

# ***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 and is available statewide.

Independent Choices provides consumers with flexible cash benefits that are based on their individualized plans. The monthly benefit allows participants to direct and manage their personal assistance services and address their specific needs. Agencies that provide benefits such as Section 8 or social security are excluded from the monthly IC benefit as a cash resource.

## **WHO May Enroll in the Independent Choices Program?**

People who are eligible for In-Home Support Services (for aged and individuals with disabilities) or are eligible for the program may participate if they demonstrate a stable living situation and financial responsibility. There are some 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 flexibility in how they meet personal assistance and in-home needs. An individual can select and purchase any services or goods that enable them to continue living at home and enhance or maintains their general welfare and independence.

Participants may hire family members, their spouse, neighbors and other interested applicants (including home care workers) to provide their care. As a Household Employer, they decide 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 and spend the cash benefit in accordance with the budget. They must hire and employee provider and pay this provider.

IC participants are responsible for meeting all legal and fiscal responsibilities as household employers. (For example, they

must withhold FICA, FUTA and SUTA from their employees' paychecks and send payroll taxes to the appropriate government agencies at the end of the tax year, etc.) These amounts vary from participant to participant, depending on the amount of wages, if any, paid to employees during the tax year. Program participants may **use** a portion of their IC benefits (money that is put into a discretionary fund) to purchase a payroll service to assist them in meeting their 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. 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 the 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 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 isn't 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](mailto:Kelsey.C.Weigel@state.or.us)