



## CMS National Direct Service Workforce Resource Center

# Starter Kit for NWD/SEPs: Design considerations for publicly-funded Matching Service Registries for home and community services

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## Overview

The demand for home and community-based services, and in particular personal assistance services (PAS) provided in individual homes, is soaring. This increase in demand is fueled, in large part, by the aging of the general population and the needs of people living with disabilities in the community. When given the option, many people choose—and benefit from—receiving their PAS using a consumer or participant-directed service delivery approach. This arrangement allows individuals to hire, manage, supervise, and discharge their own caregivers rather than receiving PAS from a home care agency. While some have a particular caregiver in mind, such as a family member or friend, other individuals may need assistance in locating a qualified and compatible paid caregiver, or PAS worker.

## What is a Matching Service Registry?

A “**matching service registry**” (MSR) facilitates connections between qualified PAS workers and individuals who self-direct their in-home services and supports. These registries can help match supply and demand, allowing individuals to tap into an up-to-date registry of available workers, and workers to signal their availability for employment. MSRs typically gather detailed information about the individual’s needs and preferences and the PAS worker’s availability, skills, and preferences. Individuals and PAS workers each must initiate their participation in an MSR. The resulting information is electronically stored and updated, and used to “match” individual and worker preferences.

## Why should NWD/SEPs be interested in Matching Service Registries?

No Wrong Door/Single Entry Point systems (NWD/SEPs) bring together multiple organizations in a community in a coordinated network to help older adults and individuals with disabilities and chronic conditions of all ages access the home and community-based LTSS they need to live successfully in their homes and communities.<sup>1</sup>

<sup>1</sup> Many NWD/SEP systems are funded by the Aging and Disability Resource Center (ADRC) initiative, a joint effort of the Administration for Community Living and the Centers for

NWD/SEPs are good candidates for hosting and maintaining MSRs because of their roles as single entry points/no wrong door systems for long-term services and supports (LTSS) for all populations. These networks play a significant role in connecting private paying individuals with services as well as facilitating consumer-directed services for individuals in Medicaid and Veterans Affairs programs. In addition, NWD/SEPs have valuable experience building and maintaining searchable resource databases of provider agencies and other community resources. Gathering and keeping the data about individual workers up-to-date is one of the biggest challenges to making matching service registries successful and sustainable. Matching service registries could be incorporated into existing NWD/SEP databases of agency providers, offering an efficient way to provide up-to-date information to individuals looking for in home services. Additionally, MSRs can offer PAS workers a more active role in signaling their interests, expertise and skills, and availability for employment. This starter kit expands on information presented in the 2012 *Issue Brief: The Potential of NWD/SEPs as Hosts for Publicly-Funded Matching Service Registries* available online at: [www.dswresourcecenter.org](http://www.dswresourcecenter.org).

### NWD/SEPs and MSRs Respond To What Individuals and Workers Both Want:

- ▶ Quick access to up-to-date information
- ▶ High quality services in community settings
- ▶ Good matches
- ▶ One-stop type efficiencies and functions

## Ok... I’m interested. What issues do I need to consider?

Several critical design elements have emerged based on the experiences of the 19 states in which publicly-funded matching service registries are operated either statewide

Medicare and Medicaid Services. Many NWD/SEPs identify themselves publicly as ADRCs.

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or regionally. These elements are interrelated and dynamic. Design decisions should be made in the context of risks and benefits, capacities, available funding and identified goals. Key questions and considerations related to the design and implementation of MSRs are explored below.

### Identifying Community Needs

Check the [PHI Matching Services Project Page](#) to see if an MSR already exists in your community. If so, contact the registry to learn more about: 1) its purpose; 2) who it serves (public pay/private pay clients/home care or other social service agencies); and 3) how it operates (i.e., fee-based, mandatory enrollment of providers). With this information, you can make a plan for assessing gaps in coverage. For example, which programs or populations are currently being served by the MSR? Are there regions of your state that the MSR does not cover?

### Soliciting Stakeholder Buy-in and Input

Consider creating an inclusive process that provides opportunities for all stakeholders to voice their needs. Interested stakeholders may include: individuals, paid caregivers, family members, case managers/peer counselors, service coordinators, supports brokers, worker representatives, governmental agencies (workforce, aging, physical and intellectual and developmental disability, Medicaid), and home care and other relevant social service agencies. Find out what referral or employment needs are currently not being met. What types of services and functionalities would individuals, PAS workers, options counselors, case managers, and supports brokers like to see in an MSR? And what concerns do stakeholders have about this type of service? Feedback regarding these important issues can be critical input to designing an effective MSR, and can help promote and achieve stakeholder buy-in.

