

A Guide ?

TO BECOMING A



MEDICAID WAIVER CARE COORDINATOR

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INTRODUCTION

Hello and welcome!

If you are reading this guide, you may be thinking about becoming a Medicaid waiver care coordinator in Alaska. We need more care coordinators and are glad you are interested. This booklet provides a realistic job preview and an outline of how to enter into this important field.

Becoming a Medicaid waiver care coordinator has a steep learning curve. The job is complex with many components. Information in this guide is from current care coordinators and team members within the State of Alaska Senior and Disabilities Services division. It is not a comprehensive how-to manual but outlines the onboarding process and organizes the many available resources.

In addition to describing the job of care coordination and providing background on the training and certification process, this booklet also describes how to start a small business. Many care coordinators in Alaska are self-employed as independent care coordinators. While this is an exciting opportunity, it requires starting a business which has a different set of skills and knowledge. It's important to keep in mind that if you like the idea of being a care coordinator but are not interested in self-employment, there are organizations that will gladly hire you and provide the training and support needed to become a certified care coordinator. If this is the route you choose, do not start the journey without talking with potential employers.

If you do decide to “go it alone” we hope this guide will provide a map for the journey.



*The job title of “care coordinator” may be used in various healthcare settings to describe the role of a person who is helping to manage the care of an individual. This guide is specifically about the role of a Medicaid waiver care coordinator who provides billable services and is certified by the State of Alaska Division of Senior and Disabilities Services as defined in **7 AAC 130.240***

Table of Contents

SECTION | 01

What is a Medicaid Waiver Care Coordinator?

4

Recommended skills and abilities	5
What does a Care Coordinator do?.....	6
Typical day	7
Where does a Care Coordinator work?.....	8
Independent versus agency-based	10

SECTION | 02

How do I learn how to be a Care Coordinator?

11

Required education and/or experience.....	12
Training Options.....	12

SECTION | 03

How do I start a care coordination business?

15

Initial steps.....	16
Creating a business plan	17
Additional Business Advice	18

SECTION | 04

How do I start a care coordination practice?

20

Certification.....	21
Enrollment	22
You aren't finished – Harmony is next.....	23

SECTION | 05

I'm ready to go – now what?

25

How to build a caseload.....	26
Good customer service is key	27

RESOURCES

29

Contacts	29
Provider Associations.....	29
Training Resources.....	29
State of Alaska Information.....	29
Alaska Small Business Development Center Resources.	30
Other Helpful Resources	30





WHAT IS A MEDICAID WAIVER CARE COORDINATOR?

It's a lot of work but it is well worth it. For me, the opportunities that care coordination can provide are worth it. It's not the field for everyone. But if it's something you are thinking about, I would encourage you to look into it. -J.A.



RECOMMENDED SKILLS AND ABILITIES

First and foremost, it is important to know that this is not an entry-level position in human services. Medicaid waiver care coordinators are responsible for navigating complex systems and helping people access necessary services and support, while staying neutral and maintaining professional boundaries. To be a care coordinator you must be able to:

- ✓ *Have a lot of self-accountability. You have to be a go-getter. If you are not good at self-accountability, this is not the profession for you.*
- ✓ *Be flexible. The work does not always happen 9-5 Monday through Friday.*
- ✓ *On the other hand, have a clear mind about where your boundaries will be. There will always be more need than you can provide. Regulations do provide some guidance on where those boundaries should be.*
- ✓ *Have immense empathy all the time without judgment. You have to be able to accept and honor who people are and keep your bias in check. You help people live their lives, not help them to live the lives you think they should live.*
- ✓ *Be adaptable – know that the rules may change in the middle of the game.*
- ✓ *Be willing to reach out for help. You have to be able to say “I don’t know the answer to that, but I will find the person who has the answer”.*

- ✓ *Manage both the people part and the non-people part. People come into this wanting to work with people but there’s a lot of non-people tasks like writing support plans, working in online computer systems, tracking deadlines, completing forms, and so on.*
- ✓ *Collaborate with an interdisciplinary team. There can be many players in a person’s life – family members, doctors or other healthcare providers, school staff, friends, employers, community service providers and so on. The care coordinator facilitates effective communication while ensuring the person’s needs and preferences are addressed.*
- ✓ *Have excellent time management and organizational skills – you will need to track every individual’s timelines. And there are many ongoing due dates to manage.*

While not required, it’s strongly recommended that prospective care coordinators have professional experience in health care or disability services. Care coordinators are expected to know what’s available and helpful to people with a wide range of medical, behavioral and rehabilitative needs. While initial training is provided and ongoing professional development is expected, it’s important for prospective care coordinators to have a foundation of knowledge and experience to start with.

If you can honestly read through this section and feel like you have what it takes, then read on!

WHAT DOES A CARE COORDINATOR DO?

My care coordinator helps me write my plan of care, she follows up with me every month, and she encourages me to live my best life.

