

1301 AGENCY WITH CHOICE

EFFECTIVE DATE: January 25, 2023

REFERENCES: AMPM Policy 1310-A

PURPOSE

The purpose of this policy is to outline requirements for the Agency with Choice (AWC) Member-directed service delivery model option as specified in A.A.C. R9-28-509. This policy applies to Members who have selected the AWC model and the Division staff supporting the Members.

DEFINITIONS

1. "Agency with Choice (AWC)" means a Member-directed service delivery model option offered to ALTCS Members who reside in their own home. Under the AWC option, the provider agency and the Member/IR enter into a partnership agreement. The provider agency serves as the legal employer of the Direct Care Worker (DCW) and the Member/IR serves as the day-to-day managing employer of the DCW.
2. "Direct Care Worker (DCW)" means an individual who assists elderly individuals or individuals with a disability with activities necessary to allow them to reside in their home. A DCW, also

known as Direct Support Professional (DSP), is employed/contracted by DCW Agencies or, in the case of Member-directed options, employed by ALTCS members in order to provide services to ALTCS members.

3. “Direct Care Worker (DCW) Agency” means an agency that registers with AHCCCS as a service provider of Direct Care Services that include Attendant Care, Personal Care, Homemaker or Habilitation.
4. “Electronic Visit Verification (EVV)” means a computer-based system that electronically verifies the occurrence of authorized service visits by electronically documenting the precise time a service delivery visit begins and ends, the individuals receiving and providing a service, and type of service performed.
5. “Individual Representative (IR)” means, for AWC only, a parent, family member, guardian, advocate, or other individual authorized by the individual to serve as a representative in connection with the provision of services and supports, as specified in A.A.C. R9-28-509.

- a. If a Member is unable to fulfill the co-employment roles and responsibilities on their own, an IR may be appointed to assist the Member in directing their care.
 - b. The role of an IR is to act on the Member's behalf in choosing and directing care, including representing the Member during the service planning process and approving the service plan.
 - c. A.A.C. R9-28-509 and Section 1915(k) of the Social Security Act, prohibit an IR from serving as a Member's paid DCW.
6. "Member" means an individual who is receiving services from the Division of Developmental Disabilities (Division).
 7. "Service Plan" or "Person Centered Service Plan (PCSP)" means a complete written description of all covered health services and other informal supports that includes individualized goals, peer-and-recovery support and family support services, care coordination activities and strategies to assist the Member in achieving an improved quality of life.
 8. "Support Coordinator" means the same as "Case Manager" under

A.R.S. § 36-551.

POLICY

A. MEMBER'S ROLES AND RESPONSIBILITIES UNDER AGENCY

WITH CHOICE

1. Members shall make decisions about who will provide their services, when those services will be provided, and how the services will be provided when selecting the Agency with Choice (AWC) model.
2. The Member and the provider agency shall share employment/day-to-day management, roles, and responsibilities of the DCW.
3. Members may opt in and out of the AWC at any time by notifying the provider agency and their Support Coordinator.
4. At a minimum, the Member shall have two responsibilities which they shall carry out, if necessary:
 - a. Recruiting and selecting the DCW(s). This includes:
 - i. Identifying the qualifications, skills, and characteristics of a DCW, over and above the minimum AHCCCS and provider agency

- qualifications, that are necessary to meet the individual Member's needs, and
- ii. Selecting the DCW from a pool of DCWs already employed by the provider agency or recruiting the DCW from the community to become an employee of the provider agency.
 - b. Dismissal of the DCW(s). This includes:
 - i. Identifying whether or not the Member is satisfied with the care provided by the DCW, and
 - ii. Making the decision to dismiss the DCW from providing their care only.
5. The Member may choose to carry out some or all of the following additional responsibilities:
- a. Training the DCW(s), and
 - b. Identifying training needs, over and above the minimum required training by AHCCCS or the provider agency, that are necessary to meet their unique needs.
6. The Member shall manage the DCW(s) by:

- a. Orienting the DCW to the manner in which they want the services provided;
 - b. Determining the schedule for the DCW, including the days/times when the specific tasks will be done; and
 - c. Verifying the dates and times the DCW provides the service.
7. The Member shall supervise the DCW(s) by:
- a. Providing oversight and instruction to the DCW to ensure they are receiving quality care,
 - b. Communicating regularly with the provider agency about the DCW's performance, and
 - c. Providing feedback to the DCW regarding their performance.
8. The Member shall communicate with the provider agency regarding changes in service delivery by:
- a. Notifying the provider agency when the DCW does not show up or cannot provide services that day, and
 - b. Notifying the provider agency when a service scheduling change has occurred.

B. SUPPORT COORDINATOR'S ROLES AND RESPONSIBILITIES

In addition to the Support Coordinator Standards specified in AMPM Chapter 1600, the Support Coordinator shall be responsible for the following for Members electing AWC:

1. Informing and educating Members about the AWC option including verifying that Members electing AWC understand required and optional roles and responsibilities;
2. Supporting the Member to assess whether or not they desire or need an IR to assist them in directing their care. The Support Coordinator shall use AMPM Policy 1310, Attachment B, to document the name and relationship of the IR to the Member and their respective roles and responsibilities;
3. Supporting the Member to recruit and select the DCW(s):
 - a. Presenting options to the Member for recruiting and selecting the DCW(s):
 - i. Selecting the DCW from a pool of DCWs already employed by the provider agency, and
 - ii. Recruiting the DCW from the community to become an employee of the provider agency.

