

# Success Story

## *A Partnership of the Independence Center, Colorado Springs and the Denver Veterans Administration Medical Center*

### Introduction

In 2008 the U.S. Administration for Community Living (ACL) partnered with the Veterans Health Administration to initiate the Veteran-Directed Home and Community Based Services Program (VD-HCBS) to support Veterans who are at risk of being institutionalized to continue living independently in their community. The decision to offer VD-HCBS is made by individual Veterans Administration Medical Centers (VAMC). The VAMC purchases VD-HCBS from Aging and Disability Network agencies including Aging and Disability Resource Centers, Area Agencies on Aging, Centers for Independent Living, and State Units on Aging. The VD-HCBS program gives Veterans the autonomy to decide which services and accommodations best fit their needs. Presently, 62 VAMCs offer the VD-HCBS program through partnerships with 182 agencies in the Aging and Disability Network.

This success story profiles a VD-HCBS Provider, The Independence Center (The IC),<sup>1</sup> that is working with the Denver VAMC to serve Veterans in the program. Locally, the VD-HCBS program is referred to as the Veteran in Charge program. The IC is a Center for Independent Living (CIL) located in Colorado Springs, CO, with a mission to work with people with disabilities, their families and the community to create independence so all may thrive. CILs<sup>2</sup> are consumer-controlled, community-based, cross-disability, nonresidential private nonprofit organizations that are designed and operated within a community by individuals with disabilities. CILs provide an array of independent

living services, including peer counseling, advocacy, independent living skills training, information and referral, and transition assistance.

### Formation and Structure

In 2014, with strong support from the Colorado Division of Aging & Adult Services, Colorado's Area Agencies on Aging established a VD-HCBS program. The Pikes Peak Area Council of Governments Area Agency on Aging (PPACG-AAA) had a longstanding, effective working relationship with The IC, and decided that The IC would operate the Veteran in Charge (VIC) program, the VD-HCBS program in the Pike's Peak region.

To prepare to launch the VIC program, The IC participated in a Veterans Administration (VA) VD-HCBS readiness review, which is required to become a VD-HCBS provider. This included a Financial Management Services (FMS) readiness review<sup>3</sup> of the payroll management function that would be used to pay those who provide services to participants. As the readiness review was being conducted, the VIC program manager and other key staff began building a relationship with the Denver VAMC. They scheduled phone calls and in-person meetings, both to educate the VAMC staff about The IC's services and to strategize about how the program would operate.

**Collaborating with experienced VD-HCBS sites prior to launching VIC was of tremendous value to the Independence Center**

1. Information on The Independence Center is available on its website, [www.theindependencecenter.org](http://www.theindependencecenter.org).
2. Additional information about Centers for Independent Living is available at <http://www.ilru.org/projects/cil-net/cil-center-and-association-directory>.
3. For more information on the VD-HCBS readiness review, please visit <https://nwd.acl.gov/VD-HCBS.html#BecomeAProvider>

The VIC program launched in early 2016 with two Veterans. The decision to launch the program with a small number of participants enabled The IC to ensure that the program's first two enrollees were satisfied and successful in managing their finances and services while waiting for the first payments from the VA to arrive. Once The IC received the first round of payments from the VA, staff began enrolling more Veterans.<sup>4</sup>

## Program Processes and Features

### VHA Purchased Care HCBS Case Mix and Budget

**Tool and Person Centered Assessment:** When a Veteran enters the program, the VIC person centered counselor, referred to as a "Veteran Coach" by the IC, provides an in-home assessment<sup>5</sup> to thoroughly evaluate the level of support each Veteran needs to live independently. The Denver VAMC Program Coordinator places Veterans into one of 12 tiers, which are used to determine their budget. Veterans needing more support are placed in higher tiers and are provided a higher budget for services.

The VHA Purchased Care HCBS Case Mix and Budget Tool, used by the VAMC to determine the Veteran's level of need for in-home assistance, assesses activities of daily living, behavioral characteristics and special nursing needs to determine the monthly budget category that a Veteran would be eligible for if they choose to participate in VD-HCBS. The monthly budget amounts are published on the VD-HCBS page of the No Wrong Door website (<https://nwd.acl.gov/VD-HCBS.html>). For the Denver program, when the VAMC refers Veterans to The IC, the budget rate has already been identified by the VAMC via the Purchased Care HCBS Case Mix and Budget Tool.

**Services:** The VIC's Veteran Coach conducts an in-home visit to work with the Veteran to determine how he or she chooses to utilize the budgeted funds. A unique feature of the VD-HCBS program is the opportunity for Veterans to customize their care. They are not tied to traditional service packages. Some examples of services can include home modifications, hiring a family member, friend or neighbor to provide personal care, transportation, grocery deliveries and assistive technology.