- a person who receives services



Alaskans who experience significant physical, mental, medical, developmental, or other challenges have the right to care in an institution or a facility; this is required by the federal Medicaid system. People can “waive” this right and instead get Medicaid to pay for a “waiver” that covers care in a person’s own home, or in a smaller community facility like a Group Home or Assisted Living Home. Some waiver programs also pay for activity programs, modifications to homes, life alert bracelets, and other helpful support.

Applying for a waiver is a maze, though. There are multiple waivers, and qualifying isn’t easy – there’s strict criteria that results in many Alaskans being denied needed services. That’s why Medicaid requires waiver applicants to choose a waiver care coordinator to help them navigate the hoops and hurdles. The care coordinator talks applicants through the application process, the State’s assessments, and the waiver program’s financial requirements.

Once a person qualifies for a waiver – which typically takes months – a care coordinator helps arrange services and reports monthly on how the waiver recipient is doing. Small changes to a person’s care network means extra paperwork, and the lengthy waiver application process repeats yearly. A care coordinator’s job is to make all this as easy as possible on the waiver recipient and their family.

There are five primary types of Medicaid waivers. A care coordinator can choose to be certified for all waiver types or specialize in a particular waiver.



1. **Alaskans Living Independently (ALI):** for adults age 21 or over who require nursing-type care; this is the waiver typically serving older Alaskans.
2. **Adults with Physical and Developmental Disabilities (APDD):** for adults age 21 or over who have a developmental disability and also require nursing-type facility care.
3. **Child with Complex Medical Conditions (CCMC):** for children and youth under age 22 who are medically fragile and are often dependent on frequent life-saving treatments or medical technology. They require a level of care similar to an acute hospital or nursing facility.
4. **Individuals with Developmental Disabilities (IDD):** for a child or adult with a developmental disability that requires a significant level of ongoing daily support. The State uses a functional assessment tool to determine if a person is eligible for this type of waiver.
5. **Individualized Supports Waiver (ISW):** A person who qualifies for the IDD waiver may be on a waitlist for that waiver but have access to services through the Individualized Supports Waiver (ISW). There are two additional services that require a certified Medicaid care coordinator: **TEFRA** is a Medicaid program designed to help children under 19 years old with costs related to their disabilities. **Community First Choice** which provides access to a limited number of services but allows for more autonomy.



On a given day a care coordinator can be found checking on waiver recipients in their homes or at their activity programs. The care coordinator will be fielding calls from caregivers and families through all of this and checking on more of their caseload over video chat. During the same day a care coordinator may attend a court hearing, appealing the State's denial of care for someone on their caseload. And always: literal stacks of paperwork await a care coordinator back at their office or home workspace. – N.A.

A TYPICAL DAY

Care Coordination is about getting people the help they need from a system that's designed to tell them "no." No day is the same, your brain will never be unstimulated, and you'll make a positive difference in many people's lives. – N.A.



What does a typical day look like for a care coordinator? Actually, the answer is there's not a typical day. This is not a job for you if you like predictability and routine! Here's examples of care coordination tasks that might happen during a day:

- Spend the day writing a support plan and entering information into the state's database (called Harmony)
- Facilitating a team meeting with the person and team members. Team meetings can range from just 1-2 people in a room (the

person receiving services and a family member or guardian) or might include dozens of people including multiple direct support professionals, employment specialists, medical providers or educational specialists.

- Addressing a crisis – for example, a client ends up in the hospital unexpectedly. This may involve phone conversations with the service provider, team or guardian. Or a person may get kicked out of their apartment and need help connecting with housing resources. In addition to time spent problem solving, you also need to submit a report to inform the State of Alaska of events or changes in the person's situation.
- Checking in with the person to make sure they are getting the services according to the support plan.
- Assisting the person to navigate systems ranging from public assistance to housing to employment to medical transportation.
- Connecting a person with community resources. Medicaid is the payer of last resort; care coordinators get to know their communities really well so they can be effective community resource guides.

Recently I reached out to someone on my caseload because I needed to do my monthly visit. She was sick and wanted me to bring her tea and a COVID test. You just have to be ready to meet someone where they are at. – J.E.



Ongoing Tasks



- Visits with each recipient (frequency depends on the type of waiver)
- Check-ins with service providers to monitor the services being delivered
- Helping the person to access additional services
- Arranging meetings to develop the support plan
- Updating or amending the plan as needed
- Keeping track of many deadlines
- Submitting documents on time
- Writing notes to document the services you are providing
- Keeping your training current
- Attending informational meetings and reviewing e-alerts regarding system changes
- Updating your certification
- Communicating with your back-up care coordinator
- Billing Medicaid for the services you provide

WHERE DOES A CARE COORDINATOR WORK?

