



The Family Caregiver Guide **For Services in the HCBS-DD** **(Comprehensive) Waiver**

“Options and Choices”

*For Colorado citizens with intellectual and
developmental disabilities and their families*

September 2011



Achieve with us.

This guide is distributed through chapters of The Arc in Colorado. The purpose is to give individuals receiving services and their families the information needed to understand the option available under the Family Caregiver Act. The guide was jointly developed by a group of family members, The Arcs, Program Approved Service Agencies and CCBs. While some of the opinions and recommendations in the guide may not be jointly shared by all parties, they are included in order to give a complete perspective of the Family Caregiver option.

PART 1: WHAT IS THE FAMILY CAREGIVER OPTION?

The **2008 Family Caregiver Act** was fully implemented in November 2010. The Family Caregiver Act allows a person already receiving services funded by the Division for Developmental Disabilities (DDD), to receive those services in a place of their choice and by a person of their choice. Family Caregiver is a service option and not a program.

In previous decades, it was necessary for adults with disabilities to leave their home in order to receive services. However with the implementation of the Family Caregiver Act, an option was created which lifts that restriction and allows persons receiving residential services to receive those services in a place of their choice and by a person of their choice. This guide includes a huge amount of information and focuses on the residential supports in this waiver. It will need more than a couple readings. All situations are individualized and will include paid support and maybe some unpaid support time to meet your needs. Please take the time to have your questions answered and envision how this may work for you.

The Family Caregiver option offers excellent and creative possibilities.

REFERENCE TO “YOU” OR “YOUR” THROUGHOUT THIS GUIDE REFERS TO THE PERSON RECEIVING SERVICES.

WORDS FOR UNDERSTANDING THIS GUIDE

Person with I/DD	Refers to a person with Intellectual or Developmental Disabilities
Family Caregiver	A family member who provides care to the person with an intellectual or developmental disability where the person lives. <ul style="list-style-type: none"> • Paid family member who meets the requirements for a qualified Family Caregiver and is working through a Program Approved Service Agency or CCB • Non-Paid family member who offers support
C.R.S.	Colorado Revised Statute (Colorado law). Accessed at www.michie.com/colorado .
Case Manager	Also known as a Resource Coordinator (RC), Service Coordinator or Support Coordinator. This is the first person to call and talk to about the Family Caregiver option.
CCB	Community Centered Board (CCB) is the single point of entry for waiver and state funded services for persons with intellectual or developmental disabilities and is responsible for case management services. Some CCBs have their own Program Approved Service Agency in addition to CCB functions.
CNA	Certified Nurse Aide available through the State Medicaid Plan, not a waiver service
DDD	The Division for Developmental Disabilities (DDD) approves and monitors the HCBS-DD waiver services for adults with developmental disabilities.
Direct Support (Direct Care)	A paid person, related or not, is directly involved with you in at least one residential service.
Family	A mother, father, brother, sister or any combination, extended blood relatives such as grandparent, aunt, uncle, cousin, an adoptive parent, one or more individuals to whom legal custody of a person with I/DD has been given by a court, a spouse, or your children.
HCBS-DD Waiver	Home and Community Based Services is a Medicaid waiver providing residential services and supports for adults, also known as the comprehensive waiver or residential services.
HUD	Housing & Urban Development (Quality Standards) requires your home be maintained to make sure it is a healthy & safe environment. It must also have adequate emergency exits (a checklist of HUD requirements is available from the Agency).