In the **Financial Management Services model**, an FMS provider is used to manage payroll and employment arrangements.

In the **Fiscal/Employer Agent model**, the Veteran (or their representative) is the common law employer of home-based workers who are employees. The Veteran hires, fires, trains and manages workers. The Fiscal/Employer Agent (F/EA) provides support to Veterans as they complete and file the appropriate tax forms to become an employer, manages payroll duties on behalf of the employer and withholds, deposits and files applicable taxes on the employer's behalf.

This model generally offers the Veteran more choice and control over the entire self-directed employment process.

The IC prepared a request for proposals<sup>6</sup> and selected ACES\$ Financial Management<sup>7</sup> because of its experience with consumer direction as a Center for Independent Living. ACES\$' expertise in consumer-directed financial management and its willingness to pay employees in advance while the IC waited to receive payments from the VA also factored into the IC's selection of ACES\$.

4. View the VD-HCBS Billing & Invoicing Procedures Guide at <https://nwd.acl.gov/VD-HCBS.html#AlreadyAProvider>

5. View the intake form used by the VIC program at <https://www.aginganddisabilitybusinessinstitute.org/wp-content/uploads/2018/03/VIC-Intake-ADL-Assessment.pdf>

6. View the Request for Proposals prepared by The IC at <https://www.aginganddisabilitybusinessinstitute.org/wpcontent/uploads/2018/03/RFP-FMS.pdf>

7. Information on ACES\$ is available on the website at <https://mycil.org/access-financial-management-services.html>.

**Veteran Orientation to Employer Role:** When Veterans join the program, a representative of ACES\$ completes the enrollment process and explains to the Veteran their responsibilities, which include completing and submitting time sheets, as well as selecting, managing and, if necessary, terminating employment of the person providing services.

### Factors Contributing to Success

Colorado, and Colorado Springs in particular, contains a large community of Veterans, due to the number of military bases in the area. The large military community included numerous Veteran support groups and organizations, allowing The IC to **easily find and network with Veterans** in the area. The power of Veterans advocating on their own behalf for particular programs cannot be overstated.

The IC's commitment to build a strong partnership with the Denver VAMC through ongoing monthly meetings was vital, and enabled the team to withstand multiple changes in leadership at the Denver VAMC.

**Direct outreach to Veterans within the community built the strongest VIC referral source: word of mouth among Veterans.**

Additionally, The IC spoke at length with other states that had previously established similar programs. Collaborating with experienced VD-HCBS sites prior to launching VIC was of tremendous value. Now, with a strong program, the VIC team is providing mentorship to a peer CIL in Boulder, Colorado.

### Lessons Learned

The leaders of The IC learned several important lessons in starting and operating the VIC program:

- **Form a relationship with the VA:** Constant communication and meetings with the VA staff were crucial to get the VIC program off the ground and flourishing.
- **Know what kind of FMS is needed.** It is important to understand what kind of FMS provider will work best for the program. The IC thought carefully about everything they needed in a FMS provider before they prepared their request for proposal.
- **Start small.** When first starting the program, The IC only enrolled two Veterans to ensure systems were successfully in place and to guard against possible cash flow problems, which could have been damaging to the organization. Now, payments are consistently received every 60-90 days.
- **Building trust with veterans:** Offering monthly in-home visits to Veterans developed trust and ensured all Veterans' needs were being met.
- **Use a Billing Clearinghouse:** All bills are first checked by the clearinghouse for accuracy and proper coding before being sent to the VA. This dramatically decreases rejections and speeds payments.
- **Collaborate with Key Partners:** Disability networks interested in launching a VD-HCBS program need to solidify good relationships and communicate with their state aging and disability units.

## Conclusion

Given that the Veterans Health Administration seeks to help Veterans live independently, the VD-HCBS program is a priority, as it enables Veterans to control their long-term services and supports, allowing them to personalize the assistance they receive. Many Area Agencies on Aging have started VD-HCBS programs with VAMCs. To date, Centers for Independent Living have been less involved, yet their experience in disability and independent living services, self-advocacy and consumer direction make CILs strong candidates to operate VD-HCBS programs or to partner in their operation. The rapid growth and success of The IC's VIC program<sup>8</sup> illustrates the potential for CIL success in the VD-HCBS program.

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8. The brochure describing The IC's VIC program is available at <https://www.aginganddisabilitybusinessinstitute.org/wp-content/uploads/2018/03/VIC-Brochure.pdf>.