

## **LOUISIANA NEW OPPORTUNITIES WAIVER**

**Waiver Number:** 0401-IP  
**Waiver Type:** 1915(c) - Independence Plus  
**Effective Date:** April 24, 2003

**Target Population:** MR/DD  
**Level of Care:** ICF/MR

### **Phase-in of Self-Direction:**

Louisiana has applied for this home and community-based waiver under the Independence Plus Initiative. Louisiana's waiver will offer traditional and self-directed services. The self-directed portion of the program will be implemented through a three-year phase-in process with 250 participants. During the first year of the phase-in process, only individual and family support services will be self-directed. The fourth year and thereafter, it is expected that the self-direction service option will become available to all waiver recipients and all waiver services will be self-directed. The empirical data collected through the first three years of the phase-in will be used to create a basis for systems changes in Louisiana's home and community-based waivers.

### **Waiver Services:**

The waiver offers respite, habilitation (residential habilitation, day habilitation, supported employment services, employment related training), environmental accessibility adaptations, skilled nursing, specialized medical equipment and supplies, personal emergency response systems, adult residential care, individualized and family support, community integration development, professional services, professional consultation, transition start up expenses, and transitional professional support services. This waiver replaced waiver #0200.90.R1.

### **Cost Neutrality Estimates:**

Average per capita waiver and state plan services for participants are expected to be \$49,746 in the first year. Average per capita institutional and state plan services for the comparable population cost \$65,213. Thus average per capita cost savings in the first year are projected to be \$15,467.

### **Number of People Served (includes traditional and self-directed portions):**

Year 1: 4,251

Year 2: 4,576

Year 3: 4,776

### **Waiver Operating Agency:**

The Bureau of Community Supports and Services, a separate division within the Single State agency, will operate the waiver.

### **Supports Brokerage:**

Supports Brokerage is provided by targeted case managers and includes the following:

- Educates the family about the service planning process
- Elicits information from the individual or family regarding their preferences, goals and service needs

- Assists with the identification of direct supports, community, public and private resources
- Monitors consumer satisfaction and service delivery
- Initiates and facilitates planning meetings

Life Perspective Teams also perform an advocacy role. Self-direction training for individuals, families, and case managers is provided by the state.

### **Financial Management Services:**

The state will contract with qualified a vendor to serve as a Fiscal Agent through the issuance of a Request for Proposals (RFP) Process. The main components of the Fiscal Agent's activities include:

- Consultation with recipients on Fiscal Agent activities
- Timely processing and payment of invoices including tax and payroll functions consistent with Medicaid and state requirements
- Providing monthly expenditure reports to BCSS and the consumer
- Insuring all federal reporting, i.e. employee Social Security, Medicare, Workers Compensation and tax withholding required is completed timely
- Timely tax preparation for the consumer
- TTY Line
- Quality Assurance/Quality Improvement Plan including annual self-evaluation
- Generating reports to BCSS as requested
- Grievance Process-a method of receiving, responding to and tracking complaints from individuals/representatives within a reasonable time
- Toll-free phone line for recipients to access the Fiscal Agent Contractor to include a method for receiving, returning and tracking call from individuals/representatives and case managers during and after regular working hours (8 AM to 5 PM) with voice mail available after regular hours
- Utilization of an annual independent financial audit
- Maintaining documentation of all activities including contacts with recipients

The overall objective for the Fiscal Agent is to provide fiscal guidance and support to assist the consumer to achieve or maintain his/her independence and desired personal outcomes by honoring the principles of self-determination.

### **Person-Centered Planning:**

The principles of consumer direction are the principles that guide all activities of this waiver. Self-direction, is defined as a voluntary waiver and participants or his/her appointed advocate has the right to choose what services and/or supports best fit their individual needs through the Person-Centered Planning process and where those services will be delivered. In addition, those participating will have the right to hire, fire, train and schedule workers who are expected to provide the necessary direct services.

### **Individual Budgets:**

The Individual Budget is arrived at by identifying the individual's service and support needs, identifying natural supports, identifying all available public and private supports and using the person centered planning. This level of care/needs is then applied to the services provided by the waiver and rates/cost per service are applied and the entire budget for the year is developed. In

subsequent years, the previous year's budget will be the starting place for developing the new budget.

**Quality:**

Under the state's quality program:

- Criminal background checks are required and available either through the financial management services or direct service provider.
- The plan of care must include plans for emergency backup as well as plans for natural disasters and other emergencies based on the individual's specific needs and availability of informal support systems. In addition to the participant's individualized plan in the CPOC, direct service providers must maintain Emergency Back-up Systems.
- Complaints and critical incidents are investigated and resolved by the state.
- Routine monitoring used to determine if services are being delivered as specified in the plan of care and the program participant's needs are appropriately met
- Feedback is obtained from the program participant and his/her family on the satisfaction of the delivered service(s)
- Information gathered during the discovery processes listed above are used to assess the program and make changes as needed.