MATCHING UP:

Seven Considerations for Impactful Matching Service and Respite Registries

INTRODUCTION

Self-direction (also known as "consumer direction") is an approach to home- and community-based services (HCBS) wherein older adults and people with disabilities and/or their family members directly hire their own direct care workers, who are known as "independent providers." Self-directing consumers may prefer the choice and control built into the model, while the independent providers who support them may benefit from greater autonomy and flexibility in their work.[1] All 50 states and Washington, D.C. offer Medicaid self-direction programs, and enrollment in these programs has grown rapidly in recent years—more than 1.5 million Medicaid HCBS consumers were enrolled in self-direction in 2023, compared to just over 811,000 in 2013.[2]

Despite the popularity of self-direction, many consumers struggle to find workers to hire, while many independent providers cannot find the clients and hours they need for financial stability. This reality reflects overall workforce shortages coupled with logistical barriers faced by consumers and workers in connecting with each other.

Matching service registries offer one solution to these challenges. Matching service registries enable consumers and independent providers to find each other through searchable online profiles, job postings, or both. Some matching service registries focus on ongoing care, while others are specific to respite care—i.e., short-term services intended to provide relief to family members and other unpaid caregivers.

This report offers seven evidence-informed considerations for building new matching service registries or enhancing existing registries for the benefit of independent providers, consumers, and families.

We focus on matching service registries that support Medicaid-funded self-direction programs or that are directly funded by the federal Administration for Community Living (ACL) through Centers for Independent Living (CILs) and the Lifespan Respite Care Program.

The guidance and specific strategies presented in this report draw from PHI's most recent national inventory of matching service registries (see Appendix A). Ultimately, this report aims to ensure that matching service registries realize their potential in promoting autonomy and access for consumers while also ensuring stable, high-quality jobs for the workers who support them.

Seven Considerations for Successful Registries

1. What are the overall aims and objectives of the registry?
2. Who are the intended users of the registry?
3. How will the registry be financed?
4. What partnerships are essential to the registry?
5. What design features should be built into the registry?
6. How will the registry be marketed and promoted?
7. How will the registry be evaluated?

KEY TERMS

AGENCY PROVIDERS
Agencies or organizations that offer home and/or respite care services; may also provide other services. Examples include home care agencies, day services providers, senior centers, county departments of aging, and community centers.

CONSUMERS
Individuals who seek and receive home care services; may receive ongoing services or respite care only.

FAMILY CAREGIVERS
Individuals who provide and/or manage care for a family member; care may be paid or unpaid.

INDEPENDENT PROVIDERS
Direct care workers who are employed directly by consumers or family caregivers; may be paid through Medicaid self-direction programs, private funds, or other payment streams.

MATCHING SERVICE REGISTRIES
Online resources that facilitate connections between independent providers and consumers or family caregivers.

RESPITE CARE
Short-term care designed to provide relief for primary caregivers that can last from a few hours up to several weeks at a time.[3]

SELF-DIRECTING CONSUMERS
Individuals who recruit and manage their own workers (i.e., independent providers) rather than receiving support through a home care agency.

BACKGROUND AND APPROACH

In 2012, PHI began conducting a national inventory of matching service registries, collating the number and key features of registries across the country to inspire and inform efforts to create new or improve existing registries. In 2024, PHI began collaborating with the Respite Care Association of Wisconsin, with funding from ACL, to update our existing inventory of matching service registries and add respite registries. This report presents the key design and development considerations that we distilled from that research.

We gathered data for the updated inventory and this report through background desk research and interviews with registry representatives. Our desk research focused on reviewing the registries that PHI had already identified and featured in our online inventory and those listed in the ARCH National Respite Network respite care database.[4] From the desk research, we identified and contacted key experts associated with the registries, including state agency staff, nonprofit registry staff, respite program leaders, and web developers. In total, we conducted 13 virtual interviews between March and May 2025. We analyzed the interviews thematically, as presented in this report, and catalogued the registry details on PHI's updated Matching Service Registries website.[5]