Prior to 2016, most care coordinators worked for medium to large organizations that provided a range of home and community-based services. Before 2016 most care coordinators went through an orientation process with an organization, were provided training and ongoing supervision, and administrative support to fulfill the demands of the job. Now this is the exception to the rule because the federal government determined it was a conflict of interest for the care coordinator – who is an advocate for the recipient – to work for the same organization that provided the services. This change created a great deal of flexibility in the work environment, depending on individual preferences, as well as new challenges. A care coordinator can choose to work in the following settings:

- **A self-employed independent care coordinator** – In this situation, the care coordinator is also the business owner and provider administrator.
- **A care coordination only organization** – There are companies around Alaska that are owned by a care coordinator who then hires or partners with additional care coordinators to work for or with them.

- **A multi-service organization** – There continues to be organizations that provide a range of services and employ care coordinators. These are either non-profit or tribal health organizations, typically in more rural areas that have qualified for an exemption based on a lack of care coordinators in the region. Or in some situations, care coordination is the only Medicaid waiver service the organization provides although it may provide other services funded by grants or other non-Medicaid sources.

Each of these options has advantages and disadvantages. It's important to consider your individual strengths and preferences to identify which setting fits your personal career goals.

There's so much need – there's always the type of people who don't want to be independent. There's room for both. – J.L.



I like being a care coordinator; I'm learning a lot. At first, I thought this was the worst idea I have ever had. After a year of having clients and being certified, now I feel actually prepared to complete my certification. In five years, I might be able to mentor someone. – K.M.



INDEPENDENT *Versus* AGENCY-BASED

WORKING AS AN INDEPENDENT

- Create your own system for how to do things
- Your income is driven directly by your work ethic
- Complete control of your time
- A back-up care coordinator is required by the state – this can be challenging to identify
- Your income may fluctuate depending on your caseload

WORKING AS PART OF AN AGENCY

- You have team members that provide a support system, guidance, make sure balls aren't dropped
- Have a built-in backup care coordinator
- Work within an already established system
- You may have access to benefits like health insurance, paid leave, 401(k), liability insurance, worker's comp
- You don't have to build your caseload from scratch



HOW DO I LEARN HOW TO BE A CARE COORDINATOR?

In order to support yourself in this diverse role, it's important to build relationships with other people who can be resources to you. It's impossible to have all the answers; we are so fortunate that this care coordination community is amazing. It truly is an alliance and definitely a community. And just know that there are many care coordinators who are willing to help because we definitely welcome people to our group. - R.R.



REQUIRED EDUCATION AND/OR EXPERIENCE

As stated earlier, being a care coordinator, especially working as an independent care coordinator, is not an entry-level position. Before care coordinators can bill for any services, they must be certified by the State of Alaska. And while Alaska's Senior and Disabilities Training Unit has built a care coordination training program, potential care coordinators are required to have the following foundation of education and/or experience prior to starting the training and certification process:

- *Bachelor of Arts, Bachelor of Science, or Associate of Arts degree from an accredited college or university in social work, psychology, rehabilitation, nursing or a closely related human services field, and one year of full-time, or equivalent part-time experience working with human services recipients; OR*
- *Two years of course credits from an accredited college or university in social work, psychology, rehabilitation, nursing or a closely related*

human services field, and one year of full-time, or equivalent part-time experience working with human services recipients; OR

- *Three years of full-time or equivalent part-time experience working with human services recipients in social work, psychology, rehabilitation, nursing, or a closely related human services field or setting; OR*
- *Certification as a rural community health aide or practitioner and one year of full-time or equivalent part-time experience working with human services recipients*
- *In addition to meeting education and experience requirements, care coordinators must possess, or develop before providing program services, the knowledge base and skills necessary to carry out the care coordination process.*

The care coordinator provider administrator is required to have more education and experience in addition to that required of a care coordinator.

It's important to carefully review the more detailed description of the requirements in the Care Coordination Conditions of Participation. Before going any further, be aware that you will be required to submit verifiable documentation that you meet the required education and/or levels of experience. Personal experience cannot be substituted for professional experience or education.

TRAINING OPTIONS

SDS's training program is comprised of approximately seven courses culminating in a final exam. It kicks off with a course provided through the University of Alaska Center for Human Development titled "Basic Concepts of Care Coordination". This is the only "live" in-person training offered and covers a broad range of topics.

My advice? Find a good mentor. Don't try to figure it out on your own. The training does not prepare you for what a care coordinator does. – K.M.



coordinator interviewed for this guide recommended finding a mentor if you are planning to work as an independent care coordinator.

You have to find a CC who is going walk with you intimately, so you are not disrupting or destroying other people's lives ... Be willing to reach out for help. Read the regulations, the conditions of participation. You have to be able to say the entire journey as a care coordinator – I don't know the answer to that, but I will find the person who has the answer to that. – C.S.



This training is offered virtually so that it's accessible statewide. The remaining trainings are available on-demand and are pre-recorded videos on specific topics, primarily focused on state and federal regulations as well as the systems that care coordinators must navigate within the Alaska Medicaid waiver programs. Upon completion of the courses, potential CCs must pass the care coordinator exam with an 80% or higher.