### Deciding on an MSR Search Platform

Approaches to the “matching” function of MSRs range from entirely personalized, interview processes to largely on-line searches conducted by individuals and PAS workers. Most existing MSRs fall somewhere between these two extremes, with some in-person contact combined with online-driven or more automated elements. No matter which approach you take, it is worth considering who will be using the resource and making it user-friendly.

- ▶ **Online Search Platforms.** Most existing online search platform MSRs offer limited searchable

criteria, such as a search by zip code. Some offer more advanced search criteria. For example, searches might be based on what training a paid caregiver has completed, whether the worker has his or her own car, or has experience working with individuals with dementia. It is important to keep in mind that each additional search criterion further narrows the resulting list of “matches.” The Wisconsin Quality Home Care Commission Care Registry (defunded and closed in 2011) developed a sophisticated online platform that permitted individuals to search for PAS workers based on a complex of factors including care skills, ability to perform particular tasks, and available schedule. In addition to needs and skills, this platform solicited information from both individuals and caregivers about personality characteristics and preferred work environment in order to support a positive “relationship match.”

- ▶ **Staff-facilitation.** In lieu of or in addition to an online search function open to individuals and PAS workers, you may prefer to have dedicated MSR staff available to conduct interviews in person or over the phone, and then search up-to-date online databases in order to generate a list of available PAS workers for the individual. This is the method of choice at the MSR hosted by the [San Francisco IHSS Public Authority](#).
- ▶ **Logistical considerations.** When deciding which platform to use for your MSR, available technical resources and capacities also must be considered. Where will the MSR be hosted? Could you add the registry to your existing NWD/SEP web-based, searchable database? If not, do you have the internal capacity to build a new registry in house or should you contract with an external entity? Currently, registries in five states contract with a third-party non-profit corporation called Rewarding Work Resources, Inc., which provides the technical, web-based framework for the MSRs. In terms of scale, does it make sense to partner with other NWD/SEPs in your state and share in the cost of creating a larger registry?

### Linking to Additional Services

Matching service registries offer important central “locations” for linking both individuals and paid caregivers to other complimentary services. For example, in addition to the services of the MSR, NWD/SEPs could offer information on a broad range of worker and caregiver training opportunities provided by local organizations (e.g., *Alzheimer’s Foundation, the Red Cross, Centers for Independent Living, community colleges*). Some existing

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MSRs are directly affiliated with entities that provide training to PAS workers as well as assistance to individuals with their roles as employers. For example, the Oregon Home Care Commission, which operates the state's [Referral Registry](#), offers a wide array of optional training courses for individuals and workers and pays for annual CPR and First Aid classes for PAS workers. Trainings are offered several times each month in different locations across the state. The STEPS program, also offered by the Oregon Home Care Commission, promotes successful working relationships between consumer-employers and PAS workers by training individuals about their rights and how to assume employer functions such as hiring, supervising, and paying their caregivers.

### Financing Start-Up Costs and Ongoing Operations

Most existing MSRs were started with state-only **public funding**, often associated with a particular public program. The downside of financing registries this way is that they are exposed to the risk of program cut-backs or elimination during times of state deficits or with changes in the political environment. Such cutbacks recently resulted in the defunding of MSRs in Wisconsin and Michigan. While the federal government has yet to target specific funding to support the development of MSRs, operating an MSR as part of a NWD/SEP NWD/SEP might be supported with Balancing Incentive Payment funding, Money Follows the Person rebalancing savings funds, Medicaid or Veteran Affairs reimbursement for supporting consumer-directed services programs, and/or Older Americans Act and Rehabilitation Services Act funding for information and referral. A combination of state and federal funding for options counseling might also be available to invest in a registry.

**Private funding** could offer a robust means of financing MSRs. This could include subscription or user fees from users of the registry, or health care organizations that wish to support the registry's operations such as hospitals, rehabilitation centers and nursing facilities – all which have a vested interest in helping individuals make smooth and safe care transitions back to their homes. Additionally, MSRs may be an area of interest to private foundations with a focus on improving the community's infrastructure for providing community living supports, providing respite for family caregivers, and improving jobs for paid caregivers and the families they support/provide for.