IDT	Interdisciplinary Team includes you, your family members, friends, Case Manager, allies, advocates and providers. Basically anyone of your choice who can assist with making decisions.
Least Restrictive Environment	Details in PART 1 Section C.
Legal guardian	This is based on court action appointing a Legal Guardian for a person 18 years of age or older. Legal Guardianship does not mean legal responsibility to provide care for a person or financial responsibility for their physical care. A Legal Guardian is not held legally responsible for a person's actions. A Legal Guardian is responsible for making decisions in accordance with the terms of the guardianship.
Legally responsible person	Spousal relationships are considered responsible to share in the physical and financial care of one another. Therefore, federal Medicaid defines a spouse as a legally responsible person. A court appointed legal guardian is not considered a legally responsible person.
Natural supports	The supports and supervision offered by non-paid persons, related or not.
OHCDs	Organized Health Care Delivery System: Has the ability to do an independent contract in order to deliver services to an individual. The CCB is the OHCDs for the Developmental Disability system.
PASA (Agency)	Program Approved Service Agency. Agency Program Approval is authorized by DDD and is specific to a type of service. Hereafter referred to as the Agency.
SIS	The Supports Intensity Scale is used by Colorado to determine an individual's level of need.
SP	Your annual Service Plan (SP) is the written document that defines your needs, desires and services.
Waiver resource	The DD system term for the money allocated to you for specific services when you are enrolled in a Medicaid waiver program. It is sometimes called a "slot".

A. WHY WOULD YOU CHOOSE THE FAMILY CAREGIVER OPTION?

You can live in your own home or in the home of a family member and

- Your family members may be hired to provide services, or
- You can have a paid non-related person provide those services.

B. HOW FAMILY CAREGIVER WORKS FOR ALL SERVICES IN THE HCBS-DD WAIVER

1. You must already have a resource for this residential waiver in order to use the Family Caregiver option. The funding level for your services is based on your SIS level. Participation in Family Caregiver does not change the current funding available. It is no more or no less. Funding changes only occur when your needs change, the state changes the established rates or the Colorado budget changes. For current information, contact your Case Manager.
2. Residential services mean you have access to help any time you need it.
3. Your services and supports must be identified in your annual Service Plan. The IDT must make sure the needs listed in the plan can be met. The SP also states the amount of time (and if) you can be safely independent of supervision or safe on your own.
4. Your IDT makes the recommendation to use the Family Caregiver option. Your Case Manager or some members of your IDT may not agree with using Family Caregiver. There may be really important reasons for this and you need to ask them exactly why they disagree. You can always ask for help from different people:
 - a. Call the person who supervises the Case Manager
 - b. Call DDD and talk to the person who manages Family Caregiver in that office
 - c. Call your local chapter of The Arc
 - d. Call the Legal Center
5. The Family Caregiver option must meet the Least Restrictive Environment criteria in PART 1 Section C.

6. There are Federal Medicaid and Legally Required Protections for everyone receiving services in this waiver
 - a. You must live in a healthy environment, be kept safe from harm and assured that your medical needs are met.
 - b. Your *Individual Rights* as defined in Colorado Statutes must be assured. (Ask your Case Manager if you don't have a copy of your rights.)
7. You and your family must choose an approved service agency willing to support the Family Caregiver option or a CCB willing to use the independent contractor option.
8. A paid Family Caregiver must be able and willing to meet any requirements of employment specific to the Agency or an independent contractor specific to the CCB.
9. The residential Agency is always required to help you. There may be times your paid support person cannot be with you because of an illness or emergency. You, your family and the Agency need to have a backup plan to support you.
10. Any Agency can have additional requirements based on their policies and procedures. These should be shared with you prior to your choice of an Agency.
11. It is the responsibility of everyone involved in your life to ensure you are free from abuse, neglect, mistreatment and exploitation, and that your rights are not violated. Everyone must understand this process and know to whom and how to report any concerns.
12. If you decide you don't want to use the Family Caregiver option after trying it out, you can just choose a different service delivery option. You keep your waiver resource and stay in services while you are making the change.

C. LEAST RESTRICTIVE ENVIRONMENT and Typical Patterns of Daily Living

Your life should be a lot like other people your same age. It is important to consider all aspects of your life when you think about this. You should have typical times you go to bed, participate in routine activities, go shopping or participate in recreational activities. Your choices include:

1. Choosing your activities and what you want to do in the community (e.g. recreation, getting together for meals, and attending places of worship).
2. Receiving help for activities such as cooking, shopping, laundry, housekeeping, etc. that lets you be as independent as possible.
3. Helping with your personal care activities, e.g., bathing, dressing, etc., to promote independence and ensure appropriate hygiene, grooming and dress.

