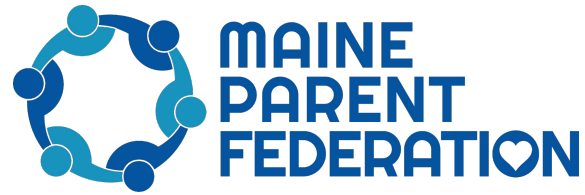




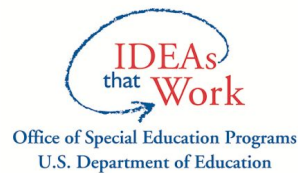
**MAINE  
PARENT  
FEDERATION**

# Shared Living

A Home and Community Living Option  
for Adults with Disabilities or Special  
Healthcare Needs



The Parent Information Center is not a legal services agency and cannot provide legal advice or legal representation. The information in this presentation is provided as a public service for general information only, and is not a substitute for legal advice about the facts of you or your child's particular situation. In addition, the law is always changing, through actions of the courts, legislature and public agencies; such advice should be obtained from an attorney.



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# Agenda

What are Shared Living Services?

What are the benefits of Shared Living?

Who are Shared Living Services For?

What is the Process and Who is Involved?

Becoming a Shared Living Home Provider

Testimonials, Wrap up and Resources

# Important Terms



## DHHS

**Department of Health and Human Services:** The Department of Health and Human Services is comprised of various offices and divisions that oversee and administer critical programs for the state of Maine.

\*Terms & definitions taken from [www.maine.gov/dhhs](http://www.maine.gov/dhhs)

# DHHS Critical Programs



Office of Child &  
Family Services  
(OCFS)

Licensing &  
Certification

Office of Aging &  
Disability Services  
(OADS)

Office for Family  
Independence  
(OFI)

Office of  
MaineCare  
Services (OMS)

Office of  
Behavioral Health  
(OBH)

Riverview  
Psychiatric Center

Dorthea Dix  
Psychiatric Center

Maine Center for  
Disease Control &  
Prevention (CDC)

# Important Terms

## Office of Aging and Disability Services (OADS)

The Office of Aging and Disability Services (OADS) supports Maine's older and disabled adults by providing Adult Protective, Brain Injury, Other Related Conditions, Intellectual and Developmental Disability, Long Term Care, and Aging and Community services to the people of Maine.

OADS coordinates the programs and benefits to assure they operate consistent with the state and federal policies and the Maine Department of Health and Human Services' goals.

*\*Terms & definitions taken from <https://www.maine.gov/dhhs/oads>*

# What are Shared Living Services?



“**Shared Living** is a model in which services are provided to a (MaineCare) member by a person who meets all of the requirements of a Direct Support Professional with whom that member shares a home...” \*

*\*Terms & definitions taken from DHHS Shared Living Manual*

# What is Shared Living?



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Shared Living is one option in a range of housing and support services for individuals with intellectual disabilities and/or autism.

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For many adults with intellectual disabilities or autism, traditional group home settings would not be appropriate. This could be due to personal choices and goals or related to the level of supports needed. Independent living may also not be an option for similar reasons.

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Shared Living allows individuals to live in a Family Style setting and become a member of the household, the family, and the community.

# A Family-Style setting

To ensure a family style setting, the Shared Living model is not intended to support multiple people with disabilities unless the people are family members (ex. brother and sister, husband and wife) or have a long-standing relationship/friendship that clearly indicates their desire to share in this living model. The model typically is one individual per home.

All exceptions to this protocol will need to be approved by the Office of Aging and Disability Supports (OADS)



It is the intent of the Shared Living model to support people in one of two “family” setting options.

The first option is a home owned, leased, or rented by the individual. Individuals are provided direct supports in this home.

The second option is for the individual to live with a family in a home owned, leased, or rented by that family.

# Benefits of a shared living model



The Shared Living Model is focused on community inclusion and building relationships. It helps foster independence and freedom, while also providing connection and belonging.

Provides consistent and stable support with a trusted family member or caregiver minimizing the impact of “shift staff” in residential models such as multiple staff, and employee turnover.