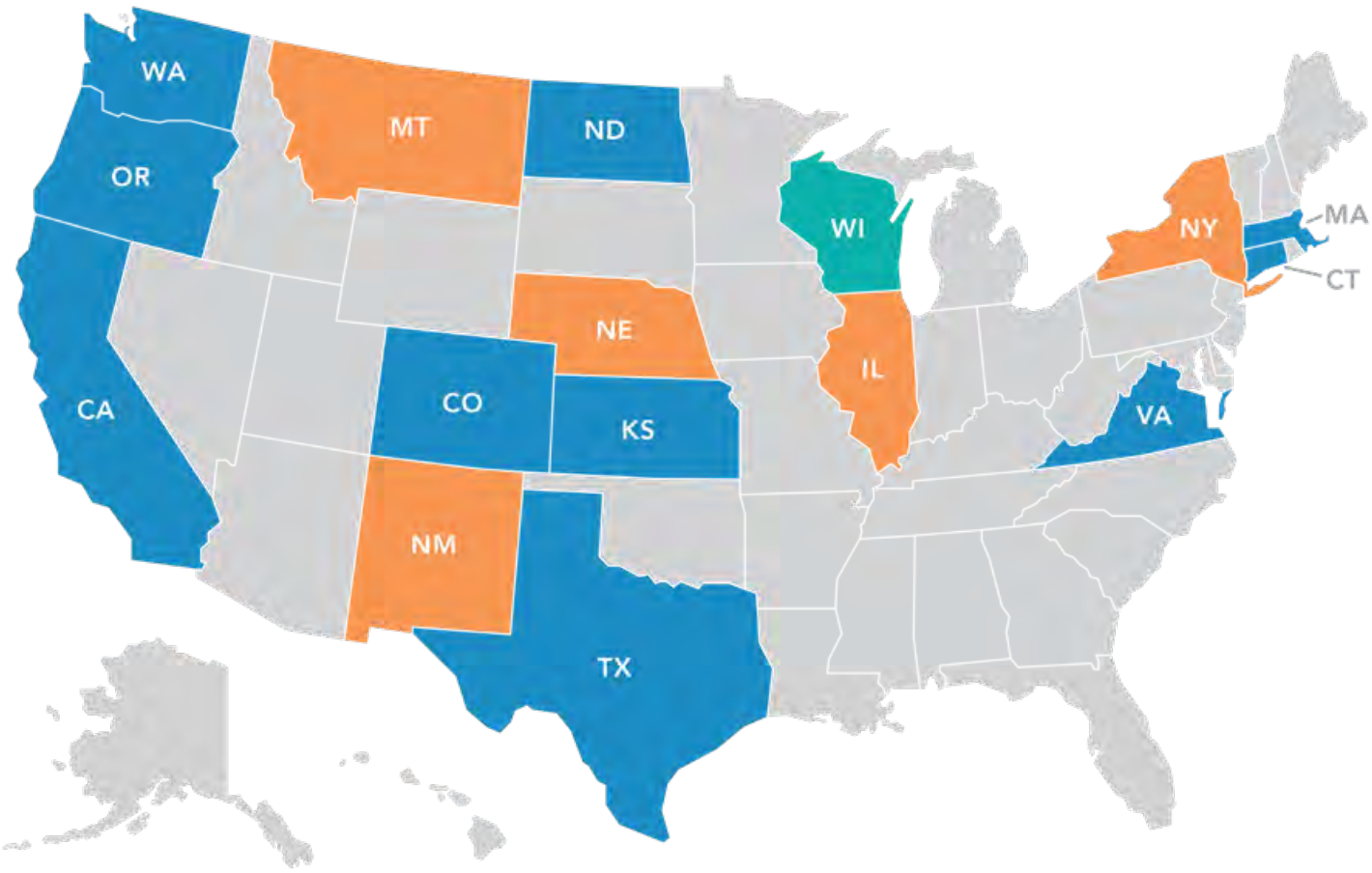
Overall, PHI profiled 12 matching service registries that operate across 16 states. This number included six matching service registries operating in 11 states (California, Colorado, Connecticut, Kansas, Massachusetts, North Dakota, Oregon, Texas, Virginia, Washington State, Wisconsin) that focus primarily on ongoing care and six respite-specific registries operating in six states (Illinois, Montana, Nebraska, New Mexico, New York, Wisconsin). Five of the matching service registries that focus on ongoing care also cover respite care. Four of the matching service registries we examined operate across multiple states (Carina, Direct Care Careers, QuickMatch, and RewardingWork), and 11 of the 12 registries are statewide, while QuickMatch operates regionally.