In addition to the technical training required to be a care coordinator, it's important to know there is a lot to this job that is not part of the technical training. Care coordinators have an important role in people's lives. And as anyone who's worked in human services knows, people's lives are unique and can have a lot of moving parts. Every care

And while there are many things to learn, the job offers many opportunities, including making a difference in people's lives.

Learning how to be a care coordinator happens over time. Experienced care coordinators share that they are constantly learning – new resources, new technology, new programs.

What a Care Coordinator needs to know

Ref: Care Coordination Conditions of Participation



- An understanding of person-centered planning
- Medical, behavioral, habilitative, and rehabilitative needs of the people being served
- Laws and policies related to Senior and Disabilities Services programs
- Terminology commonly used in human services fields or settings
- Elements of the care coordination process, and
- Resources available to meet the needs of recipients.

What a Care Coordinator needs to be able to do



- Support a person in directing the development of a support plan, based on their strengths and abilities, that leads to a meaningful life at home, at work, and in the community
- Effectively assist the person in communicating their choices and decisions and collaborating with the person's supporters
- Organize, evaluate, and present information

It is great to be in a planning meeting and to see someone accomplish a goal or be a part of assisting an individual in living in a setting they want with the support services they want. And, even though we have a lot of administrative tasks that can seem like a pain, I love being able to help a guardian complete a Medicaid reapplication packet as it is something that they can take off their to do list. Even being able to assist in the littlest ways are why we are here. -M.H.



SECTION

03



HOW DO I START A CARE COORDINATION BUSINESS?

If you are interested in working as an independent care coordinator, you will be required to establish a care coordination agency – essentially you start your own business. There are many parts to running a small business. Alaskans are fortunate to have an excellent free resource – the Alaska Small Business Development Center (Alaska SBDC). One of the biggest challenges with running a small business is that it's hard to be an expert in everything. As a care coordinator, you are focused on your purpose and your mission. The Alaska SBDC has expert advising, tools, resources, and workshops to help form, operate, and manage your business. With this foundation, you can start doing what you do best: run your Independent Care Coordination Agency.



Becoming a client of the Alaska SBDC is a straightforward process. Visit the website for more information, register as a client to access the tools and resources, and/or request to meet with an advisor: aksbdc.org. **There, you will find links to Basic Business FAQs, Workshops, and Tools and Resources.**

DISCLAIMER: The following is general guidance and should not be considered comprehensive. The SBDC cannot provide legal or tax advice.

INITIAL STEPS

In the planning and preparing stage of becoming an Independent Care Coordination Agency, the initial steps include setting up the business structure, confirming the financial viability of your business,

and building a network of relationships both to build your client base as well as for support and mentoring.

The initial startup steps for structuring your business include:



- 1. Naming your business.**
- 2. Determining your business structure.** Selecting the right legal structure for your business is crucial, whether you're self-employed as a sole proprietor or single-member LLC, or partnering with others for example; general partnerships, limited partnerships, or LLPs. Each option has distinct implications regarding owner equity, responsibility for debts, liability, and how profits and losses are reported. Consult an attorney and tax advisor to fully understand how your choice will affect you.
- 3. Purchasing a business license.**
- 4. Opening a business bank account.**
- 5. Purchasing business insurance.**
Important note: Sole proprietors without employees or volunteers are exempt from the commercial general liability insurance and only required to maintain professional liability. Sole owners operating under an LLC or similar business structure are required to maintain coverage for commercial general liability insurance with minimum coverage limits of \$300,000 combined single limit per claim and names Senior and Disabilities Services (SDS), Provider Certification and Compliance Unit, 1835 Bragaw Street, Suite 350, Anchorage, AK 99508-3487, as a certificate holder for that insurance.

CREATING A BUSINESS PLAN

Another important step is confirming the financial viability of your business. In every business venture, an essential initial step involves determining the income you'll need to sustain yourself. Do you intend to do this full-time, earning enough to pay yourself to cover all your personal living expenses? It may look very enticing to multiply the reimbursement rate by your estimated maximum caseload. However, with care coordination, you must determine two variables: how long could it take to build your caseload, and how many clients can you handle? The second requires estimating how many hours you'll have to dedicate a month for each client. (Other care coordinators will be able to provide helpful information). Ultimately, what is the minimum number of clients you will need in order to cover your monthly business expenses plus your "salary"?

