What You Need to Know

as a Personal Care Aide (PCA) in the Independent Provider Program

EXECUTIVE OFFICE OF HEALTH & HUMAN SERVICES STATE OF RHODE ISLAND

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Contents

Welcome to the Independent Provider (IP) Program.....4

Why the IP Program and self-direction? 6

Understanding my role as a Personal Care Aide (PCA)....7

Training to be a PCA.....7

What is a Fiscal Intermediary (FI)?.....10

What is the Service Advisor (SA)?.....11

Step a consumer takes with the PCA?.....13

How you might be hired as a PCA.....15

Once you are hired by the consumer 18

Setting up the Schedule.....18

Reviewing your work.....18

Things to keep in mind as a PCA.....19

The FI is an HR representative.....19

Performing tasks outside of the Individual Service Plan...19

Know your boundaries 20

Be respectful 20

Know your rights to work in a safe environment 20

What if I think the consumer is being abused?.....22

How and when do I get paid?.....24

What is a service period? 24

When do I paid?.....24

Can I get paid for mileage? 24

What can I not be paid for? 25

Medicaid Fraud.....26

For More Information.....27

Appendices

Appendix A-Definitions.....28

Appendix B-National Background Check Guidance.....35

Appendix C-Training Options.....40

Appendix D-Allowed ADLs under IP.....44

Appendix E-Allowed IADLs under IP 45

Appendix F-Excluded ADLs under IP.....46

Appendix G-Excluded IADLs under IP.....47

Appendix H-Registry PCA, descriptions.....48

Appendix I-Registry on EOHHS.....49

Appendix J-MTM Reimbursement Form.....50

Appendix K-IP Prospective PCA Letter of Intent.....56

Appendix L-IP Prospective PCA Check-Off List.....57

Hello and welcome to the Independent Provider (IP) Program

The Independent Provider (IP) Program is an option for people living in their homes, who have been approved for Medicaid Long Term Services and Supports (LTSS) and who need assistance with personal care and homemaker services. As a personal care aide (PCA), you become employed by the consumer to help with activities of daily living so that the consumer can stay in their home.

To work as a PCA, you must be 18 or over. You must meet requirements that are detailed in this handbook.

The services you provide under this program are limited to homemaker and personal care services.

Homemaker services include:

- Aid in grocery shopping
- Aid in cooking
- Assistance with using the phone & looking up phone numbers
- Assistance in housework: cleaning, dusting, vacuuming, laundry
- Assistance using public transportation
- Assistance paying bills/managing bills
- Reminding the consumer to take their medication

Personal care services include:

- Aid in bathing: personal hygiene & grooming, foot care, foot soak, applying foot lotion, shampoo hair, comb/brush, shaving
- Aid in dressing: dressing & undressing, applying lamb's wool & elastic stockings
- Aid in transferring: movement & mobility – moving from bed to chair
- Aid in toileting: continence-related tasks including control & hygiene
- Aid in eating: preparing food & feeding
- Aid in walking/climbing stairs
- Aid in applying dry heat & cold packs to intact skin
- Empty catheter bag, commode, urinal
- Assist with bowel/bladder retraining

Why the IP Program and self-direction?

Consumers will choose the IP Program for the following reasons:

- ✓ **Consumer Control:** The consumer has control to hire, schedule, and supervise the PCA.

- ✓ **Consumer Choice:** The consumer provides the direction. The consumer tells the PCA what needs to be done, how they want their services provided, and when they want their services provided. The consumer is the only person that can tell you, the PCA, what works for them.

- ✓ **Trust:** The consumer must have a PCA that they can trust and depend on, then, they feel truly independent. A consumer will not employ someone they cannot trust. Trusting their PCA is the most important part of their life.

- ✓ **Reliability:** The consumer needs to know when their PCA is not going to be present. The consumer needs to know if the PCA is feeling ill, so they can find someone else as soon as possible. The consumer cannot live at home without the support of their PCA.

