



Wisconsin Family Care Member Resource Guide

For members and authorized representatives using the Family Care Program with Self-Directed Supports (SDS). Please don't hesitate to reach out to your Acumen Agent for assistance.

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Acumen Contact Information

Your Acumen Agent is always the best place to start.

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1) About Acumen and Your Role as the Employer

Thank you for choosing Acumen as your Financial Management Services (FMS) provider. That means we handle worker enrollment, payroll, and taxes for your direct care workers and support you with compliance. In Family Care, the member is always the employer. Which means, YOU and/or your guardian/POA/authorized representative oversee managing your direct care workers. In practice, that means you should:

1. Recruit, select, and supervise your worker(s).
2. Provide clear orientation and training so workers can perform authorized tasks safely and correctly.
3. Set schedules and house rules; maintain a safe work environment.
4. Approve time accurately and promptly; ensure work matches the authorized Family Care service details in your Care Plan. Do not approve overtime unless it is authorized in your Care Plan.
5. Follow applicable employment and labor rules (for example, wage/hour and youth employment requirements).
6. Inform Acumen and your Care Manager (CM), right away, when circumstances change (address/contact changes, employment status changes, new risks, etc.).

Acumen will: run caregiver background checks during enrollment and every four years; onboard and pay your workers; provide forms, instructions, and reminders; and help you and your CM resolve payroll or documentation issues.

2) Your Team (Who Does What)

- **Care Manager (CM):** leads assessment and member-centered planning, coordinates and authorizes services, and provides ongoing follow-up to ensure your Care Plan meets your needs.
- **Interdisciplinary Team (IDT):** works with you to assess your needs, develop your member-centered plan and budget, authorize services, and monitor quality and outcomes over time. Your IDT includes your Care Manager and other members, such as a nurse.
- **You (Member Employer) and Your Representative (if applicable):** hire, train, schedule, supervise, and approve time for direct-care workers. You are responsible for terminating workers and notifying your CM and Acumen of any status changes as soon as possible.
- **Acumen (FMS):** enrolls and screens workers, processes payroll/taxes and provides guidance and tools for compliance.



3) If You Self-Direct with Acumen: Step-by-Step

1. **Plan the role with your CM/IDT:** confirm which Family Care services (e.g., respite, personal care, daily living skills training) are authorized, the hours/units authorized, and what your outcomes are in your Care Plan
2. **Recruit and choose your worker or workers:** consider people you know or local networks; prioritize reliability and fit for your needs.
3. **Complete Acumen worker enrollment BEFORE any hours are worked:** I-9 with IDs, W-4, WT-4, provider agreement, payroll setup, and the DHS Background Information Disclosure (BID). Work cannot start until background clearance is received and the employee's Medicaid Provider ID has been obtained. If you would like to hire a new worker, contact your CM to get started.
4. **Orient and train your worker:** show routines, communication preferences, safety/behavior plans, infection control, equipment use, and documentation expectations. Review what tasks are authorized under your plan. Make sure the required training attestation has been completed and submitted to Acumen.
5. **Approve time accurately:** ensure entries match authorized service codes/units in the Care Plan; submit/approve time by the published deadlines.
6. **Keep a backup plan:** identify backup helpers or respite options with your CM to avoid gaps in care.
7. **Keep your EIN on file and secure.** Your Employer Identification Number is permanent and must be provided when needed; it will follow you across programs, counties, states, and even FMS transitions. Keep your EIN in a safe location for you to access whenever needed.

4) Background Checks (Safety)

1. Wisconsin's Caregiver Law requires caregiver background checks for workers with regular, direct contact with a member or their personal property.
2. No hours can be worked before clearance.
3. For more information see Section V at <https://www.dhs.wisconsin.gov/publications/p0/p00274.pdf>.
4. All direct care workers in the Family Care program must pass a background check before they begin working. To maintain eligibility, they must also pass a new background check every four years.
5. For each background check that is run, participant-hired workers can create a Background Information Disclosure (BID) form at: [E-Background Information Disclosure \(eBID\) - F-82064A: Wisconsin Department of Health Services](#). Completed BID forms should be sent to Acumen through your agent or to Wisconsin@acumen2.net.
6. Once the form is received, Acumen will run the background check and notify you of any changes.
7. Failure to submit the required BID form on time may result in a gap in services. Acumen cannot pay for services that were provided after the background check expiration date. (every four years)



5) EVV (Electronic Visit Verification)

EVV is a check-in/check-out system that confirms in-home visits really happened. In Family Care, workers who provide personal care and home health care must use EVV for each visit.

Acumen uses the DCI system for EVV; workers clock in/out on the DCI mobile app or by calling from the member's registered home phone.

- EVV records who received care, who provided it, what service, where, the date, and the start/end times.
- Workers check in by phone app or home landline.
- Live-in workers (people who actually live in the member's home) may not have to use EVV. However, some MCOs may still require it. To qualify for the exemption, Acumen must have a completed F-02717 form and proof of address on file.
- If required EVV isn't captured, payments can be delayed and other program actions may follow.