Once you flesh out your revenue, it's important to think through your business expenses. Here are areas to consider when determining your expenses:

- 1. Startup Costs Assessment:** Identify and list all one-time startup costs required to launch your business. This includes expenses like equipment purchases, legal fees, permits, initial marketing costs, and any necessary renovations or improvements to your workspace.
- 2. Fixed Expense Analysis:** List your ongoing fixed expenses, such as rent, utilities, insurance, and salaries (if applicable). These are recurring costs that you'll need to cover regularly, regardless of your revenue.
- 3. Variable Expense Calculation:** Determine your variable expenses, which can vary with your level of business activity. This category includes costs like office supplies, marketing/advertising, and travel (gas).
- 4. Tax Planning:** Understand your tax obligations as a small business owner. Consult with a tax professional to estimate your tax liability, including income tax and any business-specific taxes or deductions. Ensure you have a system in place to set aside funds for tax payments.
- 5. Profitability Analysis:** Calculate your projected profits by subtracting your total expenses (fixed and variable) and estimated taxes from your projected revenue. This will give you an idea of your potential profitability.
- 6. Owner's Compensation:** Determine how much you plan to pay yourself from the business earnings.
- 7. Cash Flow Projection:** Create a cash flow projection, which outlines how money will flow in and out of your business on a month-to-month basis. This will help you anticipate any potential cash flow gaps and plan for them in advance.
- 8. Sensitivity Analysis:** Assess the sensitivity of your financial projections by considering different scenarios. What happens if your revenue is lower than expected or if your expenses increase?
*Alaska Medicaid reimbursements/payments can be affected by things outside your control.
- 9. Regular Monitoring:** Once your business is operational, monitor your financial performance against your projections. Adjust your budget and business strategies to stay on track or adapt to changing circumstances.

ADDITIONAL BUSINESS ADVICE

There are a few additional considerations when starting a small business. It's crucial to separate your personal finances from your business finances. The Alaska SBDC advises that business owners open a dedicated business bank account and use it exclusively for business transactions. This separation will make bookkeeping and tax reporting much easier and help protect your personal assets in case of legal issues or financial challenges in your business.

In addition, it's helpful to create a solid business plan. Even as a sole owner/proprietor, having a well-thought-out business plan is essential. A business plan can serve as a roadmap for your business, helping you stay focused on your objectives and adapt to changing circumstances. There is a template available on the Alaska SBDC website. Areas to address include your business structure, the services you plan to provide, how you will market your services, and your financial performance and monitoring plan. And you should

consider how you will do your bookkeeping, either through your own software or paying for a service.

It's also important to understand your tax obligations. As a sole owner/proprietor, your business income is typically reported on your personal tax return. Be sure to understand your tax obligations, including self-employment taxes, and keep accurate records of your income and expenses. Consider consulting with a tax professional or accountant to ensure you're complying with tax laws and taking advantage of any deductions or credits available to you.

Lastly, don't hesitate to reach out to other care coordinators, join networking groups, or seek mentorship. Building a support network can provide valuable insights, advice, and emotional support during the challenges of entrepreneurship. Remember that being a sole proprietor can be both rewarding and challenging. Staying organized, informed, and focused on your business goals will help you succeed in this role.

I advise starting off establishing systems and practices that will make your life easier down the line. For example, download the RAs (Remittance Advice) from HMS each week to check for accuracy against the claims that have been submitted. Along with this, every two years the State will require a "self-audit" of these claims to verify no over payments were made. It's difficult to go back and get them later so it's a good weekly practice to start with." - E.B.



Building a BUSINESS



SETTING UP TO OPERATE: Technology and Programs



**START
HERE**

GETTING STARTED

1
Create a simple
Business Plan

2
Confirm Financial
Viability of the
business

3
Review
requirements to
become a Care
Coordinator

STEPS TO FORMING A BUSINESS

1
What will be the
name? (check if
it's already
in use)

2
Determine tax
structure
(sole prop, LLC,
GP, etc.)

3
Form LLC
if applicable

4
Get an EIN
number

5
Purchase a
Business License
(An LLC must
buy the license)

6
Open a
Business Bank
Account

7
Purchase Business
Insurance (research
beforehand with an
insurance broker or
an agent)

8
Explore and
identify personal
health insurance
options

**Tax
Advisor
(Optional)**

7
Online meetings
program account
(Ex: Zoom)

8
Decide on
bookkeeping method
(Ex: QuickBooks)

9
Record Keeping:
Set up both physical and
computer files in HIPAA
compliant manner

10
Design your
Forms

1
Background
Check

2
Critical Incident
Reporting

3
Financial
Accountability

4
Independence
and Inclusion

6
Person-Centered
Practice

7
Quality
Improvement

9
Termination of
Provider Services

10
Training

11
Complaint
Management

12
Confidentiality

13
Notice of Privacy
Practices

14
Conflict of
Interest

15
Emergency
Response

16
Evaluation of
Employees

**SETTING UP TO
OPERATE:**
Set up Policies and
Procedures for each step!



HOW DO I START A CARE COORDINATION PRACTICE?

There are two important tasks that every person interested in becoming a care coordinator, no matter what type of work environment they plan to work in, must complete:

- 1. Certification by the State of Alaska.**
- 2. Enrollment as a Medicaid provider with Alaska's Medicaid fiscal agent.**

If you plan to be an agency-based care coordinator, your employer will walk you through the steps of certification and enrollment. If you plan to be an independent care coordinator, read on.

