

July 05, 2013

To assist Consumers with the problem of finding new Personal Care Assistants, [Consumer Directed Services](http://www.ConsumerDirectedServices.com) created a FREE Employment Information Bridge between Consumers and PCA Candidates.

- [Consumers / Advocates](#)

- To receive a copy of the weekly Newsletter, a Consumer or Advocate need only send me an email to [elitcher@consumerdirectedservices.com](mailto:elitcher@consumerdirectedservices.com) and include your name and the text **Newsletter Request**.
- To search for a New Personal Assistant go to the [Consumer Directed Services](http://www.ConsumerDirectedServices.com) website and complete the form at the following link [Consumer / Advocate - Search for a PCA Candidate](#). When your information is received it will be distributed to all of the PCA Candidates enrolled in the database and a variety of other Employment Resources.

- [Personal Care Assistant \(PCA\) Candidates](#)

To include your information in the Newsletter and Database, go to the [Consumer Directed Services](http://www.ConsumerDirectedServices.com) website and complete the form at the following link: [Look for a PCA Job \(FREE\) - New York City Metro](#). As of the above date, 603 Personal Assistant Candidates have already been enrolled.

To insure that this Newsletter will be available to as many Consumers / Advocates as possible, previously distributed Newsletters (**from January 12, 2011 to present**) have been archived on the [Consumer Directed Services](http://www.ConsumerDirectedServices.com) home page. Finally, if you have any questions, comments, or recommendations about this service, or should you wish to remove your address from this list, please contact send an email to [elitcher@consumerdirectedservices.com](mailto:elitcher@consumerdirectedservices.com).

Best Regards, Ed Litcher

### Notes

**Consumers Wanted:** For an Employment Information Bridge to work it requires traffic to flow in both directions. If you are in a Consumer Directed Personal Assistance Program, you will eventually need to find a new Home Care Worker. And up to now you may have relied upon Friends, Family, an Agency or you may have chosen to put your own advertisement on the Internet (See the list of Internet resources on the PCA Employment Agency page of this newsletter). Therefore, to help you find the PCA Candidate of your choice, I urge you, to do everything you ordinarily do, to consider an Internet resource and to try [www.ConsumerDirectedServices.com](http://www.ConsumerDirectedServices.com). Finally, if you try Consumer Directed Services, please spread the word. Tell your friends and associates about this **FREE** service.

**Consumers Searching**  
**Should you require additional information**  
**Please Contact the Consumer Directly.**

**Kathleen Boziwick on Thursday, June 27, 2013 at 14:50:06**

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Consumer: Kathleen Boziwick

Address1: 146 West 95th St.

Address2: 1B

Address3: New York, NY 10025

**Phone: 212-222-0500**

Best Time: 9AM to 5PM

Email Authorization: No

Consumer Age: Older than 70

Consumer Gender: Female

Payroll Method: Self Pay

Type of Candidates: Domestic / Homemaking

Candidate Experience: Seniors,, Mental Impairments / Alzheimer's Disease,, Languages

**\*\*\*\*\*Description of Languages: Italian\*\*\*\*\***

Preferred Candidate Gender: Female

Required Documentation: Social Security Number,, Proof of Identity,

Hours: 8 Days: 3

Start Time: 9AM

Pay Per Hour: 13

Comments: Candidate must speak Italian. Two people needing care are located in Bayside and Flushing, respectively. I think they will each do 20 hours/week and one Consumer will use an AM shift and the other a PM shift. So it might be a full time job equivalent.

**([tnr73@outlook.com](mailto:tnr73@outlook.com)) on Saturday, June 22, 2013 at 11:35:06**

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Consumer: T. Reese

Email Authorization: Yes

Consumer Age: Between 31 and 50

Consumer Gender: Female

Payroll Method: Agency

Type of Candidates: Personal Care / Home Health

Candidate Experience: Paraplegia,, Quadriplegia,, Wheelchairs,

Preferred Candidate Gender: Female

Required Documentation: Social Security Number,, Proof of Identity,, Recommendations

Hours: >10 Days: 3

Start Time: 8 am

Description of Schedule: Mon-Tue-Wed 8 am - 6pm, some days up till 8pm

Pay Per Hour: 10.30

Comments: I am a 39 year old female, living in Brooklyn. I am a wheelchair user. I am in search of a highly professional PCA with a personable touch. I need complete care with bathing, dressing and light housekeeping. I need someone with great attention to detail and an understanding a job needs to be done. I enjoy outdoor activities in the warm seasons, so being able to enjoy the weather is a plus. The schedule is Mon-Tue-Wed, 8am-6pm. Some days until 8 pm. Only serious candidates will be considered. You will have to register with Concepts of Independence, if not already.

