

## **Financial Management Services**

### **o Services Overview:**

Financial Management Services are mandatory and integral to Participant-Direction designed to perform fiscal and related finance functions for the participant or representative who elects the participant-direction option for service delivery and supports. Financial Management Services are provided by a Fiscal Intermediary Agency (FIA) established as a legally recognized entity in the United States, qualified and registered to do business in the state of Georgia, and approved as a Medicaid provider by the Department of Community Health (DCH.).

Financial Management Services are covered as a distinct waiver service entitled Financial Support Services (FSS) as specified in the COMP Part III, Policies and Procedures Manual, Chapter 2200. FSS are mandatory for Participants who elect to direct their eligible waiver services, and to exercise the Participant-Budget Authority. Costs for FSS are included in and paid from the Participant's individual budget.

Financial Support Services (FSS) assist the participant or representative who elects Participant Direction by performing customer-friendly, fiscal support functions or accounting services. FSS also assures that funds to provide services through the participant-directed service delivery model and supports outlined in the ISP are managed and distributed as authorized.

The Department of Community Health is responsible for monitoring the performance of Financial Support Services (FSS) providers. DCH monitors, reviews and evaluates participants' expenditure activity to ensure the integrity of the financial transactions performed by FSS providers. DCH utilizes reports from Participants, their Representatives, Support Coordinators, Community Guides, and DBHDD agency staff to identify any issues with the adequacy of supports provided by FSS providers to participants exercising the employer and/or budget authority.

Financial Support Services are not available to participants or representatives who choose the Co-Employer model for self-directed service delivery and supports. The Co-Employer provider agency processes payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance for co-employees. This agency also processes and bills for services approved in the service plan.

### **B. Responsibilities of FSS Providers:**

1. Process payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance for participants or representatives who elect to be the employer of record of support workers.
2. Provides technical assistance to participants and/or their representatives on submission of all required employer-related documents.

3. Track and report on income, disbursements and balances of participant funds. Provides technical assistance to participants and their representative on process of reviewing the reports of expenditures and budget status.
4. Process and pay invoices for goods and services approved in the service plan
5. Provide the participant or representative with twice a month reports of expenditures and the status of the participant-directed budget for Participant/Representative who elects to exercise the Budget Authority.

**C. Employment/Vendor Enrollment and Financial Reporting Requirements:**

- 1) A participant or representative acting as a common law employer must complete the employer enrollment process;
- 2) All new employees must complete the employment enrollment process prior to receiving any paychecks. There are no exceptions to this policy;
- 3) All employee timesheets must be completed correctly and timely
- 4) Any vendors must complete the vendor enrollment process prior to receiving any payment;
- 5) All invoices for vendor payments must be completed correctly and timely;
- 6) All timesheets and invoices must be in accordance with the approved Individual Service Plan;
- 7) DBHDD, DCH and FSS provider are not responsible for delays in payment caused by late submissions, incomplete or illegible forms, or neglect of the participant or his or her representative or employee, or failure to inform the FSS provider of changes in address, etc.;
- 8) Timesheets and invoices may be returned to the participant or representative due to error. The participant or representative must complete or correct the identified error, and re-submit the timesheet and/or invoice to the FSS provider. The timesheet and/or invoice will be processed and paid in the next pay period following receipt of the corrected timesheet or invoice by the FSS provider;
- 9) Other reasons an employee may not get paid include: late time sheets, lack of, or incomplete, employer enrollment forms, lack of authorized Individual Service Plan or PA, or insufficient funds in budget for billed services;
- 10) The FSS provider will generate paychecks and invoices at least twice per month and, according to the established payment schedule;

11) The pay rate for employees is established during the development of the Individual Service Plan and may not exceed the authorized rate.

12) Information on unemployment benefits, workers' compensation coverage, and tax withholding is available from the FSS provider.

13) Participant/Representative and their employees should first attempt to resolve payroll problems by directing contacting the FSS provider. If problems persist, the participant or representative may contact the Support Coordinator for assistance;

14) Participants, representatives and their employees should be knowledgeable about Medicaid fraud. Medicaid fraud is committed when an employer or employee is not untruthful regarding services provided to Medicaid Waiver participants in order to obtain improper payment. The Medicaid Fraud and Abuse Unit of Georgia investigates and prosecutes people who commit fraud against the Medicaid Program.