This is required in Colorado law C.R.S. 27-10.5-102 (24)

D. LEGAL GUARDIANSHIP and the Family Caregiver Option

In April 2011, Colorado law changed and legal guardians of adults can now be paid Family Caregivers without having to return to the court. DDD is in the process of reviewing the September 18, 2010 Advisory Memorandum about the dual role of guardianship and paid Family Caregiver responsibilities. DDD will make revisions as necessary.

PART 2: THE BASICS

A. SERVICE INFORMATION

Services in this waiver include:

- | | |
|-------------------------|---|
| a. Residential services | d. Non-Medical Transportation |
| b. Day habilitation | e. Behavioral, Dental & Vision Services |
| c. Supported employment | f. Specialized Medical Equipment & Supplies |

Not everyone needs all of these services. They are based on your needs and priorities.

Residential services are defined as “access to 24-7 supports”. Direct supports are provided based on the needs and services in your annual SP. Residential services are defined as:

1. Self-advocacy training
2. Skill training
3. Follow-up counseling, behavioral or other therapeutic interventions
4. Medical and health care services
5. Emergency assistance training
6. Community access services
7. Transportation to get you places
8. Supervision supports

Day Habilitation Services and/or Supported Employment are not part of residential services and are provided outside of your home. If you are requesting these services take place in your home, the Agency must provide evidence that it is necessary due to your medical or safety needs. The funding for day habilitation, supported employment and related transportation is paid separately and in addition to the residential daily rate. The Family Caregiver option can be used to provide these services.

B. RESIDENTIAL SERVICE OPTIONS

1. Host Homes: Individuals typically live in another person’s home and may have a housemate who is also receiving services. Host Homes have contracts with Agencies and must be available 24 hours a day. Host Home Providers are not family members of the person receiving services.
2. Personal Care Alternatives (PCA): Individuals may share the residence with one or two other individuals receiving services or it may just be you receiving services. They have staff paid on an hourly basis and have coverage available 24 hours a day.
3. Group homes: Four to eight individuals receiving residential supports live together. Staff coverage is typically 2-3 staff at all times with 24 hours a day onsite support.
4. Your Home: You may own your home, live in an apartment with or without a roommate, have a family member live with you or live in a family member’s home. In general, you will receive a scheduled number of paid support hours in a week and have access to paid staff to support you for the other hours in the week in case of an emergency.

DDD refers to Host Homes, PCAs and your home as Individual Residential Services and Supports (IRSS). Group homes are Group Residential Services and Supports (GRSS)

C. RESIDENTIAL REQUIREMENTS ESTABLISHED BY DDD

DDD requires the following in all residential environments.

1. Pass the safe conditions included in a HUD inspection, which includes maintaining a safe environment in the home (including all home repairs, property maintenance costs and routine housekeeping). If you do not own your home, you are responsible for resolving any problems with the landlord.
2. Allow people involved in your life and those responsible for monitoring all residential services into your home.
3. Develop and agree to a health and safety plan for yourself. The plan describes what you can do for yourself, what you can learn to do and what you need help doing to stay safe.
4. Help your family share information with the Agency that is necessary to maintain your Medicaid eligibility. This would include your financial information (not your family’s information), such as your SSI amount, any income from your work or any other benefits you may receive (such as Railroad Retirement, Social Security, and Social Security Disability Insurance - SSDI).
5. All residential service agencies operate under and must meet DDD requirements.
6. The Agency may have additional requirements based on their policies.

D. WHAT IS THE AVAILABLE FUNDING for residential services and WHAT DOES IT PAY FOR?

Rates for residential services refer to the dollars per day paid to Agencies to provide residential supports. Rates are determined the same way for all Colorado waiver participants according to their Supports Intensity Scale (SIS) assessment. SIS levels are assigned a daily residential rate level. See table in PART 3 Section E.

The **Basic requirements** of the Agency are to assure that services are delivered and

- a. All services are based on your needs as defined in your Service Plan (SP);
- b. Direct support hours are provided to you; and
- c. There must always be access to emergency supports provided by the Agency on a 24/7 basis.