**Suzanne Page on Friday, June 21, 2013 at 11:43:01**

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Consumer: Suzanne Page

Address1: 620 east 13 street apt.10E

Address2: new york

Address3: new york, 10009

**Phone: 212-877-7888**

Best Time: 7:30pm-10

Email Authorization: No

Consumer Age: Between 31 and 50

Consumer Gender: Female

Payroll Method: Agency

Type of Candidates: Personal Care / Home Health

Candidate Experience: Wheelchairs,, Other Equipment,, Special Diets,, Languages

Description of Special Diets: vegetarian

Description of Languages: English

Preferred Candidate Gender: Female

Required Documentation: Social Security Number,, Proof of Identity,, Recommendations

Hours: 12 Days: 2-3

Start Time: 7:00am

Description of Schedule: day or night depending on vacation schedules etc.

Pay Per Hour: \$10

Comments: Initially the position is for an alternate, to fill in for vacations, holidays, sickness, emergencies.

**[jopersonalassistantsearch@gmail.com](mailto:jopersonalassistantsearch@gmail.com) on Friday, June 14, 2013 at 13:27:38**

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**Consumer: Jo Brand**

Address1: Franklin St.

Address3: New York, NY 10013

Consumer Age: Between 21 and 30

Consumer Gender: Female

Payroll Method: Agency

Type of Candidates: Domestic / Homemaking

Candidate Experience: Special Diets,, Languages

Description of Special Diets: No gluten, dairy, corn, soy, nuts, seeds

Description of Languages: English

Required Documentation: Social Security Number,, Proof of Identity,, Recommendations

Description of Schedule: Hours to be determined

Pay Per Hour: 10

Comments: Looking for a personal assistant for 29 year old patient with chronic pain/fibromyalgia. Needs assistance preparing meals and snacks, light cleaning, reminder to take medications, shopping for groceries, laundry, small errands in the neighborhood (post office, etc.), personal business (filling out forms, writing emails, calling doctor's offices, bookkeeping, etc.), and assistance going out (getting to doctors appointments, etc.). Schedule and hours to be determined. Pay is \$10/hr plus health insurance and pension. Payment is through an agency. References will be required.

**([acmcarthur@gmail.com](mailto:acmcarthur@gmail.com)) on Friday, June 7, 2013 at 16:25:39**

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**Consumer: Alexandra McArthur**

Address1: 532 East 5th St

Address2: Between Ave A and B

Phone: 9192156002

Best Time: After 5pm

Email Authorization: Yes

Consumer Age: Between 21 and 30

Consumer Gender: Female

Payroll Method: Self Pay

Type of Candidates: Personal Care / Home Health

Candidate Experience: Young Adults,, Wheelchairs,, Lifters,

Required Documentation: Proof of Identity,

Hours: 1

Days: 3

Start Time: 9:00pm

Description of Schedule: Ahower assistance, getting changed and into bed

Pay Per Hour: 10.00

**([jee193@gmail.com](mailto:jee193@gmail.com)) on Wednesday, June 5, 2013 at 10:38:35**

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**Consumer: Jan Ellis**

Address1: 527 West 47th Street

Address2: Apt 5E  
Phone: (212) 489-9320  
Email Authorization: Yes  
Consumer Age: Between 31 and 50  
Consumer Gender: Female  
Type of Candidates: Personal Care / Home Health  
Candidate Experience: Paraplegia,, Wheelchairs,, Special Diets,, Languages  
Description of Special Diets: vegetarian  
Description of Languages: English  
Preferred Candidate Gender: Female  
Required Documentation: Social Security Number,, Proof of Identity,, Recommendations  
Hours: 12 Days: 2  
Start Time: 8  
Pay Per Hour: \$11.10  
**PCA Candidates**

*Consumer Directed Services is not an Agency and makes no representation (positive or negative) regarding the appropriateness of any PCA Candidate, or the terms and conditions of any employment relationship. All employment and payment decisions are the exclusive responsibility of the Consumer.*

