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MEDICAID INFORMATION RELEASE 2007-11

TO: **Certified Family Homes, DD Service Coordinators, Mental Health Case Managers, Res-hab Affiliate Agencies**

FROM: **Leslie M. Clement**
Administrator

SUBJECT: **Placement of residents into Certified Family Homes**

This information release outlines new policies and procedures related to placement of residents into Certified Family Homes.

Effective May 1, 2007, all non-emergency placements into Certified Family Homes (CFHs) must be pre-approved by the Department of Health and Welfare.

We have experienced problems with case managers, service coordinators, res-hab affiliate agencies, and other service providers moving clients from one CFH to another without notifying the Department. There are instances when this has led to inappropriate/illegal placements, created reimbursement issues for CFH providers (both the losing and gaining CFH), and resulted in adverse outcomes for residents.

Idaho Statute §39-3501 tasks the Department to *"monitor and enforce"* the provisions of the statute. In Section §39-3505, the statute authorizes the Department to *"promulgate appropriate rules necessary to implement and enforce the standards for certified family homes"* including to the requirement to *"ensure the care provider has sufficient resources to maintain the home and provide the necessary services"*. The Department is also tasked to *"assure a safe, sanitary, and comfortable environment for residents of certified family homes."* (§ 39-3504).

The Department cannot fulfill its statutory duties unless it is fully aware of what is happening in Certified Family Homes.

Non-Emergency Placement Process:

The process for prior coordinating non-emergency placements begins with evaluating resident needs and the ability of the new CFH to meet those resident needs.

- For residents on the Developmental Disabilities waiver, the person centered planning process must be used. The Plan Developer/Service Coordinator should involve the Residential Habilitation Affiliate Agency, the new CFH provider, the guardian (if appropriate), the client, and other supports the client deems appropriate to ensure resident needs are identified. The plan must outline those services necessary and who will provide those services. Once the plan has been completed, the Plan Developer will inform the regional certified family home staff in their region of the placement. The Department will ensure the new CFH has the appropriate certification and resources available to provide the needed services. The Department will establish an effective date for the plan and ensure necessary prior authorizations are updated and the parties identified in the plan are notified.

- For residents on the Aged and Disabled Waiver, the resident, the resident's guardian (if available), the new CFH provider, and the Regional Medicaid Nurse Reviewer will review the current Negotiated Service Agreement to ensure the plan is current and meets resident needs. If not, the plan will be updated. The agreement should include plan of care, history and physical exam performed by a licensed physician or nurse practitioner (dated within six months prior to admission), a list of medications, dietary constraints (if any), and treatment(s) prescribed for the resident. The plan must outline those services necessary and who will provide those services. The Department will ensure the new CFH has the appropriate certification and resources available to provide the needed services. The Department will establish an effective date for the plan and ensure necessary prior authorizations are updated and the parties identified in the plan are notified.

- For private pay residents, the care plan should be sent to the Regional Medicaid Certified Family Home staff. The Department will ensure the new CFH has the appropriate certification and resources available to provide the needed services. The Department will notify the new CFH provider when the placement is approved.

Providers should establish an admission agreement, prior to admission that is signed by potential resident (or designee) and the provider. Reimbursement for services will be based on the date of the admission agreement and/or the date the plan is approved by the Department (whichever occurs later). The Department will not authorize payment for services to a client if the services were rendered prior to the completion of these documents.

Emergency Placement Process:

Emergency placements, although rare, do happen. They usually involve taking protective steps to assure the safety and well being of residents. Whenever possible, the Department should be notified of situations prompting emergency placement before hand. The Department has a complete listing of potential CFH placements (to include temporary and/or respite placements) and can help assist with finding an appropriate placement/provider to meet resident needs.

The process for emergency placements is to contact the regional CFH staff person through the local RMS unit as soon as possible, but no later than the next business day. The Department will prioritize pending assessments, and expedite assessments that, in its discretion, it considers emergencies, including reassessments of clients whose needs have changed. The Department will ensure necessary authorizations are approved to ensure provider payment for Department clients.

Not all emergency placements will turn into long term placements. Once the resident is placed in a safe, effective setting, the non-emergency process described above can be used to find a more permanent placement.

Contact Information:

Questions surrounding CFH placements should be forwarded to the Certified Family Home staff in the regional offices. Their contact information is as follows:

- Region 1 208-769-1567, Ext 283;
- Region 2 208-799-4431;
- Region 3 208-455-7129; or 208-455-7160;
- Region 4 208-334-0831;
- Region 5 208-732-1475;
- Region 6 208-239-6261;
- Region 7 208-528-5720;

Questions surrounding this IR should be directed to the statewide Certified Family Home Program Manager, Karen Vasterling, at (208) 239-6260.

LMC/rm