- b. Assisting the Member in identifying qualifications, skills, and characteristics of a DCW that are necessary to meet their needs;
 - c. Assisting the Member in identifying how many DCW(s) they might need to provide their care;
 - d. Assisting the Member in identifying and initiating contact with a provider agency.
4. Supporting the Member to dismiss DCW(s):
- a. Assisting the Member in utilizing conflict resolution strategies with the DCW and the provider agency in the event they are unsatisfied with the DCW(s) or the provider agency's performance, and
 - b. Assisting the Member to develop a transition plan to ensure there are no interruptions in the provision of care.
5. Supporting the Member, as needed, to receive training regarding their roles and responsibilities:
- a. Assisting the Member in identifying whether or not they need training to fulfill their roles and responsibilities, and

- b. Finding a provider to conduct the training and authorize the service.
- 6. Supporting the Member to train DCW(s):
 - a. Assisting the Member in identifying whether or not additional training is required for the DCW in order to meet Member specific needs,
 - b. Ensuring the requested training is within the service scope specifications for DCW training as specified in this policy, and
 - c. Finding a provider to conduct the training and authorize the service.
- 7. Supporting the Member to manage DCW(s):
 - a. Ensuring care provided is within the scope of services and the service hours authorized and specified in the Service Plan; and
 - b. Ensuring Members understand what services need to be provided on a specific basis, versus services that are more flexible with regard to when they are provided.
- 8. Supporting the Member to supervise DCW(s):

- a. Encouraging Members to communicate directly with the DCW and the provider agency particularly when it pertains to DCW's performance and/or quality of care concerns, and
 - b. Following up with Members to inquire about their progress in implementing AWC.
9. Obtaining and maintaining a current copy of AMPM Policy 1310-A, Attachment A, supplied by the DCWs.

C. PROVIDER AGENCY ROLES AND RESPONSIBILITIES

The roles and responsibilities of Provider Agencies shall be as outlined in Provider Policy Manual, Chapter 46.

SUPPLEMENTAL INFORMATION

AWC is a Member-directed option that allows Members to have more control over how certain services are provided, including services such as attendant care, personal care, homemaker, and habilitation. The Member-directed options are not a service, but rather define the way in which services are delivered and are available to ALTCS members who live in their own home. The options are not available to Members who live in an alternative residential setting or nursing facility. Member independence and personal choice are the primary objectives of the AWC Member directed option.

Members choosing to participate in the AWC Member-directed option shall be interested in actively taking responsibility for managing their own health care. Throughout the Policy, the term “Member” means the Member or the Member’s IR. Member-directed options represent a philosophical approach to service delivery that maximizes a Member’s ability to:

1. Identify their own needs.
2. Determine how and by whom their needs are met:
 - a. Choose which tasks to receive from their DCW or ACW within the scope of the Service Plan;
 - b. Select the days and times for service delivery; and
 - c. Recruit, hire (select), manage, supervise, and terminate (dismiss) the DCW of his/her choice, including family members. Parents of minor children are prohibited from serving as a paid DCW.
3. Define what constitutes quality of care in the delivery of their services. ALTCS members can direct care for one or more services under the AWC option including, Attendant Care, Personal Care, Homemaker, and Habilitation (in-home/day). The DCWs serving Members under the AWC option shall be

employees of the Provider Agency, in order to fulfill the legal employer roles and responsibilities in partnership with the Member's managing day-to-day employer roles and responsibilities. If a Member is unable to fulfill the roles and responsibilities as specified in AMPM 1310-A, Attachment A, for the above listed services on their own, an IR may be appointed to assist the Member in directing their care. If a Member has a guardian, that guardian automatically serves in the capacity of an IR. The role of an IR is to act on the Member's behalf in choosing and directing care, including representing the Member during the service planning process and approving the Service Plan. A.A.C. R9-28-509 and Section 1915 (k) of the Social Security Act prohibit an IR from serving as a Member's paid DCW. The number and frequency of authorized services are determined through an assessment of the Member's needs by the Support Coordinator with the Member and/or the Member's family, health care decision maker, and their designated representative, in tandem with the completion of the cost-effectiveness study. Refer to the FFS Provider Billing Manual

for information regarding service codes and modifiers. Members are not precluded from receiving other medically necessary services. Refer to AMPM Policy 1240-A for more detailed information about the services ALTCS members can direct under AWC. Within AWC the Member, the provider agency, and the Support Coordinator are critical to the effective implementation of the Member's Service Plan. Each of these individuals has roles and responsibilities which shall be met in order for the Service Plan to be successful.

Signature of Chief Medical Officer: 
[Anthony Dekker \(Jan 20, 2023 08:47 MST\)](#)
Anthony Dekker, D.O.