The daily rate provided to the Agency is used for the following:

- 1. Administrative fees & program service fees** are a percentage of the daily rate. All of the administration costs and program service costs listed below are paid out of this portion of the daily rate kept by the Agency.

Administrative costs of any agency doing business include but are not limited to office space, maintenance, equipment, administrative support staff, financial services, etc.

Examples of program service costs include:

- a. Program manager to support and monitor your needs
- b. Nursing fees
- c. Nutritional consultation
- d. Assuring documentation is completed
- e. Backup residential supports if you or your provider need a break or paid staff is unavailable for any reason
- f. Travel (mileage) costs for staff

- 2. Costs associated with the individual needs of the person** such as behavioral services, counseling, specialized medical equipment and other services covered under this waiver.

- 3. Direct staff costs include:**

- a. Hourly wage
- b. An average cost of payroll taxes (Social Security, Medicare, Worker's Compensation and Unemployment Compensation). All these rates vary, but a good estimate is an additional 12.15% over the hourly rate.
- c. A factor to allow for staff coverage during sick time and vacation time
- d. May or may not include overtime costs and emergency coverage costs
- e. May or may not include medical insurance coverage for the paid staff

E. COLORADO MEDICAID STATE PLAN BENEFITS

If you are receiving services in this waiver, you are covered under Colorado Medicaid. Colorado Medicaid is your health insurance plan (also known as State Plan benefits). Along with coverage for your medical care there are skilled nursing care, CNA and home health services available if you meet the eligibility criteria for those specific services. These services may be provided in conjunction with waiver services, however, they cannot happen at the same time of the day, nor can duplicate services be provided through the HCBS-DD waiver. Your Case Manager can help you understand how this works. State Plan Benefits are not part of any waiver.

PART 3: APPLYING THE BASICS to FAMILY CAREGIVER

A. WHAT ARE YOUR CHOICES UNDER THE FAMILY CAREGIVER OPTION?

1. HCBS-DD does not allow a Legally Responsible Person (spouse of the individual receiving services) to be paid to provide services under this waiver.
2. If you and your family members work well together, you may want to have them paid to help you.
3. If no one in your family is available or if you want someone else to help you, your choices are:
 - a. Someone who works for an Agency will provide direct support to you in your home, or
 - b. Someone who works for an Agency may even live with you in order to provide supports.
4. You can always choose to ask the Agency to have both a family member and a person not related to you get paid to help you.
5. If you don't want to live with your family member, you could ask your agency to hire them to help you where you live now.
6. You can consider having your family member live with you and have the Agency provide the supports and services listed in your Service Plan.
7. You may have other options you want to consider, always ask about those possibilities.

B. A FAMILY CAREGIVER CANNOT BE PAID TO PROVIDE THE FOLLOWING:

1. Behavioral Services
2. Vision Services
3. Dental Services
4. Specialized Medical Equipment and Supplies

C. PEOPLE WHO PROVIDE NON-PAID SUPPORTS WILL NEED TO DO THE FOLLOWING:

1. Your family needs to help meet your protections described in PART 1 Section B #7.
2. You and your family need to work with the Agency to determine how your needs are going to be met.
3. In addition to the DDD requirements, the Agency you choose may have additional requirements based on their policies. There may be daily paperwork requirements to record services.

D. HOW CAN MY FAMILY MEMBER GET PAID TO SUPPORT ME?

1. A paid Family Caregiver, who may or may not be living with you, can work for an Agency. You will need to choose an approved Agency. Your Case Manager is not permitted to refer you to any specific agency but can send information to Agencies on your behalf. You can also call Agencies directly. The Agency is responsible for hiring, training, and supporting paid staff to provide direct supports to you. Anyone paid to support you has to be at least 18 years old. The rate of pay is established by the agency.
2. You may have a family member who decides to take the steps to become an agency like some other families in Colorado have done. If you are interested, please contact DDD at (303) 866-7450.
3. Your family member may become an independent contractor with the CCB (as the OHCDs). The CCB is not required to offer this option. There are several external requirements that must be met as an independent contractor for which the CCB is held responsible. You will need to have this discussion with your CCB. Currently, a Program Approved Service Agency (PASA – the Agency) is not able to independently contract with a family member. For updated information or further clarification, call DDD.

