COVID-19 Emergency Supports for Family Caregivers

AGENCY OF HUMAN SERVICES
DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING
DEVELOPMENTAL DISABILITIES SERVICES DIVISION
Introductions

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- Tammy Carroll, parent
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The Developmental Disabilities Services Division has worked very quickly to make emergency supports available to family caregivers due to the following factors:

- The COVID-19 State of Emergency.
- Urgent requests for assistance from families.
- Availability of short-term emergency waivers to change normal Medicaid rules.

Unfortunately, the state of emergency did not support a normal stakeholder engagement process.

The Division used the framework of our existing programming and new federal waivers to develop these payment options as quickly as possible.
Who is this emergency support for?

Family caregivers of people who receive Developmental Disabilities Services through
- Designated Agencies
- Specialized Services Agencies
- Self/Family-Managed Services – Transition II
What are the options?

There are 4 categories of support:

1. Developmental Disabilities Home and Community-Based Services (DD HCBS) Conversion of Family-Managed Funds
2. DD HCBS Flexible COVID-19 Crisis Stipend
3. Increases to Family Managed Respite (FMR) Funds
4. Priority use of One-Time Funds
1. Conversion of Family-Managed Funds
1. Conversion of Family-Managed Funds – Developmental Disabilities Home and Community-Based Services (DD HCBS)

What is this?

This payment takes unused respite or other family-managed funds from DD HCBS (formerly known as “the waiver”) and converts it into a “difficulty of care” payment to parents. Up to $5,000 is available to help maintain the health and safety of a minor or adult child due to the loss of support workers because of COVID-19.

Who can get it?

- The person has DD HCBS funding, and
- The person’s budget has portions that are managed by the family, and
- Parents or other unpaid family caregivers are now providing full time care, and
- There are unused respite or other family-managed funds.
1. Conversion of Family-Managed Funds – DD HCBS continued

How much money is available?
This is a one-time payment of up to $5,000, depending on the amount of family-managed funds that are not spent yet.

When is the money available?
The payment is available from DD HCBS April 1, 2020 through June 30, 2020.

How do I get the funding?
You need to contact your Service Coordinator or Transition II Advisory to find out if this payment option is available to you.
2. Flexible COVID-19 Crisis Stipend

DEVELOPMENTAL DISABILITIES HOME AND COMMUNITY-BASED SERVICES
2. Flexible COVID-19 Crisis Stipend – *DD HCBS*

**What is it?**

This is money to help maintain the health and safety of a minor or adult child with DD HCBS funding. If there are less than $2,000 available to be converted under option #1, this funding can be accessed as a one-time crisis stipend of up to $2,000.

**Who can get the funding?**

The parents or other family caregivers of a minor or adult child when they are providing full time care, and, cannot access typical supports due to the current COVID 19 state of emergency.

**How much money is available?**

This is a one-time payment up to $2,000 total between options #1 and #2.
When is this money available?
The payment is available from April 1, 2020 through June 30, 2020.

How do I get the funding?
You need to contact your Service Coordinator or Transition II Advisor to find out if this payment option is available to you.

What if individual or family needs exceed the available $2000 stipend?
Agencies can work with families to make a request to DAIL for additional funding.
3. Increase to Existing Funds - Family Managed Respite

NON-DD HCBS – FAMILY MANAGED RESPITE
3. Increase to Existing Funds - Family Managed Respite

What is it?

Family Managed Respite (FMR) is an existing program for families to purchase respite. FMR is for families of children and youth with developmental disabilities, or children with mental health conditions, or co-occurring disabilities who do not get HCBS funding.

Who can get the funding?

Parents who have full time responsibility for their children who are under age 21, and who do not have DD HCBS funding. Current FMR guidelines apply.
3. Increase to Existing Funds - Family Managed Respite cont.

How much money is available?

The amount that families not already receiving FMR can get is stated in the FMR guidelines. Families currently getting FMR can get up to 25% more if they have used up their allocation.

How do parents/caregivers access it?

Families should contact their designated agency to apply for these funds.
4. Flexible use of One-Time Funds

NON-DD HCBS – ONE-TIME FUNDS
4. Flexible use of One-Time Funds

What is it?

One-time funds are prioritized for use as Flexible Family Funding or to address a person’s short-term personal health, safety or public safety needs and/or short-term crisis needs.

Who can get the funding?