**(elijahsmommy0411@yahoo.com) on Sunday, June 30, 2013 at 09:09:49**

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Personal Assistant Candidate: Inez Rivera  
Address1: 923 Taylor Ave  
Address2: East Patchogue  
Address3: NY 11772  
Phone: 6312863215  
Gender: Female  
Type of Position: Personal Care / Home Health  
Worked with a CDPAP Consumer/Surrogate: Yes  
Consumer/Surrogate References Available: Yes  
Years Employed with a Consumer/Surrogate: 3  
Enrolled with a CDPAP: No  
Experience: Children,, Teens,, Young Adults,, Seniors,, Wheelchairs,, Mental Impairments / Alzheimer's Disease,  
Documentation Available: Social Security Number,, Proof of Identity,, Recommendations  
Certificate/License: Driver's License,  
Hours per Week: 6+  
Days per Week: 5+  
Preferred Start Time: any

Days I Would Like to Work: any

I am willing to work a 24 Hour Sleep-In schedule: yes

Target Salary Per Hour: 12.00

Target Salary Per Day: open

Target Salary Per Week: open

Comments: Hi,

My name is Inez. I'm interested in this position if it has not been filled yet. I'm 24yrs old. I am not certified but i do have some experience working with the disabled and elderly. I was registered with a Home Health Care Agency CD-PAP. I had a case working as an aide for a disabled woman. I bathed her, cooked for her, cleaned and did laundry. I also fed her and just been a real good friend to her. I worked for her for 3 years. I also worked live in taking care of my great grandmother for 3 months who had hip surgery. I also worked for Maryhaven with the disabled. I really enjoy working with the disabled, elderly and sick because i know they need someone as caring and loving as I am. They need love too and I will do my best to show it. I have my drivers license and my own car. I also have my GED. I am CPR & First Aid Certified. I live in East Patchogue. I am trustworthy and reliable. Always on time. Thank you for taking your time out to read my email please feel free to email me back at [Elijahsmommy0411@yahoo.com](mailto:Elijahsmommy0411@yahoo.com) or give me a call at 631-286-3215

### **Articles Related to the CDPAP**

#### **HRA Concept Paper**

The New York City Human Resources Administration (HRA) Home Care Services Program (HCSP) intends to issue a Request for Proposal to procure an adequate number of New York State Department of Health (NYSDOH) licensed home care agencies to directly provide personal care services, i.e., home attendant (HA), housekeeping (HK), emergency and exceptional home attendant (DTS) and consumer directed personal assistance program (CDPAP) services, for approximately 4,000 to 5,000 HRA HCSP clients who are currently exempt from enrollment in mandatory managed care and managed long term care programs.

#### **HRA Concept Paper**

#### **Response to the HRA Concept Paper**

Mr. Pullo,

The following is my response to your Concept Paper as it specially relates to the Consumer Directed Personal Assistance Program (CDPAP).

Although I can understand the desire to unify the service delivery program by using a cadre of providers that have a uniform capacity to provide a variety of service levels. I strongly disagree with the notion of incorporating the CDPAP into the planned mix of services.

Unlike all of the other services mentioned in your Concept paper the CDPAP is not a level of service, the CDPAP is a level of responsibility. In the CDPAP the scope or complexity of services is not the defining element, rather the program is defined by the Consumer's or Surrogate's willingness to self manage the services being provided. It is defined by a clear line of separation between the Consumer and the Provider. And finally, it is defined by the Personal Assistant's recognition that their true employer is the Consumer and that the Agency is only a supporting character.

Unlike many of the current CDPAP providers, my CDPAP perspective comes from the development of the original New York City program, a program that was truly Directed by Consumers, a program that was a non-medicalized service delivery system that empowered Consumers by enabling them to accept the risks and benefits associated with their choice to act independently.

To provide a brief summary of my relationship to the first CDPAP in the City and State of New York, I began as one of its founding incorporators in 1977, a Member of the Board of Directors 1977 to 1980 and the Program Director from 1980 to 2001. In addition to the aforementioned, in 2001 I created an internet based CDPAP Advocacy Program, [www.ConsumerDirectedServices.com](http://www.ConsumerDirectedServices.com), which I continue to manage to the present date. For more information about the development of the CDPAP in New York City, please review [A History of the Consumer Directed Personal Assistance Program \(CDPAP\) in New York City 1977 to 2001](#) an article that I prepared to remind people of the role Consumers played during the development of the original program.