6) Safety, Incidents, and Protective Reporting

- **If someone is in immediate danger, call 911.** For suspected abuse/neglect or exploitation, report to Adult Protective Services (APS) or law enforcement. Anyone can report; certain professionals are mandated reporters.
- Notify your care manager promptly about health and safety events. They will assist you with making future plans to reduce risk and ensure you have the services you need.

7) Your Rights, Concerns, and Appeals

- You have member rights and can file a grievance or appeal. Ask your Care Manager for help with steps and timelines. Visit <https://www.dhs.wisconsin.gov/familycare/mcoappeal.htm> for more info.
- If eligibility or a service is denied/reduced, first review with your CM (including the functional screen). If unresolved, you can request a hearing with the Division of Hearings and Appeals within the deadline on your notice.
- You can also reach out to an Ombudsman, which means “helper” or “advocate”. Ombudsman information can be found at the links below.
 - **Age 18-59:** <https://disabilityrightswi.org/program/family-care-and-iris-ombudsman-program/>
 - **Age 60+:** <https://www.dhs.wisconsin.gov/aging/ltcombud.htm>



Family Care Program Acronyms

- **ADRC:** Aging & Disability Resource Center
- **CM:** Care Manager
- **DHS:** Wisconsin Department of Health Services
- **EVV:** Electronic Visit Verification
- **FC:** Family Care
- **FMS:** Financial Management Services
- **GSR:** Geographic Service Region
- **HCBS:** Home and Community-Based Services
- **HHCS:** Home Health Care Services
- **IDT:** Interdisciplinary Team
- **LTSS:** Long-Term Services and Supports
- **MCO:** Managed Care Organization
- **MCP:** Member-Centered Plan
- **PCS:** Personal Care Services (EVV Required)
- **RAD:** Resource Allocation Decision
- **SDS:** Self-Directed Supports
- **SHC:** Supportive Home Care (EVV Required)

Family Care Terminology

- **Member:** The person that receives care.
- **Employer:** The member is always considered the employer in Family Care.
- **SDS Employee, Caregiver, Direct Care Worker:** The person that provides care.
- **Vendor or Provider:** The business that provides care.
- **Managed Care Organization (MCO):** The entity responsible for helping the member manage their plan, services, and overall needs.
- **Care Manager (CM):** The person at the MCO that assists the member with their plan and services to best meet their needs and reach their goals.
- **Interdisciplinary Team (IDT):** The member-centered care team (typically a care manager/social service coordinator and a nurse) responsible for assessment, planning, authorization, and ongoing coordination.
- **Financial Management Services (FMS):** The company that handles the members' administrative employer requirements, provider eligibility and employee payroll. (Acumen)



- **Authorization:** The approval the MCO and the FMS must get before the member can receive a service through Family Care.
- **Resource Allocation Decision (RAD) Process:** DHS-approved service authorization methodology MCOs use to align services and budgets with assessed needs and outcomes.
- **Member-Centered Plan (MCP):** The individualized care plan developed with the member and IDT; it documents outcomes, services, and how supports will be delivered (including any self-directed services).
- **Electronic Visit Verification (EVV):** Technology that verifies the date, time, and location of certain in-home services (e.g., personal care and some supportive home care), required under federal law and implemented by DHS/MCOs.

Helpful Links

- **FC Home Page:** <https://www.dhs.wisconsin.gov/familycare/index.htm>
- **FC Best Practice Manual:** <https://www.dhs.wisconsin.gov/publications/p0/p00593.pdf>
- **ADRC Home Page:** <https://www.dhs.wisconsin.gov/adrc/index.htm>
- **ADRC SDS Flyer:** <https://www.dhs.wisconsin.gov/publications/p0/p00088l.pdf>
- **MCO Contact Info:** <https://www.dhs.wisconsin.gov/familycare/mcocontacts.pdf>
- **DHS Program Comparison:** <https://www.dhs.wisconsin.gov/publications/p0/p00570.pdf>
- **Office for the Blind or Visually Impaired:** <https://www.dhs.wisconsin.gov/obvi/index.htm>
- **Office for the Deaf or Hard of Hearing:** <https://www.dhs.wisconsin.gov/odhh/index.htm>
- **Dementia Care in Wisconsin:** <https://www.dhs.wisconsin.gov/dementia/index.htm>
- **Programs & Services for Older Adults:** <https://www.dhs.wisconsin.gov/aging/index.htm>
- **Transportation & Parking:** <https://www.dhs.wisconsin.gov/disabilities/physical/transportation.htm>
- **Wisconsin Wayfinder:** <https://www.dhs.wisconsin.gov/wiscway/services.htm>
- **Adult Protective Services:** <https://www.dhs.wisconsin.gov/aps/index.htm>
- **DHS EVV Info for Members:** <https://www.dhs.wisconsin.gov/evv/members.htm>

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