Provides a home and family environment that provides respect, support and care to the individual. Guidance is given to the individual to reach future goals as well as help with health needs.

Shared Living can be a more cost-effective solution than other residential options and caregivers are able to provide services to the individual they love or are matched with.

# Who are Shared Living Services designed for?



Any Individual with I/DD and/or autism whose preference is to live in a family-style home, and to build relationships in the home and community.



Who is eligible for MaineCare services under the Home and Community-Based Waiver, Sections 21 and 29, and has been referred to Adult Services.



Whose Person-Centered Planning (PCP) team has determined this to be an appropriate living option, this begins with transition planning

Shared Living is generally not designed for individuals with high level nursing care needs unless the Shared Living Home Provider has the education, experience and skills to meet those needs.

# Where and How do we start?

It starts with **transition planning**. A transition plan is required to be in the IEP by the time the student enters 9<sup>th</sup> grade.

In the transition plan, we look at the three domains that impact adulthood. These include Education, Employment and **Independent Living**.

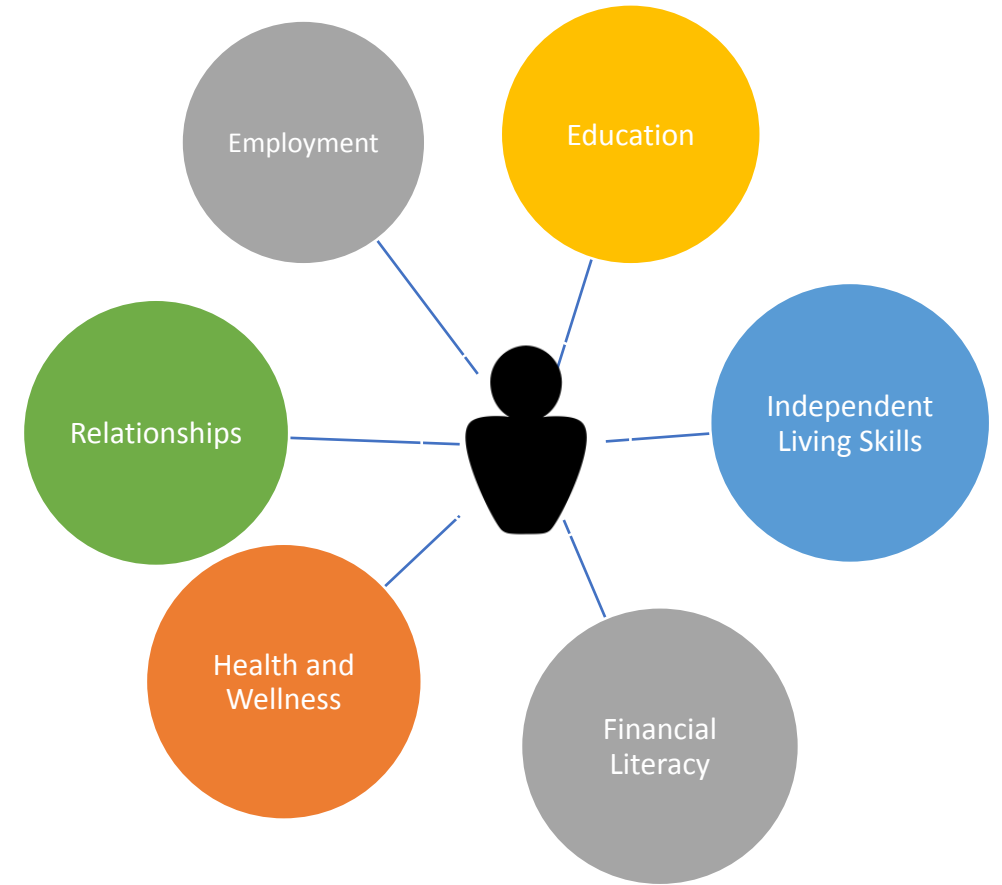
Goals are created to support the individual in each area. Shared living may be a goal in the **independent living** domain.