Understanding my role as a Personal Care Aide (PCA)

When the consumer enters the IP Program, the service advisory agency (SA), along with the consumer, develops an Individual Service Plan (ISP). The ISP lists the approved tasks the consumer needs assistance with in order to live independently.

To be eligible for the IP program, a consumer must need assistance with two (2) or more Activities of Daily Living (ADL), such as mobility, bathing/grooming, dressing/undressing, eating, and toileting (items are listed in the introduction and in the back of this handbook).

Consumers may also need assistance with Instrumental Activities of Daily Living (IADLs) such as laundry, shopping, housekeeping, meal preparation, transportation to medical appointments, and other special needs (items are listed in the introduction and in the back of this handbook).

PCAs should only be performing physical assistance for the ISP approved tasks and will receive training prior to starting work.

Training to be a PCA

Your training depends on how you are introduced to the IP Program

✓ **You know the IP consumer…**

- Mandatory Orientation Training is required: A six (6) hour mandatory orientation

training is required for all potential PCAs. This orientation will describe the PCA roles and responsibilities, infection control and safety, consumer privacy, abuse and neglect, and administrative procedures.

- National Criminal Background Check is required: All potential PCAs must undergo a national criminal background check.
- In Home Training is requested: After you have completed the Mandatory Orientation Training & passed the National Criminal Background Check, you have 90 days to complete the CPR certification at Community College of RI (CCRI) and be trained by the consumer while you work. In this path, the consumer has decided that she/he knows best on how the homemaker and personal care services should be performed.
- You cannot get paid until the consumer has signed off on your training.

✓ **You know the IP consumer already but…**

- Mandatory Orientation Training is required: A six (6) hour mandatory orientation training is required for all potential PCAs. This orientation training will describe the PCA roles and responsibilities, infection control and safety, consumer privacy, abuse and neglect, and administrative procedures.
- National Criminal Background Check is required: All potential PCAs must undergo

a national criminal background check.

- Formal Training is requested: After you have completed the Mandatory Orientation Training & passed the National Criminal Background Check, you have 90 days to complete the CPR certification at CCRI and take the ADL/IADL course, also at CCRI. In this path, the consumer has decided that the formal training is best even though she/he knows you. You can work for the consumer while you complete the CCRI training. You do have to get the training done by the 90 days. After you are done with the training, you can join the registry to get more PCA hours from other consumers in the IP Program who might also need help. This allows you to expand your work hours and expand your working network to others that you might not even know.
- You cannot get paid until you have completed the CCRI training.

✓ **You do not know an IP consumer but want to be a PCA…**

- Mandatory Orientation training is required: A six (6) hour mandatory orientation training is required for all potential PCAs. This orientation will describe the PCA roles and responsibilities, infection control and safety, consumer privacy, abuse and neglect, and administrative procedures.
- National Criminal Background Check is

required: All potential PCAs must undergo a national criminal background check.

- Formal Training is required: You will then sign up and complete CPR certification at CCRI and take the ADL/IADL course, also at CCRI. After you are done with the training,

  you can join the registry to help consumers see that you are ready to work in their home. You may also find an IP consumer through word of mouth. Since you have had all the trainings, you can work for multiple consumers without having them decide whether to train you in the home or at CCRI. But remember that each consumer will be training you to their own needs no matter which path you take.

The paths of training for the IP Program are detailed at the end of this handbook and you will have the opportunity to hear more about them and ask questions in the Mandatory Orientation Training.

What is a Fiscal Intermediary (FI)?

The FI acts as the human resource department for the IP Program. The group helps you navigate thru the process of becoming a PCA. There is training and paperwork to be completed to be able to do this work and this group is here to help you get to work.