The seven considerations presented in this report reflect common opportunities, challenges, and decision points faced by registry leaders across the country. For each consideration, we provide a brief explanation, then discuss several options and strategies related to that consideration, synthesized from the research and illustrated by specific examples.

See Appendix A for a complete list of the registries profiled on PHI's website and in this report.

See Appendix B for information on several other registries that did not fit the scope of this research but that still offer instructive models for connecting consumers and independent providers.

FIGURE 1. MATCHING SERVICE REGISTRY BY TYPE AND STATE, 2025



For more details on PHI's Inventory of Matching Service Registries, visit:
https://www.phinational.org/advocacy/matching-service-registries/

SEVEN CONSIDERATIONS FOR IMPACTFUL REGISTRIES

1 What are the Overall Aims and Objectives of the Registry?

Whether building a new registry or strengthening an existing one, setting clear goals is an essential step for ensuring that the registry meets worker and consumer needs, as well as addressing the objectives of the organizations and agencies involved. All the other considerations in this report, from user eligibility criteria to search features and more, should tie back to these high-level goals.

ESTABLISH A REGISTRY TO FULFILL AN UNMET NEED

Some registries are created to explicitly address unmet needs among workers and consumers. For example, SEIU 775, the union that represents care workers in Washington State, successfully bargained for state funding to launch Carina as a tool to help home care workers find additional work hours and increase their earnings and to improve access to care for HCBS consumers. Other registries have been established with a more specific focus on consumer needs. For example, QuickMatch was developed to make provider listings maintained by Centers for Independent Living (CILs) more accessible to the self-directing consumers that the CILs serve, enabling those consumers to search for workers independently rather than having to rely on CIL staff.

ESTABLISH A REGISTRY TO SUPPORT A BROADER PUBLIC INITIATIVE

Some registries have been designed to support broader public initiatives, particularly with a focus on workforce development.

For example, Wisconsin's WisCaregiver Connections registry was established to bolster the Certified Direct Care Professional (CDCP) training and certification program by creating a clear pathway from certification to paid care jobs with self-directing consumers and HCBS agencies. Similarly, the Respite Care Association of Wisconsin enhanced their state's registry to connect trained respite care providers with families seeking qualified providers. Three organizations participating in the ACL-funded National Respite Care Provider Training (NRCPT) pilot program[6]—Illinois Respite Coalition, Inc., New Mexico Caregivers Coalition, and New York State Caregiving and Respite Coalition—created respite registries for the same purpose.

> ***"We really wanted to have a registry that was available to the public and people could determine whether people have been trained and then also have a potential job matching platform."***
>
> – State official from an agency overseeing a matching service registry

2 Who Are the Intended Users of the Registry?

A key consideration in the development of a registry is eligibility: who can use the registry—and who cannot—and within what parameters? Eligibility decisions can impact the size of the registry, the range of potential worker/employer matches, and both the cost and financing of the registry. Organizations and public agencies make different choices around eligibility criteria based on their goals, policy context, and program rules.

EXPLORE ELIGIBILITY CRITERIA FOR INDEPENDENT PROVIDERS—AND AGENCY PROVIDERS

All registries featured in this report are designed to be accessed by independent providers providing services to self-directing consumers. Within these parameters, some registries have set particular criteria for independent providers' registration or enrollment, and some registries have opened registration to agency providers as well (i.e., allowing agency providers to offer services through the registry).

Some registries require independent providers to hold specific training credentials prior to using the registry, particularly when the registry's goal is to connect employers with a pipeline of trained workers. For example, as previously noted, the goal of WisCaregiver Connections is to connect employers with Certified Direct Care Professionals (CDCPs), so all workers using the registry must have the CDCP credential. Similarly, several organizations launched or reconfigured registries to include respite provider training requirements during the ACL NRCPT pilot.

