

Department of Disabilities, Aging and Independent Living Division of Disability and Aging Services

Choices for Care Guidelines for Paying Spouses as Caregivers Effective May 1, 2007

In June 2005, the State of Vermont was granted an 1115 waiver from the Centers for Medicare and Medicaid Services (CMS) for the Long Term Care Medicaid Program. In October 2005, implementation of the Choices for Care Program began. In a departure from the previous Medicaid waiver restrictions, CMS approved Vermont's request to initiate the payment of spouses to provide personal care services.

The Department, through its waiver programs, has overseen an extensive consumer/surrogate directed option through which waiver participants may receive their personal care services. Approximately 65% of all personal care services are delivered under this option. The Department has also offered state-funded spousal caregiver reimbursement through the Attendant Services Program since 1980. The ASP program does not stipulate any additional qualifications for spouses beyond those outlined in the general guidelines for all employees.

The Department recognizes that there are times when care is most effective and satisfying to the consumer when provided by the spouse. It is also recognized that there may be some conflict and boundary issues due to the spousal relationship. The purpose of these guidelines is to outline the terms and conditions under which spouses may be paid as caregivers.

Assessment and Eligibility

The individual applicant (if applying for services) or the service recipient (if already approved for services) must undergo the same clinical and financial eligibility processes required for all high and highest needs individuals. An Independent Living Assessment (ILA) needs to be completed and an allocation of personal care hours determined in the same manner for any individual, regardless of whether or not a spouse will be the paid personal care provider.

As with all other individuals wishing to select consumer- or surrogate-directed services, the case manager must approve the consumer's/surrogate's ability to perform the duties of an employer (e.g., appropriate hiring, supervision, firing, etc. of employees, including a paid spousal caregiver). Spouses hired by provider agencies must meet those agencies' regular hiring requirements for personal care attendants.

Note: If the individual is considering payment to a spouse for personal care, he or she may create eligibility problems for Section 8, Medicaid, SSI, Food Stamps and other programs where income to a spouse or household member is deemed available to the individual.

Decision to Pay a Spouse as a Personal Care Attendant

Consistent with the state-funded Attendant Services Program, the decision to pay a spouse to provide personal care rests with the individual Choices for Care participant.

Conditions for a Spouse to be Paid

In order for a spouse to be paid to provide personal care services, the following conditions must be met:

- The paid spousal caregiver must meet the same minimum requirements that are applicable to all other providers of personal care services (e.g. adherence to the DAIL background check policy, etc.).
- The paid spousal caregiver cannot be the surrogate employer or legal guardian of the consumer.
- A family member of the paid spousal caregiver can only act as the surrogate if they do not reside in the immediate household.
- The spouse must be willing and able to abide by the terms outlined in the employer handbook for Choices for Care.
- At the direction of the consumer, the spousal caregiver must participate in monthly in-home meetings with the consumer's Choices for Care case manager. Flexible Choices participants must agree to a minimum purchase of case management to allow at least a monthly case management in-home visit.
- Spouses may not be paid to perform Instrumental Activities of Daily Living (IADLs) as defined in the Choices for Care Regulations.
- A plan must be in place targeted specifically for the relief of the spousal caregiver. Adult day services, respite and/or companion services may be used to meet this condition. The spousal caregiver must utilize respite at regular intervals to avoid undue stress from caregiving responsibilities.

Quality Management

As with all other Choices for Care services, the quality of personal care services provided by a spouse will be reviewed according to the Division's Quality Management Plan. However, on a routine basis primary responsibility for oversight of the quality of services rests with the case manager. If home visits reveal issues with the quality of service provided by a paid spousal caregiver, the case manager will work with the consumer, the spousal caregiver and any other relevant parties to resolve the issues. If those efforts fail to address the quality of care provided, as with all other Choices for Care services, the case manager can revoke the individual's ability to consumer or surrogate direct services. If the spousal caregiver works for an agency, that agency can terminate the spousal caregiver in accordance with the agency's personnel policies.