In creating these goals, we need to be sure to keep the young person at the center of the plan. This is known as **Person-Centered Planning**.

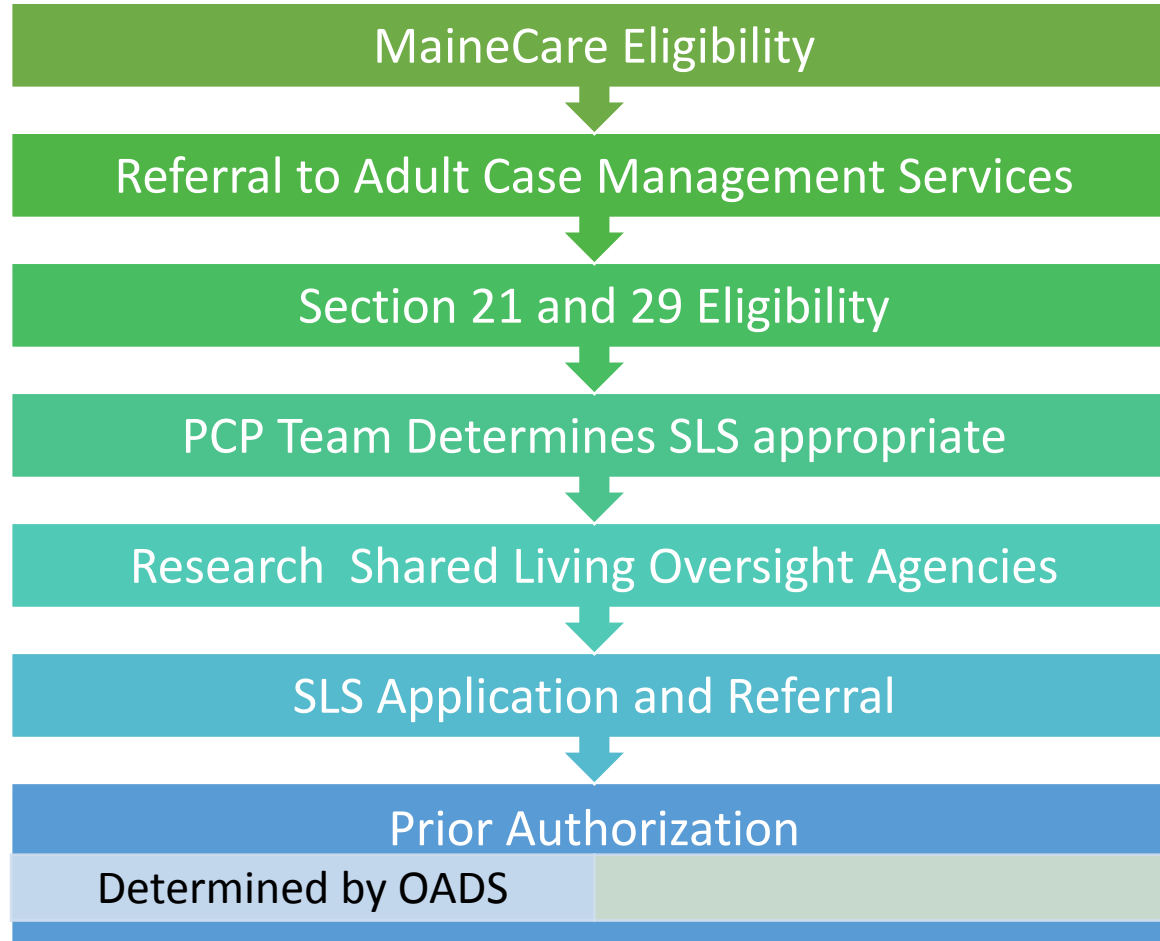
\*We need to ask the individual where they see themselves living.

# What is a Person Centered Plan?

- Person Centered Planning is an annual process for adults in Maine with Intellectual and Developmental Disabilities (IDD) and/or Autism.
- With the support of their team, each individual designs a PCP using their strengths, abilities, interests and dreams to realize a vision for their life, and the supports needed to achieve their goals. This includes goals for work and living arrangements.
- The PCP team works with the individual to determine the most appropriate living options, including shared living as one of these options.
- This is an essential part of the process in acquiring Shared Living services.



