PARTICIPANT'S GUIDE TO CDCS

PRIOR TO STARTING CDCS:

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1.	 Case manager will verify eligibility for CDCS- You must meet the following eligibility criteria to be eligible for CDCS: Have Medical Assistance based on disability (Except for AC) Have waivered services or AC services Not receiving any of the following services: Licensed foster care while residing in a residential setting licensed by DHS Customized living services. Integrated community supports. Not currently on the Minnesota Restricted Recipient Program, MRRP	Completed: Click or tap to enter a date. Completed: Click or tap to enter a date.
3.	staff's wages, and you can find information <u>HERE</u> to see if you qualify. Compare CDCS vs. Licensed option- This requires service planning with your case manager. What do you need? Will the CDCS budget meet your needs?	Completed: Click or tap to enter a date.
4.	Determine the waiver span and prorate the budget- If CDCS is chosen, your case manager will work with you to determine if new screening is needed, determine the waiver span, prorate budget if needed, and coordinate ending of existing services with opening of new services when applicable.	Completed: Click or tap to enter a date.
5.	Case manager will send you the CDCS ORIENTATION PACKET to review.	Completed: Click or tap to enter a date.
6.	Complete the following online CDCS Trainings, and let your case manager know when you have completed them: • Department of Human Services CDCS Training • Ramsey County CDCS Participant training Hyperlink takes you to the CDCS webpage. Go to "training" and find the language you need. If there are not trainings in your language, or you can't access the training due to lack of technology, your case manager should provide training prior to the start of CDCS.	Completed: Click or tap to enter a date.
7.	Let your case manager know if you want to move forward with CDCS! This is very important. You need a firm understanding of CDCS, the budget, etc. PRIOR to moving on to step 8 of hiring a support planner and choosing an FMS. Support planners are not paid unless CDCS opens, so you should not work with a support planner until you are sure you will be using CDCS.	Completed: Click or tap to enter a date.

Updated 8/15/2023

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IF CDCS I	IS CHOSEN			
	8.	3. Choose a Fiscal Management Service Provider (FMS) and Support Planner. (Forms		
		should be in your Orientation Packet)		
		Support Planners are not required, but strongly recommended at least for the 1 st yr.		
	9.	Your case manager should give you and your support planner the prorated budget,		
		waiver span, CSP/CSSP and MnCHOICES Eligibility Summary, to write the plan.		
		(NOTE: If you are writing the plan yourself, the forms to write the plan, can be found		
		on the Ramsey County CDCS Website .)		
	10. Review your MnCHOICES Assessment - Assessed needs from the MnCHOICES			
		assessment need to be reflected in your CDCS plan, and how services/items		
		requested will meet those needs.		
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County CDCS Website .

CDCS RENEWALS:

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1.	MnCHOICES Reassessment - MnCHOICES will complete your reassessment 60-45	Completed:
	days before the start of the new waiver span. It is important to be responsive to the	Click or tap to
	assessor to get the reassessment scheduled.	enter a date.
2.	Begin writing your plan 60 days prior to renewal- Meet with your support planner	Completed:
	(if you use one). You can use the previous year's budget, until the actual budget is	Click or tap to
	received. If writing your own plan, refer to the Participant's guide to Completing the	enter a date.
	CDCS Plan document.	
3.	Compete the annual meeting with your case manager following the MnCHOICES	Completed:
	assessment and discusses assessed needs and items to be addressed in CDCS plan.	Click or tap to
		enter a date.
4.	Review the MnCHOICES assessment when received -	Completed:
	 If you are eligible for 10 or more hours of PCA services and/or have a HC 	Click or tap to
	rating of EN, you are eligible to apply for the 7.5% CDCS <u>Budget</u>	enter a date.
	Enhancement. Talk to your case manager if this applies to you.	
	 Pay attention to the assessed needsthe CDCS plan you write, will need to 	
	address these assessed needs.	
5.	Get the CDCS Budget.	Completed:

FSG- If opening a waiver, FSG will end, and the case manager will close this for you.

referencing your MnCHOICES assessment and the RC Policy Guidelines. Again, If

you are writing the plan yourself, reference the Participant's guide to Completing

the CDCS Plan document. The forms to write the plan, can be found on the Ramsey

12. Write your CDCS plan or meet with your support planner to write the plan,

13. Submit your CDCS plan to your case manager for review/approval.

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The month before the renewal (around the second week), you should receive the budget or instructions to continue with the temporary amount. If you do not hear from your case manager by the 12 th of the month prior to renewal, please contact them for the budget.	enter a date.
 6. When you receive the CDCS budget (or instructions to submit using last year's amount) finalize the plan by: Adjusting the budget if the budget amount changed (If your screening we entered late, you will submit the plan using last year's amount as a temporary budget, until the new amount comes in.) Making sure assessed needs are addressed in the plan. (If you have not received the MnCHOICES assessment documents yet, go off last years. Do not wait for the MnCHOICES assessment to submit the plan!) 	
 7. Submit the plan to your case manager- This can be done by you or your support planner if you have one. Don't hold up submission of the plan if missing documentation for something that can be pended until received. <u>Aim to have your plan submitted by the 15th of the month</u> prior to renew 	al.
8. GO TO APPROVAL OF THE PLAN	

APPROVAL OF THE PLAN:

1.	Once the plan is received, your case manager will review the plan , letting you know if further documentation is needed to submit the plan for approval.	Completed : Click or tap to enter a date.
2.	Case manager will submit your plan for approval, sending to the CDCS coordinator if it is an initial plan, or their supervisor if it is a renewal.	Completed : Click or tap to enter a date.
3.	Supervisor/coordinator returns approved plan to case manager, who forwards it to you, the FMS, and your support planner (if you have one).	Completed : Click or tap to enter a date.
4.	 Review the plan. Pending or denied items will be listed on the cover sheet or Notice of Decision. Start working on information needed to un-pend services/items Review denial information (if applicable) and your right to appeal. 	Completed: Click or tap to enter a date.
5.	FMS will send you a budget. Review this ensure accuracy. You should also receive monthly spending summaries that you will need to review as well, to ensure you are staying within the budget and what has been approved in the plan.	Completed : Click or tap to enter a date.