The FI helps you by:

- Signing you up for and assisting in the Mandatory

Orientation Training

- Showing you how to get the National Criminal Background Check done
- Signing you up for the CPR certification
- Monitoring that you obtain and maintain CPR certification
- Lining up formal training for you when the consumer (who you know) wants you to have
- Making sure you finish the formal training within 90 days of when you started
- Guiding the consumer through the procedures and forms to use when hiring or changing PCAs
- Obtaining Workers Compensation Insurance
- Advising you of your rights as employees
- Helping you understand how to fill out timesheets
- Crosschecking your timesheets to the approved ISP
- Issuing your payroll checks based on the consumer's instructions and the approved ISP
- Performing all other necessary payroll functions
- Checking your driving record if the ISP allows for driving the consumer
- Crosschecking that there are no Office of Inspector General (OIG) reports on PCAs at every payroll run
- Instructing and monitoring the usage of Electronic Visit Verification (EVV) as required by Medicaid

What is the Service Advisory (SA)?

The SA:

- Helps the consumer with their application for LTSS
- Assesses the personal care needs of the consumer
- Helps the consumer to pick the right program
- Guides the consumer to the PCA registry if she/he does not have a PCA in mind

- Calls the consumer monthly to check on how everything is going
- Performs quarterly in-home evaluations. One of the evaluations is unannounced
- Answers calls from the consumer or from you
- Lines up a different program for the consumer when the IP
  program is not working
- Records all notes that help with the care of the consumer
- Monitors for any fraud or abuse situations and reports on possibility of a fraud or abuse issue
- Works with the FI to develop the ISP
- Identifies whether the PCA, that will work with the consumer, should be able to drive the consumer to non-emergency medical appointments and other community areas

Who is the service advisory (SA) for the IP?

Seven Hills Rhode Island
www.sevenhills.org
401-229-9700

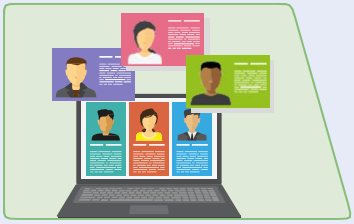
Who is the fiscal intermediary (FI) for the IP?

Public Partnerships (PPL)
www.publicpartnerships.com
1-833-976-1856
TTY
1-800-360-5899

When a consumer doesn't have a PCA in mind

Steps a consumer might take to find a PCA

1. Find an interested person or PCA



2. Interview applicants.

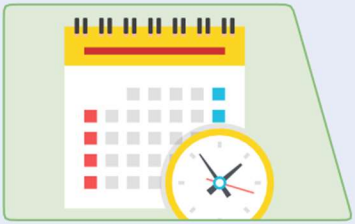
3. Check references.

4. Select a PCA.

After a consumer finds a PCA and that PCA goes through the training, passes the National Criminal Background Check, and works with the FI on the paperwork, the PCA will be ready to work in the consumer's home. At that point, the consumer will perform the employer role.

To be an employer, the consumer takes the following steps:

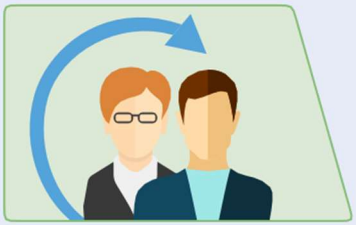
5. Creates your schedule



6. Let you know what and how to do things.

7. Decides who trains.

8. Supervises your work.



9. Provide feedback to you.

10. Keeps track of the hours you work.

11. Approves the timesheets.

12. Talks to the FI, if there is a need to dismiss to PCA

How you might be hired as a PCA

The consumer will use her/his network of friends and family to find a PCA

- ✓ If the consumer has someone in mind, they will ask the potential PCA to get in touch with the FI to start the process.
- ✓ The consumer might use word of mouth by letting people know she/her is looking to hire someone for personal assistance. Family and friends may know of someone who is looking for work as well.
- ✓ The consumer will be required to have an emergency backup plan so that they always have coverage.

Through the Registry of fully trained PCAs

- ✓ The IP registry is building as the program begins. It is located on the www.eohhs.ri.gov website.
- ✓ The Registry will list PCAs, not by name or physical address, but by descriptions, characteristics, times available, and areas available to work in.
- ✓ If you are interested in being on the Registry, remember that you must complete and pass the formal trainings and keep your CPR/First Aid up to date.
- ✓ You will be listed on the Registry only if you have expressed interest to be listed.
- ✓ The FI will collect the information that you wish to post on the Registry. Think about how you want to describe yourself. Perhaps, you must work in a smoke free or pet free environment, or you can

work nights and weekends, etc. The FI has the form you will fill out for the posting information. Details regarding the Registry are at the back of this handbook.