> *"We were part of a 10-state pilot on the training portal... It was easy to see that this was going to go nowhere unless we had something like a matching registry, so we needed to have that as Part Two of the training portal."*
>
> – Leader of an organization operating a respite registry

Some registries also require background checks for independent providers, depending on the registry's goals and broader employer and program rules that govern home care workforce participation. In Washington State and Oregon, home care workers are required to undergo background checks as an initial step toward certification. Correspondingly, the Carina matching service registry requires proof that these checks have been completed. (As the employers of record in those states, Consumer Direct Care Network Washington and the Oregon Home Care Commission facilitate the completion of background checks and maintain employee records. Carina's role is limited to verifying eligibility with those entities.)

In contrast, QuickMatch does not require background checks before enrollment on the platform. However, workers may choose to indicate on their profiles that they have completed a state background check if they can provide documentation. This approach allows the registry to remain accessible to all independent providers and consumers (some of whom may choose not to require background checks). Similarly, the Wisconsin Respite Care Registry does not require background checks, given that background check requirements vary across programs and according to individual consumers' preferences.

When self-direction is not the exclusive focus, registries may also allow agencies to enroll and advertise their services to consumers. Agencies are commonly listed as providers on respite registries because these registries are designed to help family and other unpaid caregivers find short-term support, regardless of the source of care.

CONSIDER EMPLOYER ELIGIBILITY REQUIREMENTS

Although all matching service and respite registries profiled in this report are open to self-directing consumers in Medicaid programs, some of them extend eligibility to other employer types as well—depending on the registry's goals. For example, because CILs promote independent living for all self-directing consumers regardless of payer (i.e., whether they are enrolled in public programs or use private funds), QuickMatch is open to both Medicaid and private-paying users. However, reflecting CILs' emphasis on consumer choice and autonomy, agency employers are not permitted to use the registry. In contrast, WisCaregiver Connections allows agency employers to use the registry to search for and recruit CDCPs, which reflects the registry's emphasis on connecting trained workers to jobs with all Medicaid HCBS employers. Agency participation is limited to those agencies that are registered with the CDCP program who agree to pay a state-funded retention bonus to the workers they hire.

3 How Will the Registry be Financed?

Funding is integral to the establishment and ongoing operation of every matching service and respite registry. Entities that manage or oversee registries leverage a variety of strategies to ensure financial viability and sustainability, including sharing costs with subscribers, creating cost efficiencies in design and operation, and braiding together public funding sources.

ASSESS THE COSTS OF DIFFERENT REGISTRY DESIGNS

Organizations and agencies have two primary registry design options with different cost implications.

One option is to subscribe to an existing registry, while the alternative is to custom-build a new one. Subscription-based registries, like Direct Care Careers, QuickMatch, and Rewarding Work, can be launched in new states or regions with a lower upfront cost than building a comparable registry independently. Design updates and ongoing operational costs can be spread across subscribers as well. For example, when states using Direct Care Careers agree to add or change a feature, the cost of that feature is split between those states.

Alternatively, building a new registry allows entities to tailor the resource to their goals, community needs, and budget considerations.

Many new respite registries have been created with limited funds by prioritizing the features necessary to fulfill top-line goals. Because respite registries primarily focus on helping families find care, the respite registries included in this report (except for the Respite Care Association of Wisconsin's registry) allow independent providers to create searchable profiles for consumers and families to review, but do not enable searchable job postings. This choice contains costs while still fulfilling the goal of connecting families to workers, though offers less support to workers in finding sufficient hours and sustainable schedules.

HARNESS DIVERSE FUNDING SOURCES

It is imperative for registry leaders to consider all potential funding sources to support and sustain registries.

State agencies that support older adults and people with disabilities may invest in registries, in line with broader goals to improve access to home and community-based services (HCBS). Notably, federal funding through the American Rescue Plan Act of 2021 enabled Wisconsin to launch WisCaregiver Careers and allowed several other states to subscribe to Direct Care Careers.[7] These federal funds were intended to help states enhance, expand, and strengthen HCBS during and beyond the COVID-19 pandemic.

Registries can also be supported through less direct funding pathways. In Oregon and Washington State, Carina is funded as a worker benefit through union collective bargaining contracts covering home care workers. In Kansas, Healthy Blue, a managed care organization that contracts with the state's Medicaid program, funds a subscription to Rewarding Work as a resource for all Medicaid-funded self-directing consumers.

