APPENDIX B. Show Cards
Welcome!
This information will tell you more about a new way to obtain Personal Care Services

The Project will give you:
• More Choices
• More Control
• Greater Flexibility
• More Responsibility

1-888-682-0044
Division of Aging and Adult Services
P.O. Box 1437 – Slot 1412
Little Rock, AR 72203-1437
Consumer Direction Means
You Have a Say-so In –
What Services You Receive
Who Provides Those Services
When They are Provided
How They are Provided

3,500 Arkansans will have the opportunity to participate in this Project With
1,750 Arkansans selected to receive a cash allowance to help manage their own personal care services
Is Independent Choices Right For Me?

Only you and your family can decide

If you need help managing your services - a friend or family member may help you.

Participation is Voluntary!

Any time you wish to return to regular services - just call

Only your Medicaid Personal Care Services Change

*All other services remain just the same.*
I Think I'm Interested
Tell Me More!
Your participation is important!
You are helping us decide if this is a
good way to provide services.
We must have a way to measure
success in this experiment so
- we will have two groups -
one group will manage their own
services and receive the cash -
The other group will continue to
receive services from an agency.

We compare both groups
If you are willing to help us - your name will be sent to a computer in New Jersey.

The computer will select your name and tell us what group you will be in.
Everyone
Selected to Receive the Cash Allowance
Will have a Counselor

The Counselor is your partner

The Counselor -

✓ Offers Suggestions
✓ Helps with Problems
✓ Helps you become more Independent
✓ Visits you in your home
✓ Helps you plan your personal care services
✓ Offers Bookkeeping Activities
✓ Helps you Plan your Cash Expenditure Plan
The Cash Allowance

If I'm selected to receive the Cash

How much will I receive?

Your monthly cash allowance is based on the number of hours in your Personal Care Plan compared to the number of hours of Personal Care you actually receive in a month.

You receive $8.00 times this amount.

A Division staff person will tell you how much you can expect.
If I Am Chosen to Receive the Cash Allowance
How may I Spend It?

Hire someone to help you with your personal care needs?
Perhaps a friend, neighbor or relative?

Buy items related to your personal care?

Buy Necessary Items Not Covered by Public Funding?

Save for Something you need?
What Responsibilities do I Have If I Hire Someone?

You Will be the "Employer"
This means - you
Hire
Train
Supervise
Arrange to pay state & federal taxes

Remember - the Counselor is there to help you
Independent Choices Means You Have Responsibilities

- Keep Receipts:
  Part of the study will identify how the cash allowance is spent

- Answer Questions:
  Many people will contact you and want to know what you think about managing your own services

- Work with the Counselor
  Regular Home Visits & Telephone Calls
Accounts
You Choose

Checking Account
Medicaid $$

to
Counseling/Fiscal Agency

Agency

To your Bank
Or
The Agency Keeps & makes your payments

Savings Account
Medicaid $$

to
Counseling/Fiscal Agency

Agency

To your Bank
Or
The Agency Keeps & you ask for it
Does the thought of hiring someone and managing their payroll tasks sound too hard? You have choices and we're here to help.

Option I - "Chose Option I - you pay-out the funds"

Option II - "Chose Option II - that's all done for you!"
Your help is equally important. Whether you're in the Treatment or Control group:

**Treatment**

You receive the Cash

**Control**

The Aide continues to come

Everyone will be contacted to see what they think.

Without both groups - we don't have an experiment.
We Want You to Know

√ This is a Scientific Experiment

√ The Project will last for at least two years

√ You have a 50/50 chance to receive the cash allowance

√ You must follow all state and federal laws and regulations
We Want You to Know

☑ The Only Service Affected is Medicaid Personal Care
☑ All Other Services (including Medicare and Medicaid) Will Remain Unchanged
☑ This is a Voluntary Program
☑ You can Return to Agency Services at Any Time You Wish
☑ A Counselor will Help You by Providing Support and Advice
If I'm in the Control Group - Should I Be Disappointed?

NO!

Your services may stay the same
but you're opinions Count!

We need to know what is good and not so good about both ways. You can help us by talking with us.

You are the key to our success!
Independent Choices Rights

If you Disagree with any Decision
You have the Right to Appeal
This includes:
Loss of Medicaid
Loss of Personal Care
Eligibility
Removal from the Project
Number of Personal Care Hours

Sorry -
You cannot appeal your selection into the Group that does not receive the Cash Allowance