

Ohio | Department of Developmental Disabilities

John Kasich, Governor
John L. Martin, Director

To: Superintendents, SSA Directors, COG Directors

From: Lori Horvath

Date: August 26, 2015

Subject: Adult Family Living (AFL)

The number of individuals accessing the Adult Family Living (AFL) service is expected to increase through both the phase-out of the Transitions DD Waiver and the goal of having 25% of all individuals enrolled in state-funded IO Waivers receiving a shared living service (AFL/AFC). The purpose of this communication is to provide clarification related to section 5123:2-9-32 of the Ohio Administrative Code, which pertains to Adult Family Living (AFL) under the Individual Options Waiver.

Below are responses to commonly asked questions related to each of the rate options.

	Daily rate option	15-minute unit option
How do I know what funding option should be chosen?	This option should be selected if the individual chooses to receive no Homemaker/Personal Care (HPC) or chooses to receive HPC only on days when no AFL is provided.	This option should be selected if the individual chooses to receive HPC and AFL on the same days.
May a related provider who does not live with the individual provide HPC?	No	Yes
Is the HPC included in the AFL funding limitation derived by multiplying the AFL daily rate by the number of days in the span?	No	Yes
May individuals also receive Residential Respite or Community Respite?	Yes, during periods when AFL is not provided	Yes, during periods when AFL is not provided
May an individual request prior authorization for services other than AFL?	Yes	Yes
May a person receive state plan home health aide services on the same day?	No (Due to being duplicative services)	Yes, during periods when AFL is not provided
May the AFL provider also be the provider of state plan home health services?	No	No

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May a person receive state plan home health nursing on the same day as AFL?	Yes	Yes
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The Ohio Department of Developmental Disabilities has also received multiple requests for clarification of paragraph (E)(2)(1)(iv)(b) below which describes when a person choosing the AFL daily rate option may also receive HPC.

The services are provided as substitute coverage in the individual's family living setting or in a community setting agreed to by the individual, by a certified homemaker/personal care provider who is not related to the individual, in circumstances where the adult family living provider is temporarily unavailable to provide services.

In the context of this rule “substitute coverage” refers to use of HPC as an alternative on a day when AFL is not provided. HPC can be used whenever the AFL provider is “temporarily unavailable.” This means that the AFL provider remains a provider of service for the individual, but is not available for a planned or unexpected event for one day or multiple consecutive days. Some examples of an AFL provider’s unavailability may include, but not be limited to, working another job, having volunteer commitments outside the home, reporting for National Guard duty, being called away due to a family emergency, suffering an injury or medical condition that inhibits the ability to provide care, etc.

Under no circumstances may prior authorization be used to increase the AFL provider’s rate. However, county boards must inform individuals of the right to request prior authorization for services other than AFL whenever changes in the plan result in a funding level that exceeds the ODDP ceiling. This includes the ability to request prior authorization for HPC in the following circumstances:

- The combined cost of the individual’s AFL daily rate and HPC exceed the individual’s ODDP funding range.
- The combined cost of the individual’s AFL 15-minute unit rate and HPC exceed the funding limitation, and the AFL provider is no longer available to provide support. For example, in the event that the AFL provider has a change in condition that prohibits continued provision of services, the individual may request prior authorization to receive the level of HPC necessary to ensure health and welfare.

Example:

Bob’s waiver span is 1/1/15 – 12/31/15. His ODDP funding range is \$19,399.00 - \$33,771.00. His AFL daily rate is \$79.78. His maximum AFL cap (\$79.78 x 365 days in his waiver eligibility span) is \$29,119.70.

- Scenario 1:

Bob chooses the daily unit and receives AFL seven days per week with the exception of two weeks per year when his caregiver is on vacation.
The total cost of his AFL services is \$27,923.00.

For the two weeks his AFL provider is not available, he receives 16 hours of HPC per day for a total cost of \$3,682.56.

His total ODDP costs are projected to be \$31,605.56. They are within his ODDP range and no prior authorization is required

- Scenario 2:

Bob chooses the daily unit and receives AFL Monday – Friday for a total cost of \$20,742.80.

Bob also receives 10 hours of HPC on Saturdays and Sundays due to the unavailability of his AFL provider for a total cost of \$17,097.60.

His total ODDP costs equal \$37,840.40.

He may request prior authorization to receive the additional \$4069.40 that is above his ODDP range.

- Scenario 3:

Bob chooses the 15-minute unit. He uses 3 hours of HPC Monday – Friday for a total cost of \$12,823.20.

He has a remaining balance within his AFL cap of \$16,296.50. The AFL provider may only bill up to this amount. PA may not be requested for the purpose of increasing an AFL provider's rate.

- Scenario 4:

At Bob's annual plan meeting, the team projected costs based upon scenario 3 above.

However, 6 months into his span, his AFL provider is no longer able to care for him.

Beginning 7/1/15, he requires 24 hours/day of HPC.

Effective 7/1/15, the AFL span must be end-dated in MSS to avoid the combination of AFL and HPC being subject to \$29,119.70 AFL cap.

Bob may request prior authorization if his total ODDP costs exceed \$33,771.00.