

Adult Family Care (AFC) At-A-Glance

Adult Family Care is a 24-hour Home and Community Based Service option for Vermont's Long-Term Care Medicaid Choices for Care (CFC) Program. This option is available through CFC to Participants in the Highest and High needs groups. Adult Family Care provides Participants with person-centered supports in a home environment that is safe, family oriented and designed to support autonomy and maximize independence and dignity. Adult Family Care is provided in the residence of the Home Provider who provides care and support to no more than two people unrelated to the Home Provider.

Authorized Agencies (AA)

- The AA must be approved by DAIL and maintain an up to date provider agreement.
- The AA supports Participant goals, strengths and needs by facilitating a Home Provider match.
- The AA ensures the Service Coordinator works with the participant and the AFC Home Provider to develop a person-centered plan and coordinates other services in and out of the AFC home.
- The AA contracts with the AFC Home Providers.
- The AA provides a difficulty of care payment (tax-free stipend) to the AFC Home Provider.
- The AA ensures that each AFC home has a housing inspection once every five years.

Adult Family Care (AFC) Home

- The AFC home is owned/rented and lived in by the home provider. It is an unlicensed home that provides 24-hour care and room & board for one or two people (not related to the AFC Home Provider) in a family setting.
- The CFC Participant lives with the AFC Home Provider who provides care and support according to the person-centered plan.
- The AFC home enters into a contract with an AA to provide services in exchange for a difficulty of care payment (a tax-free stipend).
- The CFC Participant and AFC Home Provider maintain an up to date room & board agreement.
- The Participant pays room & board to the AFC Home Provider according to the DAIL Room & Board standards.
- The AFC Home is inspected once every five years.
- The AA assists the Participant in gaining access to long-term services and supports.
- The AA is responsible for completing the AFC ILA Assessment, AFC Tier, Service Plan and other required CFC documentation.
- The AA ensures that the Participant's needs are being met.

Tier Rate

Tiers range from \$78.54/day to \$159.12/day, depending on the Participant's assessed functional needs.

- The Tier payment covers 24-hour long-term services and supports including (but not limited to) personal care, respite, and companion.
- The Tier payment does not include payment for adult day, acute care services (anything covered by insurance) or room & board.
- The Tier is developed by the AA using the CFC AFC ILA Assessment and AFC Tier worksheet.
- After the CFC eligible Participant has signed an agreement with the AA, the AA may bill \$35/day for pre-transition services leading up to the person's AFC home move-in date.
- After the person moves into the AFC home, The AA bills the full tier amount and maintains 5% of the tier payment for administrative fees.

Room & Board

The person pays for room and board according to the existing DAIL Room & Board standard. As of 1/1/17, the maximum room and board is \$708.69 per month and the person must retain at least \$125/month personal needs spending.

Frequently Asked Questions (FAQs)

Q: What is Home Upkeep and how does it work?

A: Home Upkeep applies to Participants who have a patient share (typically a client who is in a nursing home or ERC) and is used to maintain a home in the community. A Home Upkeep form is completed by a facility upon admission or discharge and is signed by a doctor. Home Upkeep is good for up to six months and covers room and board. The amount of Home Upkeep is \$588 minus the deduction from a participant's patient share. All client specific questions related to Home Upkeep should be sent to the appropriate caseworker. Please refer to the CFC/LTC Team List.

Q: What are the rules regarding Transportation?

A: CFC/AFC does not have an allowance for transportation costs. Transportation needs/costs are expected to come out of the tier rate. On a case by case basis a variance may be requested.

Q: What are the key components of a Quality Review?

A: Quality Reviews are based on standards for the AFC Program and a record review of required documentation will be required by each agency. Interviews with the Participant, Home Provider or direct staff working with the Participant will be conducted. Participant satisfaction will be a priority, with a focus centered on if services are working and if there is room for improvement.

For more details, refer to the CFC High/Highest Needs Manual at:

http://asd.vermont.gov/sites/asd/files/documents/Merged%20CFC_High_Highest_Manual%205.26.16.pdf