### Recruiting Users, both Individuals and Workers

You will need a well-thought out strategy and resources to

invest in recruiting paid caregivers and individuals to participate in the registry– and the recruitment must take place on an ongoing basis. The [Massachusetts PCA Directory](#) sends out mass-mailings and places radio ads in an effort to reach potential PAS workers for the registry. On the consumer-side, early involvement and input in the design phase will help to ensure that consumer groups have a vested interest in using your registry – the director of Oregon's MSR attributes much of their success to having good buy-in from individuals with disabilities. Additionally, MSRs will not work on a significant scale without the support of relevant state and federal programs, which should require or at least encourage all the organizations in the NWD/SEP network and other referral points (e.g., hospital discharge planners, managed care organizations, Money Follows the Person transition coordinators) to utilize the MSR when assisting individuals.

Ultimately, you must take into account PAS worker availability and consumer demand, and how these may differ based on geography and other factors. Failure to do this could mean, at best, a lack of interest in your MSR, and at worst, the possibility that individuals will fail to identify workers who can deliver needed services.

### Conducting Criminal Background Checks

Recent stories in the media exposing abuse and financial exploitation have contributed to the demand for criminal background checks for PAS workers, even those who are family members. When operating an MSR, there are two decision points to consider: will you offer criminal background checks at all? How will you use the results?

Conducting and analyzing the results of criminal background checks is a time-consuming and complex process requiring both financial and personnel investments. Begin with a thorough understanding of your state's requirements and procedures for conducting criminal background checks including what information (arrests, convictions, or both) can be gathered and the rights of a worker to challenge or appeal the results. If you decide to offer formal criminal background checks as a service of your MSR, will you use the results of criminal background checks to disallow certain caregivers, or will you allow individuals to decide how to use the information? If you do decide to disallow workers, what crimes will make a potential PAS worker ineligible for the registry? Who will pay for this service – the individual, the caregiver, or the MSR?

Based on liability concerns, existing MSRs typically do not directly conduct criminal background checks on the PAS

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workers listed on their registries. Instead, staff may help individuals complete their own state-based criminal background checks by referring them to online databases, necessary forms, or organizations that conduct the searches.

### Building Broad-based Support among Referral Points and Stakeholders

For matching services to be successful in the long run, they need ongoing support from stakeholders. Not only should individuals and entities contribute to the design phase, but they must also be willing to make use of the registry once it's implemented. Who besides individuals and PAS workers could benefit from your MSR?

Community mental health clinics and other aging and disability services organizations that help arrange services for individuals could be critical referral points for both the NWD/SEP and the MSR. Additionally, other community organizations that provide information and referrals, such as 2-1-1 systems, could be key partners.

An even broader definition of stakeholders may be necessary to make MSRs truly sustainable, for example, one including physicians, hospitals, medical homes, and nursing facilities. Any entity with an interest in preventing re-hospitalization and promoting successful transitions to individual's own homes might find the MSR to be a valuable tool. Engaging these entities early in the planning process and maintaining relationships could be critical in ensuring that the MSR is well-utilized. For example, after having some difficulty recruiting individuals to their registry, the [Washington Home Care Referral Registry](#) has had success providing Medicaid case managers access to the registry on behalf of the individuals they serve.

### Metrics to Demonstrate Value

When it's all said and done, the sustainability of your MSR will depend on its success and value. How will you measure this? By the number of caregivers and individuals enrolled? By the number of "successful" matches made using your service? All of these metrics are dependent on up-to-date information – you will need to know which PAS workers are "actively" looking for work and which individuals are "actively" looking for PAS workers. You will also need to know if an individual/worker match has been achieved through your system. NWD/SEPs providing options counseling to individuals could track the success of a match as part of a standard follow-up protocol. It is important to define what a "successful" match is in advance so you will be able to track it. Furthermore, maintaining good communication with enrolled paid caregivers and individuals is critical so that you can solicit

information and feedback when needed. Again, this will depend on good stakeholder buy-in, providing access to auxiliary services valued by individuals and workers, and dedicated staff who will keep all interested parties connected to and invested in your MSR.

### Conclusion

Matching service registries have the potential to play an important role in supporting individuals who use long-term services and supports, and the caregivers who provide them. With the proper design and implementation, these registries could help reduce the unmet need experienced by some individuals when trying to locate PAS workers and could prove to be a welcomed addition to the related services already offered by NWD/SEPs. They can also provide home care workers with additional employment opportunities, which may make it possible for more workers to stay in the field. Additionally, MSRs can provide valuable access points for training resources for workers and consumer-employers as well as other resources that bolster high quality services. Designing and operating a sustainable MSR requires a thoughtful approach and strategy that is mindful of risks, benefits, capacities, and resources.