Any person eligible for developmental disabilities services.
4. Flexible use of One-Time Funds cont.

How much is it?

The amount of funding is based on the specific needs of the person and must meet Flexible Family Funding and One-Time Funding guidance.

How do I get it?

You need to contact your Service Coordinator to find out if this payment option is available to you.
Q & A

• We will review some of the questions that were sent ahead of time.
• Then have time for people to ask additional questions.
• We will create a document with all the answers and post on DAIL and VFN website.
• Some questions we will have to research and get back to you. We will update the Q & A document.
How will families hear this information?

• VFN and DAIL will post this presentation on their websites, along with answers to questions.

• Agencies will reach out to families receiving services to explain options, including translation if needed.

• DAIL will share the information through its stakeholder networks.
What do we need to do and when do we need to do it to receive the stipend?

• Families should work with their provider agency to determine which option pertains to their circumstance.

• The agency will provide assistance with the process.

• Funds are available through 6/30/20, so families should contact their agency by early June to ensure enough time to process payments.
When will guidance be provided to agencies and ARIS so they can process requests?

• DAIL wanted to let families know that some options were going to be made available before some of the operational details had been finalized.

• DAIL is working to quickly address this and get those details out to agencies and ARIS as soon as possible.
For the stipend payments, who is the employer/employee?

• The stipends paid through DDS in options #1 and #2 may be considered tax-free difficulty of care payments.

• They are not considered income for the purpose of federal taxes.

• There is no employer or employee.
How do these payments impact parents’ benefits such as unemployment, SSI, fuel assistance, Reach Up, Food stamps, etc.?

• Unfortunately, DAIL is not able to answer this question.
• Each program has its own rules regarding what is considered income.
• Families will need to consult those programs for answers.
When will families receive payments?

• For the funds under option #1, once a decision has been made regarding the amount of funding to be converted and ARIS is notified of the change, the family will be able to submit the request for payment and ARIS will process the payment.

• For the $2,000 stipend (option #2), this will come from your provider agency. Families will need to work with their agencies to request the funds. Each agency may have a specific process and time frame for making the payments, but the intention is to get them out to families quickly.
What if I have a Unified Service Plan?

• A Unified Services Plan (USP) is a way of blending different funding streams so that services are accessed through a single provider entity in the form of a Developmental Disabilities Home and Community Based Services (HCBS) plan (known as “the waiver”).

• Families who have USP’s can access the options described under #1 and #2 in the document.

• When funds from Children’s Personal Care Services are blended into a USP, they are no longer available separately because the services they are intended to cover will be provided through the agency overseeing the USP.
What program am I in?

• If you have a case manager or other contact at a Designated or Specialized Service agency, you should check with that person for assistance.

• If you are receiving Children Personal Care Services (CPCS), which is administered through the Vermont Department of Health, CSHN, you are receiving regular notices from that program to authorize or re-authorize that service. You can check your paperwork or contact VDH directly to confirm whether you are currently enrolled in the CPCS program.
What is the time period for these funds? What if the pandemic lasts longer?

• April 1 through June 30, 2020.

• The one-time funds available under option #4 will remain available until they are all given out by the agency and can carry over after 7/1/20.

• DAIL will determine if there are funds after 7/1/20 depending on the state of emergency and available funding.
What about those of us in the midst of a re-evaluation/renewal?

• For DDS, agencies have been given some flexibility regarding re-assessments and renewals of Individual Service Plans.

• People currently receiving HCBS will continue to be eligible for services and will not be terminated during the state of emergency, except in a few rare circumstances such as for those moving out of state or into a nursing home.
Some questions we are working on

• DAIL is working on broader policy around background checks. We need to wait for that policy to be completed in order to answer these questions:
  • Do we need to complete the entire ARIS Employer/Employee Packet?
  • Are background checks required to receive the stipend?
  • Will you permit family caregiver background check approvals to be treated as retroactive to the date of the federal emergency declaration?
  • If families getting HCBS are required to go through background checks and the full application process, why aren’t CSHN CPCS required to do the same?
  • Since you are using invoicing, will the State send us 1099's making it eventually taxable?
Resources

Links to DAIL guidance documents referenced in slides:

• Family Managed Respite Guidelines

• Vermont Flexible Family Funding Guidelines

• One Time Funding Guidelines (page 36 – State System of Care Plan for DD Services)