Federal and state grants may also be leveraged to support registries. As a prominent example, Lifespan Respite Care Program grants have been used to build and sustain many respite-specific registries, advancing the Lifespan Program's goal to expand access to respite care across states. This includes respite registries launched through the NRCPT program, a special project of the Lifespan Respite Care Program focused on provider recruitment, training, and retention.

Finally, some registries charge enrollment fees to private-paying consumers and/or home care agencies as a source of ongoing revenue. These fees can help sustain and expand the registry over time and broaden employment opportunities for workers. At the same time, a fee-based model may expand the pool of users competing to attract workers, which may be detrimental for consumers.

4 What Partnerships are Essential to the Registry?

Building and maintaining a registry with the right mix of partners is essential for success. The strategies highlighted below are only a few examples of partnerships that matching service registries have successfully leveraged to inform and assist their development and operations. (See the box on page 9 for other potential partners.)

LEARN FROM EXISTING REGISTRIES

Information-sharing and collaboration with other entities (locally and across the country) that have successfully launched registries can facilitate learning about best practices and common pitfalls. For example, after connecting with Nebraska's Department of Health and Human Services, the New York State Caregiving and Respite Coalition recognized they could use the underlying infrastructure of the Nebraska Resource and Referral System for their own registry, saving time and resources.

To facilitate this type of knowledge exchange, the ARCH National Respite Network and Resource Center and ADvancing States have both featured sessions on matching service registries at their annual conferences.

> *"I came across the Nebraska system... and so that learning curve didn't have to be in there...You find out, 'Oh, it's already been invented. I don't need to do it again.'"*
>
> – Leader from an organization operating a respite registry

Potential Matching Service Registry Partners

The following types of partners offer a range of expertise and support, from advocating for start-up funding to designing, hosting, and maintaining the registry.

- **Consumers** can help advocate for public funding for registries and provide valuable input on registry functionality.
- **Unions and workforce development programs** can integrate registries into their programs and support registry uptake.
- **Community colleges and universities** can build and host registries and/or refer students to registries to find work and gain experience in health and social services.
- **Technology vendors** can develop registry platforms to ensure they are secure and accessible and that their features align with registry goals.
- **State agencies** can manage matching service registries and advertise them to self-directing consumers, for example, by integrating information about registries into case management protocols.
- **Managed care organizations** can incentivize consumers' and workers' use of registries and offer data to evaluate registries' impact as part of broader network adequacy and workforce development efforts.
- **State elected officials** can lead legislation that drives registry development and funding, and champion registries as a state-sponsored strategy to address direct care workforce shortages and service gaps.
- **Existing matching service registries** can serve as models for new registries and provide technical assistance around building, strengthening, and sustaining registries.

ENGAGE LOCAL ORGANIZATIONS THAT SUPPORT WORKERS AND CONSUMERS

Numerous local organizations can be engaged in envisioning, designing, testing, and promoting matching service and respite registries.

One key example is unions, which can advocate for registry funding during the collective bargaining process and refer union members to the registry to find jobs that meet their needs. As noted, SEIU 775 helped establish Carina by successfully bargaining for state funding, and the union presents Carina as a benefit to members alongside health insurance, a retirement plan, and training opportunities.

Colleges and universities can also be valuable partners, offering registry infrastructure, technical expertise, and/or marketing to students. For example, Nebraska's registry was established through collaboration between the Nebraska Department of Developmental Services and the University of Nebraska-Lincoln's Center on Children, Families, and the Law, in alignment with the priorities of both partners. Similarly, the Wisconsin Department of Health Services partnered with University of Wisconsin-Green Bay (UWGB) to develop the CDCP training and certification program, including WisCaregiver Connections. To build the registry, UWGB reconfigured Handshake, a platform that matches students and recent graduates with jobs, which was already used by the university and other public agencies.

5 What Design Features Should be Built into the Registry?

Safe, user-friendly registries help workers and consumers successfully navigate the registry, match with each other, and establish lasting relationships. Key design considerations include search and filter functions, communication tools, and strong accessibility features. Many registries also require user registration, adding an important layer of safety and accountability. All registry design features can be honed through testing with intended users.