RENEWAL FOLLOW-UP/OTHER IMPORTANT THINGS TO KNOW WITH CDCS:

Actual Budget: When a MnCHOICES Assessment is not entered in time to get a CDCS budget for a renewal, there is no "Actual" budget until after the plans starts. In this case, we need to use last year's amount as a temporary budget. When a temporary budget is used, we need to get the "actual" budget from WMS in the month of the renewal. CDCS coordinator will get your case manager the actual budget by the 10th of that month. If the budget goes up, you will have more funds to work with. If the budget goes down, you will need to reduce your plan accordingly.

Appeals: Your case manager's supervisor or the CDCS coordinator (whoever approved the plan) will outline the reason for denial, based on CDCS or Waiver Policy. You have the right to appeal services/items that were denied. Information on how to do this will be sent with the plan. if you have questions about appealing, you can ask your case manager.

Pending Items: If there wasn't enough information in the plan to approve a service/item, it would have been pended for more information. Please work on the information needed right away, so that the county can determine whether the service/item can be approved. If pended service/item is something that is typically allowed, but we are just missing the necessary documentation to approve, the item can remain in pending status until the documentation is received. If pended service/item does not meet the criteria above, the county may take action/deny the service/item if the information is not received w/in 60 days.

CDCS FORMS AVAILABLE ON THE RAMSEY COUNTY WEBSITE- All CDCS forms can be found on the Ramsey County website <u>HERE</u>.

YOU MUST REVIEW SPENDING SUMMARIES MONTHLY: Sign up for portal access with FMS or be sure that you are set up to receive monthly budget summaries, to review spending. Pay close attention to spending in each area, to ensure overspending is not occurring.

CDCS PROCESSES

Making revisions to a CDCS Plan

Addendums- An "Addendum" or "revision" is a change to the plan, during the service plan year.

The following changes require only an email to the case manager for approval: (If you are making one of these changes no form is needed. If you have a support planner, include them in your correspondence.)

- Items on plans/addendums that were pended for more information. Send information needed to your case manager.
- Moving unallocated funds or funds between items/services that are already approved.
- Correction of Fiscal fees on an initial plan or renewal.
- Use of COLA increase for items/services already approved in the plan.

The following changes can be approved by your case manager but require a <u>CDCS Addendum Form.editable</u> or a revision of the plan:

- Increasing PPOM wage up to the max. (\$18.82 w/PTO, \$19.60 w/o PTO)
- Increase to staff wage up to what is customary and reasonable.
- FMS agency or Support Planner switch
- Adding Transportation, Licensed services, or items/services in an emergency for health and safety.

All other changes require supervisor approval and require a <u>CDCS Addendum Form.editable</u> or a revision of the plan:

Important things to remember:

- Addendums/revisions/changes not accepted within 30 days of the end of the plan, unless for critical health and safety reasons.
- The county has 30 days to review the addendum/revision, but it will be processed/approved ASAP

Notices of Technical Assistance

CDCS is consumer directed. This means that with training and guidance from the CM, you should be expected to manage CDCS on your own. When CMs provide additional technical assistance/support "over and above the standard training and materials due to an identified need", a Notice of TA could be sent.

According to the CBSM, reasons for technical assistance may include but are not limited to:

- Notices from the financial management services (FMS) provider to the person requesting missing information
- Not following the person's Community Support Plan (CSP)
- Not receiving services, supports and/or items identified as critical for health and safety

- Not spending enough dollars for services/supports and/or items needed to support health and safety without a reasonable explanation
- Ongoing difficulty in arranging for services, support and/or items needed for health and safety

Examples of when a Notice of Technical Assistance might need to be sent:

- Not writing a complete CDCS plan (when there is lots of "back and forth")
- Submitting an unreasonable number of changes/addendums for the plan year (changes the total plan itself)
- Inaccurate/incomplete time sheets
- Not turning in time sheets by deadline
- Pre-signing time sheets
- If hospitalized submitting time sheets
- Submitting timecard when M.A. is closed.
- Unapproved overlapping hours
- Unapproved overtime
- Repeatedly returning items purchased
- Not purchasing items needed in the CSP.

Upon the 4th Notice of Technical Assistance in one plan year, you could be exited from CDCS and licensed waiver and/or state plan home care services will be offered to you.

Closing CDCS

There are several reasons for ending/closing CDCS.

- **By choice** You can choose to go off CDCS and opt for licensed services or MA/state planned services. If you want to stop using CDCS, you need to communicate this to your case manager. You can only exit and go back on CDCS once during a plan year.
- Not eligible for the waiver based on your MnCHOICES assessment- Case manager will discuss other service options that may be available to you.
- Involuntary exit upon a fourth Notice of Technical Assistance- Case manager will discuss other service options that may be available to you.
- Immediate exit-
 - Immediate health and safety concerns
 - Maltreatment of the person
 - Purchases or practices not allowable in CDCS
 - Suspected fraud or misuse of funds by the person, their authorized representative and/or service provider

For more information, see the <u>CDCS Involuntary Exit</u> page in the CBSM.