- ✓ Your identity on the Registry will be held confidential. If a consumer chooses you to be a potential PCA, she/he will contact the FI with the code that is being used to identify you. The FI will give the consumer your name and contact information so that an interview can be set up. These steps are meant to protect the consumer and you from posting too much information on the Internet.

The Interview processes

- ✓ The consumer will interview you if she/he does not know you.
- ✓ Be prepared to answer questions about why you are interested in being a PCA.
- ✓ Since the pay rate is established by the state, there is no need to ask what you will be paid.
- ✓ You might discuss the hours that the consumer needs and the level of care.

In-Person Interviewing

- ✓ If the consumer does not know you but is interested in you as a candidate, she/he will want to have an interview in a public place or by phone if they cannot move out of the house.
- ✓ It is encouraged that there be a second person, close to the consumer, participating in the interview process.

Telephone Interviewing

- ✓ The consumer can conduct a telephone interview.
- ✓ Again, be ready to answer questions regarding why you are interested in being a PCA, the hours you can work, days of the week available, etc.

Your references

- ✓ Be ready to supply references to the consumer so that she/he can learn more about you.

Hiring requirements that the FI will be checking

- ✓ You must be 18 or over.
- ✓ You must be able to work in this country legally.
- ✓ You must pass the National Criminal Background Check. Certain disqualifying results may be waived by the consumer. Other disqualifying results may not be waived. (see Appendix)
- ✓ You cannot work as a PCA for the consumer if you are a spouse, legal guardian, or a Financial Power of Attorney to that consumer.

Once you are hired by the consumer

- ✓ The tasks you will be expected to do will be reviewed.
- ✓ The consumer will create a job description for you. This helps to clarify the work you will do.
- ✓ The goals the consumer has will be discussed.
- ✓ The house rules will be reviewed so that no confusion is created, and everyone is comfortable.

Setting up the Schedule

Establishing the work plan

- ✓ The consumer will set the days and times she/he needs you to work. This should not be a surprise as it will have been discussed in the interview.
- ✓ A plan will be discussed on how notification will happen when you cannot work or will be late. It is important that you take note of what is said here because the consumer needs you to be there when you say you will be.

Reviewing your work

The consumer will review your work

- ✓ She/he will make sure you are doing everything on the task list.
- ✓ She/he will help you work on improving where there might be some confusion.
- ✓ The FI is there to work on helping both parties clarify anything that is not clear so that the working relationship will be positive.

Communications is key with FI, SA and PCA

- ✓ **Listen** – Good communication means that all

parties understand each other. If you are doing all of the talking, you will not know if you are being understood. Even when you have something important to say, you still need to hear if the other person understands the point you are trying to make. Listening may also provide you with information you did not previously have and the opportunity to learn new things.

- ✓ **Try to understand** – One of the best ways to get a person to listen is to listen and understand first. If you understand the other person's point of view, you have a better chance of responding in a clear and helpful manner.

Things to keep in mind as a PCA

The FI is the HR representative

- ✓ It is very important to remember that you cannot begin working for the consumer until the FI says it is OK; otherwise, you won't be paid.
- ✓ You cannot take on the role of a representative for the consumer. If the consumer needs a representative, she/he needs to find someone else.

Performing tasks outside of the ISP

- ✓ There might be times when the consumer could ask you to perform additional tasks that help them continue to live in the community. Remember the following:
  - The task cannot pose a health or safety risk to you
  - You should feel comfortable and confident in the ability to perform the task
  - The task must be legal

- The task cannot be considered fraudulent
- The consumer cannot ask you to support or take care of someone else

Know your boundaries

- ✓ The consumer will establish rules during her/his training. The rules could be physical boundaries like "do not go in the spare bedroom" or "do not use my home phone".
- ✓ Know that personal questions are an invasion of someone's privacy. These are boundaries too.
- ✓ Know that you cannot receive gifts or money from the consumer.