BUILD FEATURES THAT SUPPORT LASTING MATCHES

The central purpose of matching service registries is to help consumers/families and workers find each other, and organizations have used various features to fulfill this purpose.

All registries allow independent providers to create profiles and allow consumers to search for providers based on geographic proximity, as well as other factors such as services offered, skills, experience, availability, and/or sex. Some registries also allow consumers/family members to post specific jobs that workers can filter and search, including Carina, Mass PCA Directory, Direct Care Careers in Colorado and Texas, and WisCaregiver Connections.

Keeping registry information current is important for facilitating successful matches by ensuring that consumers and workers do not spend time pursuing unavailable opportunities. Many registries maintain timely content by regularly reminding users to renew, update, or deactivate their posts and profiles. For example, Rewarding Work keeps job postings active for 30 days and independent provider profiles active for 90 days, prompting users to renew when those periods expire.

To ensure that these features function as intended, it is helpful to test them with potential users before a formal rollout. For example, Carina first launched as a regional pilot in King County, Washington, before expanding statewide and later into Oregon.[8]

PROTECT WORKER AND CONSUMER INFORMATION

Matching service and respite registries may collect sensitive personal information about users, so securing this information is essential. One security measure is to require users to register and create profiles before being able to navigate and view others' profiles, which is particularly important if profiles include personal phone numbers and addresses. All registries covered in this report require workers to create a profile or complete an application to be listed. Several also require consumers to create profiles, which can support security and help verify eligibility for the registry. For example, Rewarding Work is free for families receiving services through the Massachusetts Department of Developmental Services (DDS), but not for others, so DDS consumers must provide a code from DDS when they register.

As another security measure, some registries include internal messaging systems that enable users to communicate through the platform without exchanging personal contact information. Carina, Direct Care Careers, Mass PCA Directory, and Rewarding Work all offer internal messaging.

PRIORITIZE ACCESSIBILITY

Strong accessibility features for users—such as those detailed in international web content accessibility guidelines[9]—must be prioritized when building a registry, given that the primary registry users include older adults and people with disabilities. As examples, Carina and WisCaregiver Connections have both integrated advanced accessibility features, including mobile-friendly design, screen-reader compatibility, text resizing, and keyboard navigation. To further support accessibility, many registries provide informational resources and training videos, and nine offer phone support.

Translation features are also important for accessibility, given that users may have limited English proficiency.

The Illinois Respite Coalition and the Respite Care Association of Wisconsin both make their registries available in Spanish, and seven other registries profiled in this report are available in languages other than English. Most of these platforms are translated through a web-based translation service such as Google Translate. Carina went further by investing in "proper localization," meaning registry content is translated and adapted to reflect the cultures of its target audiences. The registry's website and user support services are available in English, Spanish, and Russian.

> ***"We can do a lot of hand holding when necessary... We support people by phone, by email, by chat."***
>
> – Leader from a matching service registry platform

6 How Will the Registry be Marketed and Promoted?

Even with limited budgets, marketing and promotion are critical to registry uptake and success. Growing the user base makes a registry more effective by balancing the number of workers and consumers and ensuring a critical mass of users altogether. Marketing can be done by registry staff and other partners through training programs, special events, and digital and traditional media.

DISSEMINATE REGISTRY INFORMATION THROUGH RELEVANT PROGRAMS

Programs that support consumers and families—many of which are already charged with disseminating resources and improving access to care—can help raise awareness about registries. For example, some respite organizations funded through the Lifespan Respite Program employ respite coordinators who promote respite registries as part of their role in helping families find respite care. Other registries have had success marketing through Medicaid case managers and ACL-funded Aging and Disability Resource Centers.

Similarly, organizations supporting workers can play a critical role in recruiting new users; for example, the unions and employers of record in Washington State and Oregon promote Carina to independent providers. Training program partners can also help direct potential users toward registries. For example, the New Mexico Respite Coalition partnered with Taos County to train high school students interested in health care careers to become respite workers and to encourage them to join the registry.