In addition to my disagreeing with your planned incorporation of CDPAP Consumers into a conventional service delivery system, I believe that it is a mistake to utilize licensed agencies to deliver CDPAP services. As I am sure you are fully aware, there is neither a CDPAP specific license nor any legislative requirement to provide CDPAP services through conventionally licensed agencies. To illustrate my concerns regarding this point I wish to refer you to an article entitled [Why I Laugh When People Think Consumer Directed Personal Assistance Program Fiscal Intermediaries Should Become Licensed Home Care Services Agencies](#) written by a late friend Ms. Constance Laymon, someone who I helped to introduce to the CDPAP when the program was being expanding into the upstate areas, a friend who developed a program Directed by Consumers to serve the Capital District, a friend who was a founding member of the Consumer Directed Personal Assistance Association of New York State (CDPAANYS) and the last Consumer - President of that organization, and finally a friend who as a disabled woman lived with the benefits and trials of the CDPAP.

In addition to the information provided by Ms. Laymon in her article, I would like to point out that the utilization of licensed providers would require the program to maintain unnecessary staff resources that would defeat one of the prime cost saving features of the CDPAP, which is its ability to be operated by a small, less expensive, non-nursing staff.

Also, I would like to point out that unlike conventional home care programs which depend upon a high level of service supervision to maintain a reasonable level of liability protection, require specific levels of training, utilize in-house professional staff to complete client assessments and directly manage the employee enrollment process; a successful CDPAP must avoid all of these practices if they wish to preserve the liability protection system that is unique to the CDPAP.

As I have previously mentioned, one of the distinctive elements that mark a successful CDPAP is a clear line of separation between the Consumer and the Provider, a line which keeps the Consumer exclusively responsible for the decisions they make. A line that is crossed whenever a provider utilizes any of the above traditional systems of control, a line that once crossed places the agency in an indefensible liability position.

In conclusion, I believe that HRA should look beyond the current menu of service providers and it should return to its roots by permitting CDPAP Consumers to be served by an agency that is Directed by Consumers, an agency that is exempt from licensure. Please remember, HRA used this very formula for more than 20 years to create an agency that provided both the greatest cost saving to the Medicaid program and the greatest level of satisfaction and empowerment to the Consumer.

Thank you for consideration of the above,

Sincerely,

Edward Litcher

Consumer Directed Services

[Response to HRA Concept Paper](#)

## **CDPAANYS and Civil Rights**

At its heart, Consumer Directed Personal Assistance (CDPA) is about an individual's civil rights. Olmstead reaffirmed that the warehousing of people with disabilities in nursing homes, adult homes and other institutions when a community-based setting is appropriate. The Americans with Disabilities Act (ADA) is premised on the idea that people with disabilities should not face discrimination because of their disability. The Help America Vote Act included new funding to end voting discrimination against people with disabilities by requiring accessibility to polling locations and voting equipment – among other things.



But CDPAANYS recognizes that we cannot look at civil rights in a vacuum. While our mission is limited, as are our resources, we must support civil rights for everyone, in principle if not in action. That is why the Supreme Court's action over the past two days is extremely important.

First, CDPAANYS would like to applaud the Court, and we celebrate with the millions in the LGBT community who no longer face discrimination at the hands of our federal government. By ending the Defense of Marriage Act and recognizing state laws allowing same sex individuals to marry, the Court affirmed the basic civil rights of this population and extended the thousands of federal benefits, including social security, Medicare, immigration status and more. We also congratulate the people of California, who have seen the elimination of a Constitutional amendment imposing limits on their civil rights.

An equally important decision, and one that relates directly to our community, is the elimination of Section 5 of the Voting Rights Act. While this provision was meant for minority voters, it is important to note that it will impact our community as well. The immediate impact in New York will be that a law allowing New York City to use the lever voting machines in this year's New York City Mayoral race will not need federal review. This law would have faced scrutiny before yesterday, and we may have invalidated it. The Voting Rights Act has been a critical source of protection for people over the years and what has been described as the "gutting" of it is a significant blow to civil rights in this country.

The underlying goal of civil rights that is at the heart of CDPA and much of what we as a community fight. Therefore, it is important for us to voice our support and opposition to these rulings. We cannot support civil rights for some. We must celebrate civil rights victories when they occur. We must condemn the taking of civil rights when that occurs. We have an obligation to do so even if they do not impact our community directly.