# The Process for Shared Living Services



## Approval

- Service must start within 30 Days

## Non-Approval

- Appeal Decision-  
*Work with your adult case manager to file an appeal*

\*It is extremely important to have an Adult Case Manager upon transition as they are experienced with this process.

# Prior Authorization is part of the process

Because funding is available for a service does not mean it is deemed medically necessary. The individual must also receive **Prior Authorization** for Shared Living, even if they're eligible for MaineCare and Sections 21 & 29.

An authorization for services is necessary for Maine Care to pay for the Shared Living service. This is a collaborative process with the Client, their Guardian if applicable, the Client's Case Manager, the Administrative Oversight Agency, and Shared Living Provider.



It is up to the Case Manager and Administrative Oversight Agency to show DHHS that this service is medically necessary for the client. This process is done via the Person Centered Plan (PCP)

**\*\*Not all requests are granted\*\***

# Section 21 and Section 29 is also required

## Section 21 and 29 are Home and Community Based Waivers

To be eligible, a person must:

- Be age 18 or older
- Have an intellectual disability or autism spectrum disorder diagnosis
- Meet medical and financial eligibility requirements (MaineCare)
- Have Case Management Services and be referred to Adult Services.

Section 21 pays for work and community supports as well as your choice of home support options. Section 21 has a higher cap on services.

Section 29 pays for a combination of work, community and home supports based on a fixed financial cap.

# The Shared Living Team



**The MOST important team member is the individual and they should always be at the center of any decisions made for their future.**

## Administrative Oversight Agency

- *Administrative Oversight Agencies provide essential contracted consultative services to the Shared Living Home Provider and supportive services to the individual served if needed and authorized. A portion of the daily rate billed for the Shared Living program is used to pay for services of the Agency.*

## Community Adult Case Manager

- *The individual's Case Manager, who either works for OADS or a community case management agency approved by OADS, is responsible for determining Shared Living eligibility and coordinating with the Administrative Oversight Agency to find a shared living home provider that is an appropriate match for the family.*

## Shared Living Home Provider

- *The Shared Living Home Provider is responsible for providing a supportive home environment, inclusion in the community and providing the appropriate level of support. The Shared Living Home Provider is responsible for the day-to-day activities which accomplish the desired outcomes as identified by the individual's Person-Centered Plan. The Shared Living Provider should be someone the individual trusts and who mutually wants to provide care and companionship.*

\*To avoid any conflict of interest, agencies can not provide case management services, and shared living services simultaneously.

## Administrative Oversight Agency

**Administrative Oversight Agency** is an agency approved by OADS that holds a **contract with a Shared Living Provider to provide supervision and monitoring services**. It is important to do your research and find the agency that best fits with your needs and desired outcomes. There are many agencies and they do differ in how they offer services.

- Perform recruitment and advertising for providers, home inspections and reference/background checks for contracted providers.
- The Agency supports the team in vetting new Shared Living Home Providers and assessing whether their home meets the criteria to be a Shared Living Home Provider.
- Participate with the Case Manager, Shared Living Home Provider, the individual and/or Guardian in the matching process which includes making visits to the home and answering questions to ensure the Shared Living Home Provider has the skill set and lifestyle to adequately support the individual.

# Community Adult Case Manager

The **Community Case Manager** is the team member primarily responsible for coordinating with Administrative Oversight Agencies to find a Shared Living Home Provider that is a match with the individual's support needs and specifications for a home.

- The Case Manager is responsible for assuring that Shared Living is identified as a needed service in an individual's Person-Centered Plan or service plan.
- The Case Manager assists in obtaining prior-authorization by showing OADS the service is medically necessary via the PCP.
- The Case Manager initiates a "vendor call," which is a request for service, (containing information about the individual) via email that goes out to all Shared Living Administrative Oversight Agencies.
- The Administrative Oversight Agencies respond to the Case Manager if they have potential matches and consult with the Case Manager on possible matches. This information is shared with the person and/or guardian seeking a Shared Living Home.