Be respectful

- ✓ Always be respectful of your consumer and her/his representative if she/he has a representative.
- ✓ As the consumer the name they wish to be called by.
- ✓ Always act professionally by:
  - » showing up on time and ready to work
  - » dressing nicely and being well groomed
  - » keeping information about you and your family private
  - » avoid personal cell-phone use while you are working
- ✓ If you need help to maintain your professionalism, reach out to the FI for help and suggestions.

Know your rights to work in a safe environment

Your rights to be free from harassment

The consumer is required by law to maintain a harassment-free workplace. There are two types of workplace harassment — creating a hostile work environment and quid pro quo

harassment. Please visit the United States Department of Labor's Civil Rights Center website for more information: https://www.dol.gov/agencies/oasam/civil-rights-center/internal/policies/workplace-harassment/2012.

Quid pro quo harassment is the harassment of any male or female in the workplace or in a professional or social setting by another male or female involving lewd or obscene comments or unwanted sexual advances or inappropriate acts.

Examples of behaviors that may contribute to an unlawful hostile or quid pro quo environment include things such as:

- Discussing sexual activities
- Telling off-color jokes about race, sex or disability
- Unnecessary touching
- Making comments about someone's physical attributes
- Using demeaning or inappropriate terms or epithets
- Using indecent gestures
- Using crude language
- Sabotaging the victim's work
- Being physically hostile
- Displaying sexually suggestive or racially insensitive pictures

For your protection

- If the ISP requires that the consumer supply gloves, masks and/or gowns, these must be supplied to protect you. (gloves are required for toileting)
- Practice universal precautions to prevent the spread of disease.
- Notify the SA if these are not being supplied

What if I think the consumer is being abused?

Even though it may be difficult to talk about, it is important to discuss how to identify abuse in the home and report it.

- **Physical Abuse** – Includes hitting, slapping, pinching, kicking and other forms of rough treatment.

- **Verbal Abuse** – Includes any use of spoken or written words or gestures that are meant to insult or attack anyone.

- **Psychological Abuse** – Includes actions or statements that are meant to humiliate or threaten anyone.

- **Sexual Abuse** – Includes sexual annoyance, touching, fondling, and/or attack by anyone.

- **Neglect** – Any form of neglect by anyone in the home must be reported.

Take Action

- For the IP program, you are responsible for reporting health, safety or service needs, concerns to the SA to ensure continued proper care. Contact your SA if you notice that health, safety or service needs are changing for the consumer.

- **In RI all individuals are required to report concerns regarding the any form of abuse of others. Call the FI to report immediately. You are legally required to report abuse or**

suspected abuse 24 hours per day, 7 days per week. In addition to notifying the FI, call the emergency numbers as listed.

Emergency phone numbers:

- For elder abuse or self-neglect (60 years of age & older), call the Office of Healthy Aging, Protective Services Unit 401-462-0555.
- For adult abuse or self-neglect (under 60 years of age), call 401-462-2629.
- For fraud, waste, program abuse, call the Executive Office of Health & Human Services, Office of Program Integrity 401-462-6503.

How and when do I get paid?

The FI pays you on behalf of the consumer based on the timesheets approved by the consumer, EVV records and the SA's case records.

You report the:

- ✓ Specific dates worked
- ✓ Exact start time each day
- ✓ Exact stop/end time each day
- ✓ Total number of hours worked during the service period.

Note that PCAs who live in in the same household as the consumer do not report on EVV.

What is a service period?

A service period is a specific block of time you are authorized to work. You cannot work more than 40 hours a week in the program for the same consumer. A service period equals 14 days (every two weeks). Each week starts at midnight Sunday and ends at 11:59 p.m. Saturday.

When do I get paid?

The FI provides you with a payroll calendar that shows pay dates and when timesheets are due. You must correctly fill out the timesheet and the consumer must review it and sign in. The timesheet will be returned to you to fix if it has missing or incorrect information. This may delay when you get paid.