<http://cdpaanys.org/?p=765>

### **Types of Fiscal Intermediaries to Support Facilitate Consumer ...**

Types of Fiscal Intermediaries FI to Support Facilitate **Consumer Directed Services.**

[health.hawaii.gov/ddd/files/2013/06/Fiscal-Intermediaries.pdf](http://health.hawaii.gov/ddd/files/2013/06/Fiscal-Intermediaries.pdf)

### **Lessons from the Implementation of Cash and Counseling in Arkansas, Florida, and New Jersey Final Report June 2003 EXECUTIVE SUMMARY**

About 1.2 million people receive disability-related supportive services at home through state Medicaid plans or home- and community-based waiver programs. Under state plans, services traditionally have been restricted to human assistance with personal care and homemaking

provided by licensed agencies. Waiver programs have offered additional services, but coverage often has been limited, with a case manager deciding whether services were needed.

In contrast to these traditional service models, states are increasingly offering Medicaid beneficiaries and their families the opportunity to obtain supportive services from individual providers. This alternative is called “consumer-directed” care.

Cash and Counseling is an expanded model of consumer-directed supportive services. It provides a flexible monthly allowance (based on the consumer’s care plan or on claims history) that consumers can use to hire their choice of workers, including family members, and to purchase other goods and services. Cash and Counseling requires that consumers develop spending plans showing how they would use the allowance to meet their needs for supportive services. It also provides counseling and fiscal assistance to help consumers manage their allowance and their responsibilities as employers. Consumers who are unable or unwilling to manage their allowance and responsibilities themselves can designate a representative, such as a family member, to help them or do it for them. These features make Cash and Counseling adaptable to consumers of all ages and with all types of impairments.

The Cash and Counseling Demonstration was implemented in three states —Arkansas, Florida, and New Jersey. Based on their experiences, this paper draws lessons on designing and implementing a Cash and Counseling program, to provide information useful to states thinking of adopting such a program.

**Outreach and Enrollment.** Cash and Counseling programs need the cooperation of agencies that provide traditional supportive services (for example, in obtaining information on care plans). However, outreach and enrollment through agencies that provide traditional home care services creates problems, since such agencies often are not supportive of a cash program.

Direct outreach, which targets eligible beneficiaries, works better than community education in generating enrollment. Family members of beneficiaries are often involved in the decision to participate, so outreach to them can also be useful. Easy-to-understand materials that address the language diversity of the Medicaid population are critical.

Home visits are a necessary part of the enrollment process, but advance preparation can reduce the need for repeat visits. Because family members and friends may serve as workers or representatives involved in the care of the beneficiary, they should be present at the home visit.

Allowing all interested, eligible beneficiaries to enroll is workable but might be costly. Considerable staff time could be required to obtain care plan information and calculate what the value of the allowance would be were the beneficiary to enroll. Enrollment cost per cash

recipient will be high if all interested beneficiaries are allowed to enroll, but many of them drop out before receiving the allowance.

The Cash and Counseling model is attractive to substantial minorities of both elderly and nonelderly adults with physical disabilities, particularly the latter. It also appears attractive for children and adults with developmental disabilities.

**Representatives.** Many consumers need or want assistance with managing the allowance and name representatives, usually relatives already providing care, to help them. The role of the representative varies depending on the consumer's abilities, but consumers and representatives typically share decision making and management of services. Reportedly, nearly all representatives in the three Cash and Counseling programs served consumers' interests. Special forms of monitoring can limit conflict of interest when the same person serves as both a representative and a worker.

**Spending Plans and Counseling.** Consumer need for help in developing the spending plan does not indicate inappropriateness for a Cash and Counseling program.

Helping consumers develop spending plans can be time-consuming for counselors, and plans must be revised as consumer needs change. Advance preparation minimizes the number of counselor visits required for developing the initial spending plan; flexible plans reduce the need for revision; and software expedites paperwork, partly by minimizing errors in arithmetic.

Initially, counselors could be concerned that they will be held responsible for poor outcomes arising from consumer decisions (as case managers may be). States that initiate Cash and Counseling programs might want to emphasize that this is not the case.

**Use of Allowance and Workers.** Nearly all consumers use the allowance to hire workers, usually relatives or acquaintances. A Cash and Counseling program can improve access to care by tapping this labor supply.

**Consumers who lack a relative or friend to hire often have difficulty recruiting a worker. States may wish to emphasize training counselors to assist such consumers with recruiting or to develop referral mechanisms (such as registries or informal lists of potential workers).**

Consumers will terminate the employment of relatives and friends whose work is unsatisfactory. However, they may need support from counselors, especially when firing a worker who lives in the same household.

