

INDEPENDENT CHOICES PROGRAM

Program Overview

In 1998, Oregon's Department of Human Services (DHS), Seniors and People with Disabilities (SPD) began working with consumers towards the creation of a "cash-and-counseling" program as an alternative to the existing In-Home Support Services model. The program, Independent Choices, was approved by the Centers for Medicare and Medicaid Services (CMS) under the 1115 Research and Demonstration Waiver program on July 27, 2001 as a pilot project in five Oregon counties. In 2009, the program was transitioned to an on-going program and was expanded statewide.

Independent Choices provides consumers with flexible cash benefits that are based on service plans to meet the individual's needs. A cash benefit is provided in lieu of the usual service provider plan. The monthly benefit allows participants to direct and manage personal assistance services and address individual-specific needs. Benefits from other governmental programs such as Section 8 housing and Social Security payments are considered excluded resources and income when calculating the monthly ICP benefit.

WHO May Enroll in the Independent Choices Program?

People who are eligible for Medicaid paid, In-Home Services for people over age 65 and individuals with physical disabilities may be eligible for the program. They may participate if they demonstrate a stable living situation

and financial responsibility. There are additional program eligibility criteria specified in OAR 411-030-0100. Potential enrollees, or their designated representative such as a family member or a close friend, must be able to manage a monthly cash benefit to purchase personal assistance, home care and other goods and services. Program participants accept responsibility for budgeting, record keeping, paying providers, and paying taxes for employees.

WHY is Independent Choices a Unique Opportunity?

Participants have more flexibility in how they meet personal assistance and in-home needs than in other programs. An individual can select and purchase the services or goods of his/her choice that enable the person to continue living at home and enhance or maintain health and independence.

Participants may hire family members, their spouse, neighbors and other interested applicants (including home care workers) to provide assistance. As a Household Employer, the participant decides which tasks they want help with, whom they want to hire, what quality of service they expect and what they are willing to pay each employee.

If money is left over at the end of the month, program participants may save the money for future needs or spend it in ways that enhance their independence and quality of life.

IC Participant Responsibilities

IC participants must maintain a special bank account reserved for IC purposes. They must develop a budget to show how they will use the money, in accordance with Medicaid and program guidelines and spend the money in accordance with the budget. They must hire an employee provider and pay this provider.

IC participants are responsible for meeting all legal and fiscal responsibilities as household employers. Program participants may **use** a portion of the IC benefits (money that is put into a discretionary fund) to purchase a payroll service to assist them in meeting payroll responsibilities.

There are a few other requirements that IC participants must follow. OAR 411-030-0100 defines these requirements.

Benefit Amount

Participants in the Independent Choices Program participate in the same assessment process as for any other Medicaid service programs. Case managers meet with participants to assess service needs and to create a service plan. The service plan is developed based on the participant's needs in activities of daily living (such as eating and mobility), self-management tasks (such as housekeeping and meal preparation) and 24 hour assistance needs. After the plan is finalized, service hours are calculated by the case manager and cashed out. The participant receives the cash payment and then uses these funds to meet his/her service needs.

Each participant's service needs are re-assessed every twelve months and the service plan is modified accordingly. Service budgets including financial records are reviewed every six months.

Clients who participate in the Independent Choices program are expected to maintain their health and personal care, and to manage their cash benefit responsibly. If a client decides the Independent Choices program is not working and/or if personal circumstances change, the client may leave the program. If the participant leaves the program, other in-home or community based services are offered if the individual is eligible.

For additional information about the program, please contact your local SPD or AAA office listed in the Independent Choices brochure or call 1-866-294-0153 to speak with Kelsey Weigel, the Independent Choices Program Coordinator. Kelsey can also be reached at: Kelsey.C.Weigel@state.or.us