Can I get paid for mileage?

If the FI and SA approves you to provide transportation, you can transport the consumer to activities that fall within the scope of services, such as taking the consumer to the grocery store, but general trips cannot receive mileage

reimbursement. You can transport the consumer to non-emergency medical appointments and for that service you may submit mileage to the State's transportation vendor, MTM. Instructions for how the MTM debit card registration works can be found at the back of the handbook and by calling MTM. You cannot take the consumer out to the casino, liquor store, etc. The FI will ensure you have a valid driver's license.

Note that you cannot transport the consumer in their own car. Any transportation must be approved by the FI and SA and must be in your own car. You cannot drive the consumer's car.

What can I not be paid for?

- ✓ When the consumer is out of the State of Rhode Island
- ✓ When the consumer is out of the country
- ✓ When the consumer is in the emergency room
- ✓ When the consumer is admitted to the hospital
- ✓ When the consumer is admitted to a nursing home
- ✓ When the consumer is admitted to any medical facility
- ✓ When the consumer is at an adult day care center
- ✓ When the consumer is receiving therapies or other insurance covered services

It is considered Medicaid fraud and a crime if you turn in a timesheet for time you did not really work.

Medicaid Fraud ****

Medicaid Fraud is defined as making a false statement, representation of material fact, submitting a claim or causing a submission to obtain some benefit or payment involving Medicaid money for which no entitlement would otherwise exist. This can be done for the benefit of oneself or another party and includes obtaining something of value through misrepresentation, concealment, omission or willful blindness of a material fact.

You, as a PCA, are responsible for reporting Medicaid Fraud.

You, as a PCA, are expected to not commit Medicaid Fraud.

For More Information

For more information about the Mandatory Orientation Training, National Criminal Background Check, CPR/First Aid, ADL/IADL Training, questions regarding your paycheck, or the Registry contact the fiscal intermediary (FI) below:

Public Partnerships (PPL)
www.publicpartnerships.com
1-833-976-1856
1-800-360-5899 (TTY)

As a PCA, remember that you work closely with this FI, for employment records.

You will also work closely with the Service Advisor (SA) that your Consumer/Employer selected for the IP Program. The SA for the IP Program is listed below:

Seven Hills Rhode Island
www.sevenhills.org
401-229-9700

Contact the SA connected to your consumer when you have any issues or concerns regarding her/him. You have a team that is here to help.

You can get this manual in other languages, large print, braille or a format you prefer. To request a different printing of this manual or for more information about the program in general, email or call the following:

Email: ohhs.IP@ohhs.ri.gov

Phone: 1-401-462-6634

Appendix A – Definitions

Activities of daily living skills (ADLs) means everyday routines generally involving functional mobility and personal care, including but not limited to, bathing, dressing, eating, toileting, mobility and transfer.

Applicant means new applicants to be determined for Medicaid eligibility.

Assessment is a meeting between the consumer, and/or their representative, and the Service Advisor. The assessment evaluates Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) to determine consumer needs. Assessments also help to identify services, equipment, home modifications and other services in the community that may help the consumer to increase their independence within the community. Assessments occur at the beginning of the program and quarterly thereafter while the consumer is enrolled in the Independent Provider Program. Either the consumer or representative may request an assessment sooner if their situation has changed and there is either an increased or decreased need for assistance. The Service Advisor may also perform an assessment sooner for any life changes where there could be a possible increase or decrease in needs assistance.

Case management services means the coordination of a plan of care and services provided at home to individuals with disabilities who are over the age of eighteen (18) or elders aged sixty-five (65) or over who meet either a high or highest level of care. Such programs shall be provided in the person's home or in the home of a responsible relative or other responsible adult, but not provided in a skilled nursing facility and/or an intermediate care facility.

Consumer means the individual, also referred to as the beneficiary, client or participant, who utilizes services in any of the self-directed models.

Consumer Direction is an approach where participants manage their own personal care services. Consumers assess needs, decide

how their needs are to be met, and monitor the quality of the services they receive.