The flexibility of the Cash and Counseling allowance permits consumers to meet their needs better through the purchase of goods and services not available in the traditional system. Two examples are companion services for consumers with Alzheimer's disease and security systems for consumers with autism.

**Fiscal Services.** If fiscal services are provided at little direct expense to consumers, nearly all will rely on the fiscal agent for check writing and payroll functions (such as preparing and submitting tax returns). States may wish to encourage or mandate use of the fiscal agent as a means of preventing abuse of the allowance. However, organizations that provide fiscal services might need assistance with cash flow until they reach a "break-even" caseload.

Fiscal agents could have difficulty responding to the consumer's needs—including the need for clear, timely financial statements—especially early in the cash program, when caseloads are small. To help prevent such difficulties, states must, when selecting a fiscal agent, define the responsibilities of the agent and assess the ability of that agent to meet them.

**Because the monthly allowance is paid prospectively, consumers will sometimes receive payment for which they have become ineligible. Procedures can be established to minimize overpayments and facilitate recouping of overpayments. Through administrative error, consumers will occasionally overspend their allowance; they can be allowed to reimburse the program over time from future allowance payments.**

**Prevention of Exploitation and Abuse.** Consumer exploitation was very rare in Cash and Counseling. Most cases of potential exploitation were identified at the time of the initial counselor home visit and referred to adult protective services or to the traditional program before an allowance was paid. Periodic telephone calls and visits are adequate to ensure that recipients of the allowance are not exploited as their situations change.

Abuse of the allowance was nearly nonexistent in the three Cash and Counseling programs. Two reviews are critical to its prevention: (1) review of spending plans to ensure they contain only permissible goods and services, and (2) checking time sheets and check requests against plans. The requirement that consumers retain receipts is not needed to prevent abuse of funds managed by the fiscal agent. Though review of receipts could help prevent abuse of cash held by the consumer (including cash for incidental expenses), when the amounts involved are small (as is generally the case), such review may not be an effective use of counselor time.

**Structure and Procedures for Counseling and Fiscal Services.** Having multiple organizations that offer counseling and/or fiscal services could provide an alternative if one organization withdraws or performs unsatisfactorily. However, consumers do not necessarily value having a choice of counselors within a given area. If they are to do so, consumers must have information on which to base their choice.

Provision of counseling by agencies that provide traditional services is problematic, as such agencies may not be supportive of the program. However, case managers are more likely to support a cash program if they see that it benefits their clients, and may respond to demand from their clients that they provide counseling. States interested in implementing Cash and Counseling programs through traditional networks may need to devote considerable effort to securing the cooperation of these networks.

Full-time counselors appear to be more efficient than part-time ones, but the latter can function satisfactorily. When counselors are full-time, they master the complexities of an allowance program more quickly and are likely to develop their own techniques to assist consumers. However, a counselor can function satisfactorily only so long as his or her caseload is large enough to occupy a substantial portion of his or her time. Similarly, a counseling organization can function satisfactorily only so long as its caseload can keep one or two counselors busy part-time. However, such a situation is not ideal: counseling organizations in this situation struggle to supervise and support their counselors.

The time from enrollment to receipt of the allowance varies considerably; it can be reduced by developing mechanisms to help consumers identify workers (such as worker registries) and by efficient program structure and procedures.

One efficient structure combines counseling and fiscal services in one organization and makes counselors responsible for some fiscal tasks, thereby reducing the need for communication and coordination with respect to these tasks. An efficient approach to the review of spending plans entails (1) giving counselors full authority to approve plans that request only goods and services on a preapproved list, (2) requiring that counselors seek program office approval for items not on the list, and (3) conducting audits to ensure adherence to these procedures.

**Program Costs.** The costs of a Cash and Counseling program might be constrained in a number of ways. To limit the cost per recipient of the allowance, it might be necessary to “cash out” a care plan at a discount. (Discounting accounts for the fact that some of the services included in traditional care plans typically are not delivered, for example, because a client is hospitalized or an aide turns out to be a “no-show.”) To prevent increases in care plan hours for cash recipients, reassessments may be assigned to independent parties rather than counselors, who might act as consumer advocates.

To avoid excessive counseling costs when the completion of the spending plan is delayed (possibly in addition to the cost of traditional services), the payment to counselors to assist with the plan can be limited, for example, by stipulating a fixed payment for that assistance. Costs for ongoing counseling can also be limited, for example, by capping counselor hours.