Any of these options may require Background Checks.

Why Can't My Family Member Just Be A Host Home Provider?

Host Homes for adults are a unique type of residential service. Colorado had to implement it under the Federal Foster Care Act. The Federal Foster Care Act does not cover payments to biological family members. Family Caregivers do not meet the DDD rule definition of "Host Home Providers". You can call DDD if you have additional questions.

E. HOW MUCH REGULARLY SCHEDULED & PAID DIRECT SUPPORT CAN I GET?

Residential services should always provide the supervision and supports defined in your SP and assure the protections in PART 1 Section B #7. The Family Caregiver option in HCBS-DD services is very personalized and your funding is used only for you, not a roommate or other family members.

Many times the costs for paid direct support are shared among two or more people receiving services. Most Family Caregiver circumstances will most likely be individualized. Colorado rates will probably not cover all direct supervision and support for people in an individual setting every hour of the day. Your family or other non-paid people may need to help you. It will be necessary for you, your family and the Agency to work together to succeed at meeting your support needs. If your family can't help with non-paid support, some agencies may not be able to offer the Family Caregiver option. You might have to talk with more than one agency.

The Agency and family members should determine the supervision/activity coverage scheduled for paid staff and non-paid support. The table below gives estimated time available for paid direct support in all SIS levels and also shows the estimated time that may need to be covered by non-paid support. Please keep in mind that how much your staff is paid per hour may impact the amount of paid hours of support you will get. In other words, if your family will work for \$8.00/hour instead of \$12.00/hour, the money stretches to cover more hours.

The table below is an **EXAMPLE** of what may be provided. The data used to determine the hours of support includes:

1. Colorado's daily residential rates
2. Administrative and Program fees generally range from 30% (defined by some Agencies) and 49% (used in Colorado's rate study). The Chart below uses an average fee at 40% of the daily rate.
3. An average Agency paid staff salary of \$12.00 per hour. You can pay less or more and it will impact the number of paid direct support hours available to you. Payroll taxes and the cost to cover employee absences add about 12.15%, bringing the total to \$14.60/hour. This example does not include medical insurance coverage, any benefit package not required by labor law or any compensation for overtime or emergencies.
4. Does not adjust for any individual alone time that may be documented by the IDT.
5. Hours for day program & transportation for day program are not included in the chart below.

The result of this data is an estimate of the paid support you may have and non-paid support you may need.

SIS Level	Residential Daily Rate	Administrative & Program Fee : percentage of rate @ 40%	Average weekly hours of paid direct service. Divide by 7 for average daily residential hours	Average weekly hours of non-paid support (not including sleep hours) Divide by 7 for average daily hours
1	\$59.86	\$23.94	17.5	66.5
2	\$96.73	\$38.69	28.0	56.0
3	\$118.18	\$47.27	34.3	49.7
4	\$143.88	\$57.55	41.3	42.7
5	\$165.34	\$66.14	47.6	36.4
6	\$207.79	\$83.12	59.5	24.5

In PART 5 Section B there is a worksheet to help you estimate the number of hours that could be available for paid residential supports. It is an important tool for determining whether or not the Family Caregiver option can work for you.

F. WHAT DOES IT MEAN TO YOUR FAMILY’S PRIVACY if you use the Family Caregiver Option?

If you are receiving services in the HCBS-DD waiver, you will have people from agencies visit you where you live. It doesn’t matter if you live with your family, in a host home or in your own apartment or house. However, because your residential supports are funded through public dollars, it is one of the challenges you and your family will need to manage. It may sound very intrusive. The purpose is to provide and monitor the direct services you need and support the direct care staff to do their jobs. These visits assure you and your family that someone is watching out for you.

Who will be in your home, why and when?