## Shared Living Home Provider

A **Shared Living Home Provider** is someone who provides daily support and care to an adult with ID or Autism in a home setting. A Provider is a caregiver, teacher, mentor and/or friend, helping the person to live a meaningful life at home and in the community.

- Responsible for coordination and transportation to medical appointments and administering medications
- Coordinate care with the case manager and other team members (Annual PCP)
- Daily assistance toward and documentation of goals
- Assist the individual to access community resources and activities.
- Assist with daily living activities, self care, nutrition, and safety.
- Build relationship of trust and respect that also allow for an individual's personal choice and growth

Shared Living Providers are self-employed and provide home support as an independent contractor of an Administrative Oversight Agency. This can include family members, and other individuals who meet the requirements.

Shared Living Providers are paid via a daily stipend at a rate set by the Administering Agency and funded by MaineCare. ~ Stipends is non-taxable under Section 131 of IRS tax code under "difficulty of care payment". This is not considered wages.

# Becoming a Shared Living Home Provider

**A Shared Living Provider is someone who provides daily support and care to an adult with ID or Autism in a home setting. A Provider is a caregiver, teacher, mentor and/or friend, helping the person to live a meaningful life at home and in the community. Some of the specific requirements by the oversight agencies are....**

## Background Checks

- Successfully pass background checks as required by the MaineCare Benefits Manual. All other adult household members (18 years or older) who live full or part-time in the home and/or who will provide support and/or transportation to the individual must also pass background checks.

## Home Safety Inspection

- Successfully pass a home safety inspection conducted by an Administrative Oversight Agency to assure the home meets all health and safety environmental standards according to the MaineCare Benefits Manual and DHHS-OADS. Shared Living Home Providers are responsible to ensure that their home meets local housing codes. The Provider will submit a copy of the initial home inspection findings to the Oversight Agency.

# Becoming a Shared Living Home Provider

## Time

- Time and commitment to provide daily services/supports which meet the needs of the individual and be willing to work towards the goals the team has identified in the Person-Centered Plan.

## Training

- Successfully complete the core College of Direct Support Direct Support Professional online training modules and an approved medication administration course. MaineCare rules also require Shared Living Home Providers to have and maintain certain training certifications in order to provide services to people with intellectual disabilities and autistic disorders (See section V.).

## Education

- Shared Living Home Providers must have a high school diploma or GED and a valid Maine driver's license.

# Required Training for Shared Living Home Providers

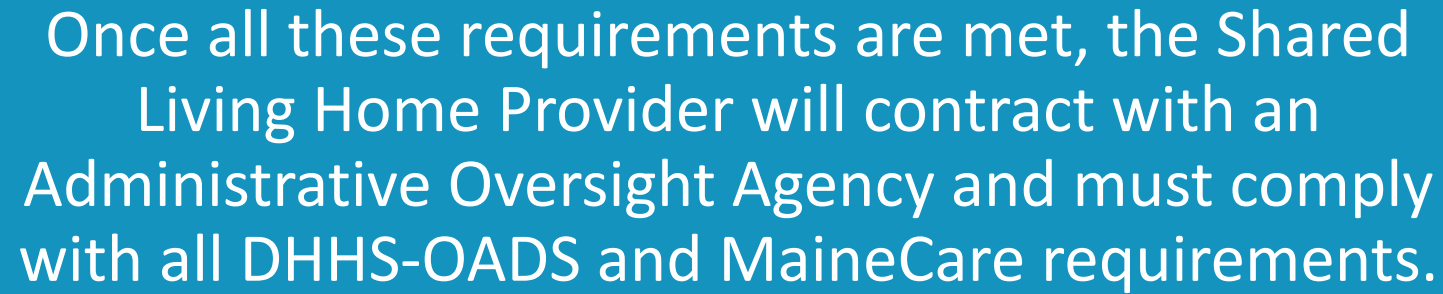
## Direct Support Professional (DSP) Training

- The DSP course is an online course obtained through the College of Direct Support. There are “live class” components obtained through Agencies that offer the training. This is 45 hours of intensive training.