While improvement in access to care might be an important program goal under Cash and Counseling, overall costs could increase if access to care is improved, even if cost per month per recipient is constrained. Overall public costs could also increase if the availability of an allowance increases demand relative to that for traditional services.

**Crosscutting Lessons.** States can benefit from technical assistance in implementing a Cash and Counseling program. Assistance with fiscal issues could be the most important.

Cash and Counseling programs can be implemented successfully to serve populations with various disabilities and in various age groups. Moreover, other evidence shows that the great majority of consumers in each of the three Cash and Counseling programs were very well satisfied. While impact results are currently available only for Arkansas, disability-related health outcomes for treatment group members there were at least as good as those for control group members, and treatment group members were less likely to report unmet need and more likely to report satisfaction with their supportive services (Foster et al. 2003).

The states that have experienced Cash and Counseling firsthand have already decided that they want to make the program available permanently to all eligible Medicaid beneficiaries.

[health.hawaii.gov/.../Cash-and-Counseling-Evaluation-Report...](http://health.hawaii.gov/.../Cash-and-Counseling-Evaluation-Report...)

**CDPAANYS is excited to announce that registration has gone live for our 11th Annual Conference, held October 9-10, 2013 at the Hilton Garden Inn in Troy, NY.**

Our Annual Conference is an exciting opportunity for fiscal intermediaries and managed care/managed long-term care plans from every county across New York State to meet and expand their knowledge in a wide variety of breakout sessions and workshops representing the many different facets and angles of Consumer Directed Personal Assistance, from insurance and billing to advocacy and social justice. Every conference participant who registers (and submits payment) prior to August 1, 2013 will receive Early Bird discounted registration fees.

**[CLICK HERE TO REGISTER ONLINE for CDPAANYS' 11th Annual Conference.](#)**

**For information on how you can save \$100 on an exhibitor table rounp discount room reservations at the Hilton Garden Inn, visit our website at [www.cdpaanys.org](http://www.cdpaanys.org).**

The 11th Annual CDPAANYS Conference will be October 9-10, 2013 at the Hilton Garden Inn in Troy, NY.



**Request:** If you have any experience with **Comprehensive Geriatric Medicine P.C. Doctors on Call** (Brooklyn, New York) and you would like to share your opinion please send me an email with your experience and impression of this service.

## **Local Independent Living Centers**

- Bronx Independent Living Services, Inc. (BILS)  
4419 Third Ave, #2C, Bronx, NY 10457  
TEL [718 515-2800 x 116](tel:7185152800) / TTY [718 515-2803](tel:7185152803) / FAX [718 515-2844](tel:7185152844)
- Brooklyn Center for Independence of the Disabled (BCID)  
27 Smith St, #200, Brooklyn, NY 11201  
TEL [718 998-3000](tel:7189983000) / TTY [718 998-7406](tel:7189987406) / FAX [718 998-3743](tel:7189983743)
- Center for Independence of the Disabled in NY (CID-NY) (Manhattan)  
841 Broadway, #301, New York, NY 10003  
TEL [212 674-2300](tel:2126742300) V / TTY [212-674-5619](tel:2126745619) / FAX [212-254-5953](tel:2122545953)
- CID-NY/Queens  
137-02A Northern Blvd, Flushing, NY 11354  
Phone: [646-442-1520](tel:6464421520) / Sorenson VP [866-948-1064](tel:8669481064) / TTY [718-886-0427](tel:7188860427) / Fax 718-886-0428
- Harlem Independent Living Center (HILC) (Manhattan)  
289 St. Nicholas Ave, #21 Lower Level, New York, NY 10027  
TEL 212-222-7122 / Sorenson VP 646-755-3092 / Relay 866-326-5876 / FAX 212-222-7199  
[info@hilc.org](mailto:info@hilc.org)
- Staten Island Center for Independent Living (SIILC)  
470 Castleton Ave, Staten Island, NY 10301  
TEL 718-720-9016 / TTY 718-720-9870 / FAX 718-720-9664
- Long Island Center for Independent Living (LICIL) (Nassau Co)  
3601 Hempstead Turnpike, #208, Levittown, NY 11756  
TEL 516-796-0144 / TEL (Español) 516-796-6176 / TTY 516-796-0135 / FAX 516-796-0529 [licil@aol.com](mailto:licil@aol.com)
- Self Initiated Living Options, Inc. (SILO) (Suffolk Co)  
2111 Lakeland Ave, Ronkonkoma, NY 11779  
TEL (31-880-7929 / TTY 631-654-8076 / FAX 631-946-6377  
[contact@siloinc.org](mailto:contact@siloinc.org)
- Westchester Independent Living Center (WILC) (Westchester/White Plains)  
200 Hamilton Ave, White Plains, NY 10601  
TEL 914-682-3926 / TTY 914-682-0926 / Sorenson Video Phone 866-933 5390 / FAX 914-682-8518
- Westchester Disabled on the Move, Inc. (WDOM) Westchester/Yonkers)  
984 No. Broadway, #L-10, Yonkers, NY 10701  
TEL 914-968-4717 V & TTY / FAX 914-968-6137