1. Staff who help you:
 - a. Your direct care staff. Paid staff is there to help and assist you with the supports you need. Their responsibilities are defined only by the needs identified in your SP. The hours and schedule will depend on what you need. If you use a paid Family Caregiver, this would be your family member.
 - b. Residential staff (coordinators, nurses, etc.) and your Case Manager will stop by to make sure you are receiving your supports. This will happen about two times every month.
2. Other people who make sure you are safe and getting the support you need include:
 - a. Other members of your IDT may stop by or come to your house for a meeting.
 - b. People who work for the State of Colorado have to stop by about every 2 years because your residential services are funded by the state of Colorado and Medicaid.

Most visits are scheduled in advance, although the Agency is required to do some unannounced visits.

<p>PART 4: IF FAMILY CAREGIVER SOUNDS LIKE A GOOD OPTION, WHAT NEXT?</p>

A. THESE ARE SOME QUESTIONS YOU SHOULD CONSIDER

If you are the person receiving services, ASK YOURSELF:

1. Do I want to live with my family and continue to receive services? Does my family want to do this?
2. Do I want to do this? Is it because I feel I have to?
3. Do I have family members (parents, grandparents, aunt, uncle, sister, brother, etc.) who could help me out?
4. Is the whole family in agreement with this decision?
5. Would I rather live in my own place and arrange to have a family member come in to help me?
6. There are pros and cons to any option. Which is better for me and my family?

If you are the family member of the person receiving services, ASK YOURSELF:

1. Do I want to do this? Is it because I feel I should or because I want to?
2. Is the whole family in agreement with this decision?
3. Should I talk with other parents/relatives who are doing this before I make my decision?
4. Am I able and willing to meet the requirements of the Agency?
5. Am I willing to have a background check completed on me and/or other family members?
6. Does this have any impact on our family income? If there is paid or non-paid support I have to provide, will it affect my current job?
7. As a paid caregiver you will actively participate to assist your family member to achieve his or her own personal goals and objectives as identified in the Service Plan. You probably already help your family member to learn and grow. This new role means a more written and documented process to satisfy requirements. It is a huge change. Is this a shift you can make? It is difficult at first to write down what you may have been doing for so many years, but it is necessary once this becomes a paid position.
8. There are pros and cons to any option. Which is better for your family member?

B. CALL YOUR CASE MANAGER and ask for an IDT to discuss this option and the changes you need to make. If you don't have a copy of your Service Plan, or don't know your SIS level and rate, just ask your Case Manager for it. The available rates for the SIS Levels are in a table in PART 3 Section E.

C. IDT DISCUSSION ITEMS

1. What do you want? Your choices should be honored. Who you want to help you should be based on your wishes, needs and personal goals.
2. What is in your best interest now and in the long-term? Living in your family's home may be okay for a couple of years or it may be okay forever. Or you may want to do it for a while to learn more skills and move out later.
3. Do you want your parent or family member to be your only paid staff? You might want to do some things with someone your own age. Your IDT is always responsible to look at your choices and what you want as long as it can meet your needs. The IDT should think about how you can meet different people and find new friendships. For example, if you are 30 years old and need support doing community activities, do you want your Mom along or would you rather have someone else go with you?
4. What happens to my current services while I am finding an agency that supports the Family Caregiver option?
5. What happens if the Family Caregiver option cannot continue for any reason? The Agency providing residential services is still responsible for providing support to you. Can I stay in my home or will I have to move? This discussion is so the team has a general idea of what may happen.
6. Review your SP and compare it to the activities offered in residential services. See the Planning Chart in PART 5 Section A. If your SP isn't clear about the supports needed in residential services then call your Case Manager.
7. Be prepared to talk about a weekly schedule for services. When do you need help the most or when do you want to do certain things?
8. You and your family member must be prepared to talk about the role of the Representative Payee for any Social Security benefits or any other type of benefits.
 - a. Can you do it yourself? Or do you want a family member or the Agency to help?
 - b. If the Agency is the Rep Payee, how will the room and board dollars be paid to you?
 - c. If the Agency is the Rep Payee, how do you want to manage the expenses for personal needs that are part of room and board?
 - d. Anyone who gets paid to provide any part of the Rep Payee responsibilities, cannot get paid to provide the same service in this waiver.

