirected@acl.hhs.gov</u>.

Appendix

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Section I: VDC Program Background, Guidelines for Participation, Contracts, Preparing to Deliver VDC, and Roles and Responsibilities

- Veteran Directed Care Program Background
- Veteran Eligibility
- Preparing to Deliver Veteran Directed Care: Steps
 to Consider
- VAMC, VDC Providers, and Participant Roles and Responsibilities

Section II: Referral and Intake

- Referral Process: Use of HSRM
- Intake Process

Section III: Assessment and Spending Plan Development

- Assessment Process
- Goods and Services
- Monthly Service Report
- VAMC Approval

Section IV: Initiating Services and Hiring Workers

- Initiating Services
- Hiring Workers
- Homecare Agency Services
- Non-employee Goods and Services

Section V: Ongoing Monitoring

- Ongoing Monitoring
- Managing Spending
- Disenrollment

Section VI: Billing and Invoicing

- Monthly Responsibilities
- Monthly Service Report
- VDC Invoices
- Emergency Back-up Care and Planned Purchases

Section VII: Quality

- File Review
- Satisfaction Survey
- Complaints
- Monitoring Quality of Service Delivery and Subcontractors