PURSUE VARIED MARKETING STRATEGIES

Recognizing the critical importance of building a critical mass of workers and consumers, organizations and agencies operating registries must also leverage proactive marketing tactics and strategies to reach target audiences. Registries commonly use digital marketing to reach large audiences efficiently, including through email campaigns, search engine advertising, and social media platforms. For example, in Kansas, Rewarding Work is advertised through Google, Facebook, and Craigslist.

Traditional and in-person outreach strategies complement these digital efforts by reaching audiences who may be less engaged online or who place greater value on in-person interaction. Registry representatives often recruit users at external events, like job fairs, webinars, and conferences. Representatives from WisCaregiver Connections, QuickMatch, and New Mexico Caregivers Coalition all attend job fairs to connect face-to-face with prospective workers and consumers. Some registries also invest in traditional media, like radio, television, and newspaper advertising, to expand their reach. WisCaregiver Connections, for instance, is advertised in newspapers in rural areas.

7 How Will the Registry be Evaluated?

Data collection and evaluation are important for assessing whether and how registries are meeting their goals and for identifying areas for improvement. Measuring success may require capturing and monitoring key data metrics, collecting feedback directly from users, and leveraging partnerships with external evaluators.

TRACK AND EVALUATE DATA THROUGH THE REGISTRY

Registries may contain rich data that can be used for monitoring and evaluation, such as the numbers of users, logins, and jobs posted and fulfilled, as well as data on wages and user demographics. Nebraska's Department of Human Services created a data dashboard that tabulates registry users by type and by region, with monthly and quarterly display options. The data show that the Department has consistently met its goal of 10 percent annual growth in the number of respite providers on the registry, but with fewer providers in more rural and agricultural areas. To address this issue, registry staff have devoted more effort to outreach and engagement in rural areas.

IMPLEMENT USER SURVEYS AND OTHER FEEDBACK CHANNELS

Gathering feedback directly from users can inform registry improvements. For example, Carina surveys registry users and conducts in-depth interviews with consumers. They also administer ad-hoc surveys, such as a workforce survey exploring what might incentivize independent providers to provide respite services among other forms of care. Similarly, multi-state registries, like Direct Care Careers and Rewarding Work, incorporate user feedback by routinely reviewing support tickets.

CONSIDER USING THIRD-PARTY EVALUATORS

Third-party evaluators can help organizations rigorously assess their registries from a neutral perspective. As one example, Carina contracted with PHI to conduct an evaluation of user experiences, which involved analyzing platform data, surveying users, and conducting in-depth interviews.[10] Similarly, Montana leveraged grant funding to fund an external evaluation of the state's Aging and Disability Resource Center, including the respite registry.

> *"Periodically, you just have to look at things with a fresh set of eyes."*
>
> – State official from an agency operating a respite registry

CONCLUSION

When thoughtfully designed and sufficiently funded, matching service registries play a key role in supporting a strong care ecosystem by improving job quality for independent providers, supporting consumers' access to ongoing care and respite services, and strengthening state and federal efforts to support family caregivers and rebalance long-term services and supports toward home and community-based settings.

Learning from 12 matching service and respite registries operating across diverse states and localities, this report has offered seven key considerations for registry development and improvement, including setting clear goals, defining user eligibility, securing sustainable funding, forming strategic partnerships, implementing user-centered design, marketing and promoting registries, and measuring success. By sharing strategies used by registries nationwide, we hope to accelerate their growth and strengthen their impact, building lasting matches that secure consistent care for consumers and stable, sustainable schedules for the workers who provide that care.

APPENDIX A

NATIONAL INVENTORY OF MATCHING SERVICE AND RESPITE REGISTRIES

In this research, we defined matching service and respite registries as online resources that connect publicly funded, self-directing consumers and family caregivers with independent providers and include some degree of user searchability. The registries that we included may cover a range of home care services or focus exclusively on respite care.

Registries were excluded from this research if they only list agencies as providers (not independent providers); comprise static lists of providers that cannot be independently searched by consumers or workers; exist primarily to verify training or certification records (e.g., certified nurse aide registries); and/or operate as private employment platforms without any public investment (e.g., Care.com or MyCNAJobs.com).