D. IF I DECIDE TO GO THROUGH AN AGENCY, HOW DO I CHOOSE?

Bring your list of what you want the Agency to do with you. Here are some questions you should consider asking the Agency:

1. Does the Agency have any specific requirements besides those defined by DDD?
2. Can the agency provide all of the hours of direct service I need? Will I need non-paid support to help me?
3. What happens if I do not want my family member to be the paid Family Caregiver or they do not want to be the paid staff?
 - a. Do I have any input or say so about who the Agency hires to provide the services?
 - b. Does a family member need to be present in the house for the entire time the Agency employee is there?
 - c. What are the protections in case there is employee theft? And how does the Agency manage that?
4. What is the administrative and program fee charged for managing my resource?
5. Can I see a financial breakdown/budget based on my SIS level and Service Plan?
6. What is the Agency's emergency policy if I need help right away?
7. Can the Agency provide day program or work activities for me? It may increase the flexibility and creativity to meet your needs in the SP.

8. Does the Agency have a family member using this option that would be willing to call me and talk about their experience?
9. Is there any training for the non-paid Family Caregiver?

You can also ask other people for information about the Agency, such as the Arcs, PAD-CO, Parent to Parent, CCBs and DDD. They are all listed in PART 6.

PART 5: HOW TO MAKE THIS OPTION WORK FOR ME

The charts on the next two pages are to help you understand what your residential services may look like. Comprehensive Services are put together so they are just right for you. They have to be based on your needs listed in your Service Plan. Who does what is really important. How much paid support you get is very important and will also help you figure out how much non paid support you will probably need.

A. WHO DOES WHAT FOR ME?

Use this chart to help you decide how you want your residential services to be provided. Take it with you to discuss at your IDT and when you meet with Agencies. Specific details about the activities on this chart are available at the Agency, the CCB or DDD.

Residential PLANNING CHART		Individual/Family Service and Activity Preferences		
Residential Activities	Identified in SP	Want paid Family Caregiver to do	Want non-related paid staff to do	Family wants to do as an unpaid support
Self-advocacy training				
Independent living training				
Implementation of recommended follow-up counseling, behavioral or other therapeutic interventions <u>by residential staff</u> , under the direction of a professional.				
Medical and health care services (e.g., routine administration of medications or tending to your needs if you are ill or require attention to your medical needs on an ongoing basis).				
Emergency assistance training				
Community access services				
Travel services may include providing, arranging, transporting, or accompanying you to services and supports identified in the SP.				
Supervision services				

The residential Agency is responsible to cover your needs in your SP. **Residential backup support hours (similar to respite) are not a defined residential service.** They are an important part of the planning discussion. This would cover the time where you may decide to stay home and your family has to be out of town, or you and your family member may simply need a break from each other. It is important to talk with the Agency about this need.

B. HOW CAN I DETERMINE HOW MANY HOURS OF DIRECT SUPPORT I SHOULD BE GETTING?

The best choice is to ask the Agency for a budget – many Agencies are sharing this information with individuals and families. It will give you costs specific to the Agency instead of an estimate. This worksheet is an **EXAMPLE** to estimate the number of hours per week that could be available for paid residential supports using the Family Caregiver option. The table includes an **EXAMPLE** of estimated paid and non-paid support time you will need if you have a SIS level 4.

The table identifies the Agency cost to cover hourly employees including the required payroll taxes and the cost of coverage during staff paid absences (such as sick and vacation leave). If the hourly rate is more or less, it will change the amount of non-paid support you will need.

In this example, someone with a SIS level 4 would get about 41.4 hours of paid support in a week. You can estimate your hours by entering information into the table and following the “What to Do” directions.

If you want a type of respite hours (residential backup support hours), they are not included in this table.