CERTIFICATION

Certification standards and requirements are defined by state regulations. The Division of Senior and Disabilities Services has a Provider Certification & Compliance (PCC) Unit that assists with certification and also ensures providers comply with the regulations. Keep in mind, care coordinators provide a government-funded service. The organization you work for, or the company you start, can be audited and held liable for not following the rules, which may result in financial or other penalties. The State wants to ensure that services are delivered by people who understand the rules and who are able to meet the needs of the waiver population. To become a certified care coordinator, an applicant must submit a complete application that contains the required documentation and forms within 12 months of completing the SDS required training.

Things to consider before applying to be certified:



- You will need to identify the certified provider agency you work for. If you are planning to be an independent care coordinator, you must submit a separate provider agency certification application packet at the same time as the care coordinator certification application. Each packet must be a complete set of required documents, even if there are duplicate documents/forms, as they will be reviewed separately.
- You will need to have passed the care coordination exam with a score of at least 80%. This documentation is submitted with your application.
- You will need to decide which waiver programs you will offer services for. Most care coordinators are certified in the five primary programs (APDD, ALI, CCMC, IDD, and ISW). Care coordinators can also provide services for the TEFRA program and targeted case management through the Community First Choice program.
- You must decide specially which regions in the State you will serve.
- You will be asked for the name and contact information for a back-up care coordinator. This is an important consideration; this person must commit to ensuring the needs of your clients are met or that there is a transition plan in the event something happens to you.
- You will need to establish a static IP address through your internet provider in order to create an account with the Background Check Unit, a requirement for certification. There are multiple options for this. See the resource section for a contact to assist.

The biggest recurring barrier I faced to certification and recertification as a solo care coordinator was identifying a backup care coordinator. This is challenging for a variety of reasons, chief among them is the practicalities of the relationship. Being connected with practicing care coordinators is vital, but I often found it was not enough. Year-to-year my backup care coordinator was different. Even if your relationship with your backup is superficial, the relationship has to be close enough that they are willing to share their SSN and birthdate with you (for the Background Check Unit). – J.E.



If you have chosen to become a self-employed care coordinator, or are seriously considering it, you will need to create your care coordination business while also learning how to be a care coordinator (See the previous section: How do I start a care coordination business?). The certification application for a provider organization is much more detailed than the application to become a care coordinator. A key resource is the Provider Certification Application Guidance, found on the SDS website. This guidance provides a detailed description of the documents and forms required for certification – **read this carefully!** Many of the business details of your new organization will need to be determined before submitting this application. In addition, you will be required to submit policies and procedures which describe how you plan to deliver services in compliance with the state's requirements. It is important to be thoughtful about your policies and procedures. See the Resource section for a link to a template.

ENROLLMENT

Once the State certifies that you are qualified to provide care coordination services, you will need to enroll with the Alaska Medicaid program, currently managed by HMS (a Gainwell Technologies Company), in order to receive a Medicaid provider identification number so that you can bill for the services you provide. You enroll through the Medicaid fiscal agent's website at www.medicaidalaska.com and use the Provider Enrollment Portal (PEP). Keep in mind, according to the Alaska Medicaid website, it can take 4-6 weeks to complete the enrollment process if there are no questions or concerns with your application. You will not be paid for any services provided before the date your enrollment is finalized. And you should not apply to be enrolled before becoming certified by Senior and Disabilities Services. Applying for enrollment prior to this point in time may delay the process.

NOTE: You will need a National Provider Identifier (NPI) in order to complete the enrollment application.

Apply at this website: nppes.cms.hhs.gov/#.

YOU AREN'T FINISHED – HARMONY IS NEXT

After your certification is complete and you've received your Medicaid provider number, you can then complete the Intro to Harmony training session, available from the SDS Training Team, and submit a Harmony coordinator access agreement and a security agreement to request Harmony access. Again, Harmony is a secure web-based data management system. SDS uses it to administer programs, services, and provider certification. Care coordinators use it to submit documents like support plans and other required forms and to monitor client case work. After you have completed the Harmony training session, the SDS Harmony system administrators will authorize your access to the system. It's important to note that the Google Chrome browser is recommended for accessing Harmony.

There are many details along this way - feel free to reach out. SDS has a full-time dedicated Care Coordination Support person who can be reached at carecoordinationsupport@alaska.gov.



I can absolutely be a resource for those in the process. We have potential CCs come to office hours - they are welcome to do that. I have recently started attending the first part of the Basic Care Coordination training, and my information is provided during that training. But I can be a resource at any point in the process.