Medication Administrative Training – CRMA or Shared Living Medication Training.

CPR, First Aid, and Bloodborne Pathogens

DHHS/OADS Training on Grievance Policy, Consumer Rights, Reportable Events and Behavior Regulations (available on-line).



Once all these requirements are met, the Shared Living Home Provider will contract with an Administrative Oversight Agency and must comply with all DHHS-OADS and MaineCare requirements.

For a list of Agencies, visit:

<http://www.maine.gov/dhhs/oads/provider/developmental-services/directory/index.html>

*\*Becoming a Shared Living Provider is an important role and should be carefully thought through. It carries a great deal of responsibility, but also allows for meaningful relationships.*

# Reviews and Check-Ins

A Coordinator with the Administrative Oversight Agency is assigned to the home for monthly check-ins to ensure quality care is being provided to the individual.

Quarterly reviews by OADS to oversee the process, make sure everything is in place (testing, certificates, insurances)

Throughout the year Office of Aging and Disability Service Quality Management team conducts **Quality assurance reviews**.

This is to assure the highest possible quality/cost-effective services for the individual served, their family and DHHS/OADS.

**Follow-up reviews** will be conducted to ensure follow through on recommendations made by Quality Management.

## Testimonials

“**Shared Living** has given our family security and peace of mind. We know that our son is loved, cared for, and respected. We are able to support, teach, and provide him with opportunities which will benefit him, and help him thrive.” ~ R.L.

“The **Shared Living** model has allowed us to feel more confidence in being financially able to provide the household our son requires to function best. It has afforded us the ability to (pre-pandemic) take him to programs and projects that he finds satisfying, without worrying about our household budget. Shared living funds have been extremely helpful in making sure that our son has his needs met.” ~ D.V.

“We had the choice to place our young adult in a waiver home or shared living , we were appalled how much the waiver home was like a hospital. We didn't want that for our son. He didn't need a hospital situation, it seemed so cold and uncaring . In **Shared living** home situations the care takers are invested in the child and treat them like family members, and they are a real home! It gives people with disabilities a chance to experience family life in a more natural environment.” ~ A.P.

# Wrap up

Provides opportunities to the individual with ID/Autism for personal choice and growth, while receiving the level of care they require.

May not be appropriate for everyone, should be determined appropriate by the PCP team during the transition process.

As a shared living provider it requires much responsibility and is a decision that should be carefully thought through and Administrative Oversight Agencies researched.

There are many steps to the process, therefore an Adult Case Manager is essential to assist with the paperwork and process. Apply at 17 ½ years of age for adult services.

# Resources

- Website:  
<https://www.maine.gov/dhhs/oads/providers/adults-with-intellectual-disability-and-autism/shared-living>
- DHHS Shared Living Manual:  
<https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/documents/Shared-Living-Manual%201.25.pdf>
- “*An Overview of Shared Living*” Bob Duranleau and Pamela Belisle Shared Living Coordinators from Group Main Stream (GMS)  
[http://www.maineparentcoalition.org/uploads/2/6/1/1/26115022/an\\_overview\\_of\\_shared\\_living.pdf](http://www.maineparentcoalition.org/uploads/2/6/1/1/26115022/an_overview_of_shared_living.pdf)



## Built in Partnership with KFI- Katahdin Friends Incorporated

207-723-9466

<https://www.kfimaine.org/>

Administrative Office  
1024 Central Street, Suite A  
Millinocket, ME 04462

<https://www.facebook.com/kfimaine/>



# Family Support Navigators

Our Family Support Navigators are trained parents who have personal experience navigating the systems of care in Maine and can provide support at no-cost to you!



# MAINE PARENT FEDERATION

[www.mpf.org](http://www.mpf.org)



parentconnect@mpf.org  
1-800-870-7746 (in-state only)  
207-588-1933 (nationwide)

484 Maine Ave. 2D  
Farmingdale, ME  
04344