You will need to fill in the blanks and calculate according to directions in the right column		Your information		What to do
SIS Level	4			Enter your SIS Level
Daily Rate	143.88	A		Check rate chart in PART 3 Section E
% of rate for Administration & Program fees	40.00%	B		Enter % agency gives you
Administration & Program Fee daily cost	\$57.55	C		A x B
Remaining daily rate	\$86.33	D		A - C
Weekly Rate (estimate)	\$604.30	E		D x 7
Hours in a week	168	F	168	
Subtract weekly day habilitation, supported employment or employment time	24.0	G		Enter hours of day habilitation per week
Subtract average minimum transportation time (estimate 1 hour per day)	4.0	H		Enter approximate hours/week of transportation to day hab.
Subtract average sleep hours per week (8/day)	56.0	I		Enter number of sleep hours/day x 7
Remaining hours for direct service	84.0	J		F - G - H - I
Hours IDT documented alone time (this is awake time) (i.e. 3 hrs/day/week)	21.0	K		Enter from SP or IDT decision hours/day x 7
Remaining hours needing supervision per week	63.0	L		J - K
Total hourly wage paid to staff is estimated at \$12 an hour plus payroll taxes & estimated cost to cover sick & vacation time. The total is \$14.60. It doesn't include overtime, emergency coverage or medical insurance for employee	\$14.6	M		Get from Agency – enter number – This number may be more than the example if it includes medical insurance
Available paid hours per week	41.4	N		E / M
Non paid hours per week (not including sleep)	21.6	O		L - N
Non paid hours per week (including sleep)	77.6	P		I + O
To calculate daily averages for rows L, N, O & P), simply divide by 7.				

PART 6: WHO TO CONTACT FOR ADDITIONAL INFORMATION

- Your Case Manager
- Your Agency
- Your CCB
- Your Local/State chapter of The Arc
- Division for Developmental Disabilities at (303) 866-7450 or <http://www.colorado.gov> (type Developmental Disabilities in the search bar). PASAs are listed on the DDD web page under the Service Provider link.
- Colorado Cross Disability Coalition (CCDC) (303) 839-1775 or 1 (800) 817-1435
- PAD-CO (Parents of Adults with Disabilities in CO) padcoweb@aol.com
- P2P (Parent to Parent) 1 (877) 472-7201
- The Legal Center (303) 722-0300 or 1 (800) 288-1376

Colorado Chapters of The Arc are privately funded Independent Advocacy Organizations supporting persons with intellectual and developmental disabilities and their families.			
Advocacy Denver	(303) 831-7733	The Association for Community Living in Boulder County	(303) 527-0888
The Arc of Adams County	(303) 428-0310	The Arc of the Pikes Peak Region	(719) 471-4800
The Arc of Aurora	(720) 213-1420	The Arc of Pueblo	(719) 545-5845
The Arc In Jefferson County	(303) 232-1338	The Arc of Weld County	(970) 353-5219
The Arc of Larimer County	(970) 204-6991	The Arc of Colorado	(303) 864-9334
The Arc of Mesa County	(970) 245-5775		
The Arc of Arapahoe & Douglas	(303) 220-9228		

Colorado Community Centered Boards (CCBs)			
Arkansas Valley Community Center	(719) 384-8741	North Metro Community Services Developmental Disabilities Resource Center	(303) 457-1001 (303) 233-3363
Foothills Gateway	(970) 226-2345	Southeastern Developmental Services	(719) 336-3244
Blue Peaks Developmental Services	(719) 589-5135	Developmental Pathways	(303) 360-6600
Horizons Specialized Services	(970) 879-4466	Southern Colorado Developmental Services	(719) 846-4409
Colorado Bluesky Enterprises	(719) 546-0572	Eastern Colorado Services	(970) 522-7121
Imagine!	(303) 665-7789	Starpoint	(719) 275-1616
Community Connections	(970) 259-2464	Envision	(970) 339-5360
Mesa Developmental Services	(970) 243-3702	The Resource Exchange	(719) 380-1100
Community Options	(970) 249-1412		
Mountain Valley Developmental Services	(970) 945-2306		
Denver Options	(303) 636-5600		