- Kat Sowa-Lapinskas, current SDS CC Liaison





START HERE

✓
**Basics Concepts
Care Coordination**
From: Alaska Training
Cooperative

✓
**Critical Incident
Reporting**
From: SDS
Training

**COMPLETE
REQUIRED TRAINING**

✓
**Home and
Community-
Based Settings**
From: SDS
Training

✓
**Mandatory
Reporting**
From: SDS
Training

✓
**What are Long-
Term Services
& Supports**
From: SDS
Training

✓
**How do I
Become a Care
Coordinator**
From: SDS
Training

✓
**Self-Paced
Curriculum**
From: SDS
Training

Becoming an

**INDEPENDENT CARE
COORDINATOR**



**READY
TO GO!**

1
**Establish
accounts
with state**

✓
Create an account
with the Background
Check Unit. Static IP
address required

✓
**Establish
DSM
account**

✓
**Sign up for
E-Alerts at SDS
website**

2

**Identify a
back-up care
coordinator** –
must link to your
organizations via
the Background
Check Unit

3

**Complete the
certification
application packet
for becoming a
care coordination
agency.**

4

**Complete the
certification application
packet for becoming a
care coordinator.**

Be ready to
pay initial fee
~@ \$650

5

**Enroll as a
Medicaid
Provider**

NOTE:

Once your application for
certification is approved,
you can no longer work for
an organization that provides
Medicaid waiver services

6
**Complete
Harmony
Training**

7

**Find a Mentor
if you haven't
already!!**

**BUILD A
CASELOAD**

1

Marketing

✓
Logo,
email address,
phone number

✓
Business
Cards

2

Social Media:
Facebook / Website
/ LinkedIn

3

**Join
Associations**

4

**Get on website
listings**

5

Advertise



**I'M READY
TO GO –
NOW WHAT?**



HOW TO BUILD A CASELOAD

OK! So you are certified and enrolled, you have figured out your business plan and now it's time to build a caseload.



Realistically it's important to understand, you don't walk into 30 paying clients. What's your plan for building your caseload? You have to hustle for what you want – no one makes your paycheck but you. You always have to answer your phone! You have to show the hospital social workers and ADRCs that you are going to respond quickly. – C.S.

Care coordinators are not allowed to solicit as clients any recipients known to be receiving services from another care coordinator or provider agency. There's a fine line between solicitation and marketing. Yet it's important for the referral sources in your region to be aware you are now able to take on clients.

It's tricky. It's a non-solicitation industry. I've been meeting with my mentor a lot. I don't want to risk soliciting but I need to know how to market myself. If I don't, no one will know I'm available for referrals. I sent emails to the ADRCs, posted on Facebook. I have plans to distribute business cards at hospitals. And attend all the events I can to network. –J.A.



Here's examples of potential referral sources:

- Aging and Disability Resource Centers (ADRCs)
- Medical providers
- Hospital social workers
- Other care coordinators
- Independent Living Centers

Social media is also an important source of referrals. On Facebook, the Alaska Care Coordination Network is not only a valuable place to post questions and stay on top of current issues, but also a resource for referrals. LinkedIn can also be a way to establish an online presence.

STAY UP TO DATE

It's important to stay up to date with information. You are the liaison between the recipient/family and the State of Alaska. As things change in the system, you want to ensure the people on your caseload are informed and that they aren't missing opportunities that would be helpful or of interest. If you haven't already, sign up for SDS E-Alerts. SDS will send emails out alerting providers to changes to the system – for example, regulations, forms or processes – as well as events such as webinars or conferences. You can sign up for the e-alerts on the SDS website.

Also, consider joining a provider association. There are several statewide associations that can be good sources of networking as well as a way to stay on top of changes or learn from others about how to manage challenging issues or advocate for change. In addition, there are several active Facebook groups where care coordinators and service providers share information. See the Resource section for details.

There are many relevant organizations that host events or send out regular information-sharing emails include:

- Governor's Council on Disabilities and Special Education
- Alzheimer's Resource of Alaska
- Stone Soup Group
- Special Olympics Alaska
- Assistive Technology of Alaska
- Special Education Services Agency
- Alaska Training Cooperative

These groups and others have listserves you can register for. This is information you can pass along to individuals and parents you provide care coordination to. It also helps to inform your awareness regarding resources.

SDS will require you to submit documentation of 16 continuing education hours annually. These hours could be participating in conferences or trainings hosted by the Alaska-based organizations or attending a national conference. Ongoing education will help you stay connected with the latest information impacting the people you are providing services to.

GOOD CUSTOMER SERVICE IS KEY

As with any business, your reputation will make a difference. If you are quick to respond to requests and provide a quality service, this information will be shared – Alaska is a big state but a small community! Every interaction with a community member, family member, or person with a disability will impact the future success of your business.



A good care coordinator will treat my family and me with respect. Meet us where we are, not literally but conceptually. Accept us as we are. Will believe in our potential and look for ways to help us get the right support, whether with the waiver or something else.

– a parent/guardian

Being responsive does not just mean answering the phone when it rings. It also means being flexible. The people seeking your services are your customers. What does good customer service look like?