Name of Registry	Type	State	Region Covered by Registry
Carina	Matching service registry platform with a respite option	OR, WA	Statewide
Direct Care Careers	Matching service registry platform with a respite option	CO, ND, TX	Statewide
Illinois Respite Coalition Registry	Respite registry built specifically for Illinois; managed by Illinois Respite Coalition	IL	Statewide
Mass PCA Directory	Matching service registry built specifically for Massachusetts; managed by Massachusetts' Personal Care Attendant Workforce Council	MA	Statewide
Nebraska Resource and Referral System	Respite registry with an emergency care option built specifically for Nebraska within the state's Aging and Disability Resource Center; managed by Nebraska Department of Health and Human Services	NE	Statewide
New Mexico Respite Provider Registry	Respite registry built specifically for New Mexico; managed by New Mexico Caregivers Coalition	NM	Statewide
New York Respite Registry	Respite registry built specifically for New York; managed by New York State Caregiving and Respite Coalition	NY	Statewide
QuickMatch	Matching service registry with a respite option	CA: 5 independent living centers; VA: 1 independent living center	Areas served by each independent living center
Rewarding Work	Matching service registry with a respite option	CT, KS, MA	Statewide
State of Montana Aging and Disability Resource Center (ADRC)	Respite registry with an emergency care option built specifically for Montana within the state ADRC; managed by Montana Department of Public Health and Human Services	MT	Statewide
WisCaregiver Connections	Matching service registry built specifically for Wisconsin with a respite care option; includes a training registry and associated job platform; managed by Wisconsin Department of Health Services	WI	Statewide
Wisconsin Respite Care Registry & Respite Connections	Respite registry with an emergency care option for independent and agency providers to post profiles/services, plus a companion respite job registry for family caregivers/consumers to post jobs; managed by Respite Care Association of Wisconsin	WI	Statewide

APPENDIX B

OTHER REGISTRY MODELS FOR CONNECTING CONSUMERS AND INDEPENDENT PROVIDERS

When researching matching service registries, PHI spoke with experts from some registries that connect consumers and care providers but did not meet our criteria for inclusion in this research because they are only available to private-pay consumers or do not facilitate direct connections between users. Some specific examples are described here.

En Casa Care Connections and Encuentro

En Casa Care Connections[11] was created to connect Spanish-speaking direct care workers with private-paying consumers in New Mexico. Encuentro, the sponsoring organization for the registry, is a nonprofit based in Albuquerque that is dedicated to supporting the immigrant community.[12] Encuentro offers English language and home care training classes for Spanish-speaking immigrants, and those who complete the home care training classes are eligible to enroll on En Casa Care Connections. Encuentro staff are responsible for matching workers on En Casa Care Connections with clients.

QuickMatch and Marin Center for Independent Living

Marin Center for Independent Living (CIL) uses QuickMatch as an internal database for privately paid independent care providers. Individuals living in Marin County, California who are searching for services may contact Marin CIL staff, who record their information and match them with an independent care provider listed in the database. Though no training or background check is required, independent providers must provide at least three references from recent clients to be included in the database.

Public Authorities and California's In-Home Supportive Services Workers

California has a robust Medicaid-funded self-direction program known as in-home supportive services (IHSS). Each county is required to have an office known as a "public authority" that serves as the employer-of-record for IHSS workers and holds responsibility for: enrolling and training IHSS workers; negotiating wages and benefits; verifying workers' qualifications and background checks; and maintaining a registry of trained workers. Staff at the public authority provide Medicaid consumers with a list of available IHSS workers in the county, and those consumers can then directly contact, screen, interview, and employ workers from the list. Though all IHSS workers are required to register with the public authority, only those interested in working for non-family members are listed as available to work on the registries. The IHSS registries also function as respite registries.

Respite Registries

Aside from the six respite registries featured in this report, searchable respite resources exist in 24 other states. These resources did not qualify for our research because they do not have the critical piece of helping consumers and family caregivers connect directly with independent providers. Many of these resources provide lists of agencies that consumers and families can independently contact to establish respite care. They may also offer information about ways to pay for respite care. Several of these resources allow users to filter their options by location and specific services offered, such as adult day services, respite camps, and population-specific respite services, among other options. Others offer static, downloadable lists that may be periodically updated. These resources may be maintained by state agencies or nonprofit organizations, many of which are supported by Lifespan Respite funds.

NOTES

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