

Testimony
Department of Human Services
Long Term Care Committee
Representative Kreidt, Chairman
March 10, 2010

Chairman Kreidt, members of the Long Term Care Committee, I am Karen Tescher, Assistant Director of the Long Term Care Continuum of Medical Services, for the Department of Human Services. I am here today to provide you with an overview of adult foster care services and related department program funding.

In N.D.C.C. 50-11-00.1 under Definitions #3, an Adult Family Foster Home is defined as an occupied private residence in which Adult Family Foster Care is regularly provided by the owner or lessee thereof, to four or fewer adults who are not related by blood or marriage to the owner or lessee, for hire or compensation.

Applicants for an adult family foster care (AFFC) license are directed to contact their local county social service office/home and community based services (HCBS) case manager. The HCBS case managers are responsible for completing the Initial Licensing Study and assisting the applicant in completing all of the required documentation. Once all of the application documentation is complete, the case manager submits the information to the human service center AFFC regional representative, who reviews the information. All AFFC providers are required to be enrolled as a qualified service provider (QSP) and complete a criminal background check. The Aging Services Division is responsible for the QSP application review and background checks and emails the QSP approval notification to the regional human service center representative to complete the AFFC application

process. Once approved, the QSP application is sent to Medical Services for enrollment of the provider. The human service center AFFC regional representative issues the AFFC license once all of the application documentation and the Aging Services QSP notification has been received.

An initial license period is 12 months. After completion of the initial licensing period, licenses are effective for 24 months. Aging Services is responsible for sending out the AFFC renewal notices, the county case managers assist with completion of the renewal application and all of the information is submitted to the regional human service center to issue a renewed license.

In the event of an AFFC complaint, the HCBS case manager is responsible for completing an investigation. Results of the investigation are reviewed with the human service center regional representative and Aging Services staff. Any action that may need to be taken as a result of the investigation is generally issued from the human service center regional representative. In some instances, Aging Services issues the corrective action or revocation instead of the regional representative.

The purpose of Adult Family Foster Care (AFFC) is to offer a choice within a continuum of care to adults, who could benefit from living in a family environment, as well as to promote independent functioning and provide for a safe and secure environment.

There are currently 64 licensed AFFC homes in ND. The number of licensed AFFC beds is 168.

AFFC typically provides services that can include bathing, communication, dress/undress, eye care, feeding/eating, hair care/shaving, housework,

assistance with incontinence, laundry, medication assistance, mobility, money management, nail care, shopping, skin care, teeth/mouth care, toileting, transferring/turning/positioning, and transportation. It can also include tasks under global and client specific endorsements. These are identified on the monthly rate worksheet by the county Home and Community Based Services (HCBS) case manager and a rate is determined according to the number of activities that have been identified. AFFC is an inclusive 24-hour service. Therefore, respite care is the only allowable HCBS service that can be authorized with the AFFC service.

For public pay residents, the AFFC providers receive up to \$525 per month for room & board which is paid by the resident. The maximum rate for AFFC providers per client under Service Payments for the Elderly and Disabled (SPED) & Expanded Service Payments for the Elderly and Disabled (Ex-SPED) is: \$1819 per month or \$55.85 per day.

The maximum rate for AFFC providers per client under the HCBS waiver is: \$2049.10 per month or \$66.10 per day.

Approval was given in the 2009 Legislative session to remove the point split for laundry, shopping, and housekeeping. Prior to that time, when multiple recipients resided in a AFFC setting, the reimbursement points assigned to laundry, shopping, and housekeeping were split by the number of recipients. This resulted in less reimbursement for the provider and a greater amount of paperwork. Removing the point split compensated providers more equitably for services provided and helped ensure access to AFFC services for clients. The point split change became effective January 1, 2010.

The AFFC program for individuals with a Developmental Disability (DD) is the same as through HCBS. The only difference is that for individuals with a Developmental Disability, the Plan of Care, assessment, authorization and monthly rate worksheets are completed by a DD Program Manager rather than a county HCBS Case Manager.

For private pay residents, AFFC charges range from \$1200 to \$5000 per month. This rate includes room, board & care. For private pay clients the cost of care is usually not split out from the room & board rate.

Some of the challenges raised during the Department Stakeholder Meetings, which were held this past fall, related to AFFC are listed below. The Department is working to analyze each of these items to determine how we might mitigate these challenges.

- There is currently no funding source for payment of adult family foster care for individuals diagnosed with a mental illness; who have no other functional eligibility needs.
- Providers are not allowed to hire staff to assist them in the operation of the foster care home per ND Admin Rule 75-03-21-01 (20).
- Consider additional SPED, Expanded SPED and HCBS waiver funding to increase the rates of payment for the provision of adult family foster care.

I would be happy to answer any questions you may have.