I've had CCs that could only meet with me at the office, only during certain hours. They didn't realize as a parent and a sibling, I have already had so many times that I have to be out of work for medical meetings, school meetings, behavioral situations – always calling out of work. All of my leave time was used for the purpose of other things. They didn't understand the stacked life you have – the stacked obligations.

– a parent/guardian



Flexibility can also mean being person-centered – what works for one person won't necessarily be right for the next person.

It boils down to one thing – the care coordinator really gets to know the individual and the family. And really gets to know the disability. And what the concerns are. I value that my care coordinator pushes me. She doesn't just say "What do you want" and then arrange it. If she thinks I can do it, she pushes me to do it. But she doesn't do that with families who are overwhelmed. She's very person-centered.



– a person who receives services

My care coordinator talks with me like a person. She's not my friend friend, like hanging out together. But she is like a friend. Someone I can pretty much say anything to. There will be situations where providers tell me they did something but they didn't. When things are getting tough that way, she will say we will have the provider do that by putting it in the support plan. And if they are not willing to do it, we will find one who will do it. It reassures me that she is diligent in finding providers who will serve my family members as stated in the plan.



– a parent/guardian

And while this is a business you are building, it's a business that has a critical impact on people's lives. As a professional care coordinator, you will need to be ready to be in the moment with that person. They need to believe in you.

Hopefully this guide has provided a glimpse into the challenging and wonderful opportunity of becoming a Medicaid waiver care coordinator.

RESOURCES

CONTACTS

Care Coordination Support

Tel/Cell: (907) 764-8287

Email: carecoordinationsupport@alaska.gov

SDS Training Team: sdstraining@alaska.gov

TRAINING RESOURCES

SDS Training Academy:

sdstraining.ethinksites.com

SDS Training YouTube channel:

youtube.com/channel/UCDxVenrsB2T4yoK8HNEFGYg

Alaska Training Cooperative:

continuingstudies.alaska.edu/Registration.aspx?AffiliateID=R78W51

PROVIDER ASSOCIATIONS

Alaska Association on Developmental Disabilities

Website: www.aaddalaska.org

Email: director@aaddalaska.org

Alaska Association of Personal Care Services

Website: None

Email: dmonkelien@accessalaska.org

AgeNet

Website: agenetak.net

Email: info@AGEnetAk.net

STATE OF ALASKA INFORMATION

Senior and Disabilities Services :

health.alaska.gov/dsds/Pages/default.aspx

Payment Rates and Cost Survey:

health.alaska.gov/dsds/Pages/info/costsurvey.aspx

Approved SDS Forms:

health.alaska.gov/dsds/Pages/info/approvedforms.aspx

Conditions of Participation:

health.alaska.gov/dsds/Pages/regulationpackage.aspx

Regulations:

health.alaska.gov/dsds/Pages/regulations/default.aspx

RESOURCES

Provider Certification and Compliance Unit:

health.alaska.gov/dsds/Pages/ProviderQA/provider_unit.aspx

SDS offers weekly office hours and monthly info-sharing sessions; prospective care coordinators are welcome to join. Reach out to SDS Care Coordination Support for current schedule and links.

OTHER

Alaska Medicaid Health Enterprise:

To enroll in Medicaid as a new provider: www.medicaidalaska.com

RESOURCES FROM THE ALASKA SMALL BUSINESS DEVELOPMENT CENTER

Becoming a client of the Alaska SBDC is a straightforward process. Visit the website for more information, register as a client to access the tools and resources, and/or request to meet with an advisor: aksbdc.org. There, you will find links to Basic Business FAQs, Workshops, and Tools and Resources.

OTHER HELPFUL RESOURCES

Rock Solid Networks of Alaska

John P. Mitchell

Email: john@rsnak.com

Website: www.rsnak.com

Phone: (844)423-0579

For assistance with establishing a static IP address as required by the Background Check Unit.

Top Tier Healthcare Consulting

Tara Fowler-Fisher

Phone: (907)887-3549

Email: toptierhealthcareconsultingllc@gmail.com

For assistance with billing, navigating Health Enterprise and compliance with billing audits.

FACEBOOK RESOURCES

(this is not an exhaustive list but a few active groups)

Alaska Care Coordination Network:

www.facebook.com/groups/383087491737742

Interior Care Coordination Network:

www.facebook.com/groups/232767920390041

Assisted Living & Group Homes of Alaska:

www.facebook.com/groups/264851772151388

Caregivers in MatSu Day Hab Activities:

www.facebook.com/groups/674078606784423

It sounds basic but I love being able to help people in any way possible, that's why I do what I do. I have never felt like my job is a burden. I love what I do and actually feel like I make a difference in people's lives. -M.H.



A Guide

**TO BECOMING A MEDICAID
WAIVER CARE COORDINATOR**



PRODUCED BY THE ALASKA ASSOCIATION ON
DEVELOPMENTAL DISABILITIES WITH SUPPORT FROM
THE ALASKA MENTAL HEALTH TRUST