## PCA Employment Agencies

*If your Personal Care Assistant (PCA) Employment Service assists Self-Pay and CDPAP Consumers in the NYC Metro Area, you can have your agency information added to the following list by completing the [Employment Service Enrollment Form](#).*

**Blessed Healthcare Staffing Agency, Tissha Thomas**

1 Belvedere Ave, Suite A, Farmingdale, NY 11735

[tithomas@bhcsa.com](mailto:tithomas@bhcsa.com)

(631) 390-8646

**Bronxwork Inc, Kedon Wilson**

391 E 149th St, Bronx, NY 10455

[kwilson@bronxworks.org](mailto:kwilson@bronxworks.org)

(718) 993-8880 ext. 237

**Center For Family Life Employment, Maria Ferreira**

443 39th St, Brooklyn, New York 11232

[mferreira@cflsp.org](mailto:mferreira@cflsp.org)

718-633-4823

**El Barrio's Operation Fight, Gustavo Rosado**

413 E 120th St # 403 New York, NY 10035-3602

[ebobf413@aol.com](mailto:ebobf413@aol.com)

212-410-7900

**Fifth Avenue Committee, Aaron Shiffman**

621 DeGraw Street, Brooklyn, New York 11217

[ashiffman@fifthave.org](mailto:ashiffman@fifthave.org)

718-237-2017

**Goldenhearts Elderly Care Services, Geanette Browder**

244 5th Avenue, suite G256 New York, NY 10001

[contact@GoldenElderlyCare.org](mailto:contact@GoldenElderlyCare.org)

Phone: (866) 531-4620

**Griswold Home Care, Kathleen Boziwick**

CDPAP Staffing Resource for Self-Pay Consumers

146 West 95th Street, Suite 1B New York, NY 10025

[kathleen.boziwick@griswoldhomecare.com](mailto:kathleen.boziwick@griswoldhomecare.com)

Phone: 212-222-0500

**Kingsborough Comm. College, Marisa Joseph**

2001 Oriental Blvd, Brooklyn, NY 11235

[marisa.joseph@kbcc.cuny.edu](mailto:marisa.joseph@kbcc.cuny.edu)

718-368-5563

**Konedu Home Care, LLC, Carie Jones Smith**

140 Captain Thomas Blvd West Haven, CT 06516

[helpingfamilies@koneduhomecare.com](mailto:helpingfamilies@koneduhomecare.com)

Phone: [800 418-3299](tel:8004183299)

**Mercy Center, Mary Ellen Gianino**

377 East 145th Street, Bronx NY 10454-1006

[meg@mercycenterbronx.org](mailto:meg@mercycenterbronx.org)

(718) 993-2789

**Reliable Homecare Solutions LLC**

Contact: Reshmi Maharaj, Director

104-28 117 St, 2E, Richmond Hill New York 11419

917 378 5769

[caresolutions09100@gmail.com](mailto:caresolutions09100@gmail.com)

**New York City College of Technology**

NYC Technical College Placement Office

300 Jay St, Brooklyn, NY 11201

[employmentsvc@citytech.cuny.edu](mailto:employmentsvc@citytech.cuny.edu)

(718) 260-5050

**Northern Manhattan Improvement Corp**

Evan Hess

76 Wadsworth Ave, New York, NY 10033

[evanhess@nmic.org](mailto:evanhess@nmic.org)

212-822-8300

**Our Planet Management Institute, Lisa Ying**

116 John Street, #200, New York, NY 10038

[lisa@opmi.org](mailto:lisa@opmi.org), 212-269-4000

**YWCA of NYC, Anne Alfred**

50 Broadway, New York, NY 10004

[aalfred@ywcanyc.org](mailto:aalfred@ywcanyc.org)

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