Critical incident means any actual or alleged event or situation that creates a significant risk of substantial or serious harm to the physical or mental health, safety or well-being of a consumer.

Electronic Visit Verification (EVV) is a method used to verify that home healthcare visits are occurring by collecting data electronically about the visit.

Environmental modifications are defined as those physical adaptations to the home of the participant or the participant's family as required by the participant's service plan, that are necessary to ensure the health, welfare and safety of the participant or that enable the participant to attain or retain capability for independence or self-care in the home and to avoid institutionalization, and are not covered or available under any other funding source. A completed home assessment by a specially trained and certified rehabilitation professional is also required. Such adaptations may include the installation of modular ramps, grab-bars, vertical platform lifts and interior stair lifts. Excluded are those adaptations that are of general utility and are not of direct medical or remedial benefit to the participant. Excluded are any re-modeling, construction, or structural changes to the home, i.e. (changes in load bearing walls or structures) that would require a structural engineer, architect and /or certification by a building inspector.

a. Adaptations that add to the total square footage of the home are excluded from this benefit. All adaptations shall be provided in accordance with applicable State or local building codes, and prior approval on an individual basis by EOHHS, Office of Durable Medical Equipment, is required.

b. Items should be of a nature that they are transferable if a participant moves from her/his place of residence.

Fiscal intermediary services (FI) for the Independent Provider Program means services that are designed to assist participants in utilizing hours as outlined in the Individual Service Plan and to

facilitate employment of personal assistance staff by the participant. The FI also functions as the agency to assist in the management of financial and employer responsibilities.

Home delivered meals means the delivery of hot meals and shelf staples to the participant's residence. Meals are available to individuals unable to care for their nutritional needs because of a functional dependency/ disability and who require this assistance to live in the community. Meals provided under this service will not constitute a full daily nutritional requirement. Meals must provide a minimum of one third of the current recommended dietary allowance. Provision of home delivered meals will result in less assistance being authorized for meal preparation for individual participants, if applicable.

Home Modifications are equipment and/or adaptations to a consumer's residence to enable the consumer to remain in her/his home or place of residence, and ensure safety, security, and accessibility.

Individual service plan (ISP) means a plan that provides details of supports, activities, and resources required for the consumer to achieve personal goals. The ISP is developed to articulate decisions and agreements made during a person-centered process of planning and informational gathering.

Instrumental activities of daily living (IADL) means activities related to living independently in the community, including but not limited to, meal planning and preparation, managing finances, shopping for food, clothing, and other essential items, performing essential household chores, communicating by phone or other media, and traveling around and participating in the community.

Mandatory Orientations means training required by EOHHS for all PCAs participating in the Independent Provider Program. Mandatory Orientations include program overview and structure, policy and procedure explanation, review of ethics, accountability, HIPAA and Electronic Visit Verification (EVV), coverage of abuse and neglect, IP PCA scope of work and excluded duties, infection control and safety.

Medical necessity or Medically necessary services means medical, surgical, or other services required for the prevention, diagnosis, cure or treatment of a health-related condition including services necessary to prevent a detrimental change in either medical or mental health status.

Minor environmental modifications mean minor modifications to the home that may include grab bars, versa frame (toilet safety frame), handheld shower and/or diverter valve, raised toilet seats and other simple devises or appliances such as eating utensils, transfer bath bench, shower chair, aides for personal care and standing poles to improve home accessibility adaptation, health or safety.

Nonmedical means not involving, relating to, used in, or concerned with medical care or the field of medicine.

Participant directed goods and services means services, equipment or supplies not otherwise provided through Medicare or Medicaid, that address an identified need and are in the approved Individual Service Plan (including improving and maintaining the individual's opportunities for full membership in the community) and meet the following requirements: the item or service would decrease the need for other Medicaid services; AND/OR promote inclusion in the community; AND/OR the item or service would increase the individual's ability to perform ADLs or IADLs; AND/OR increase the person's safety in the home environment; AND, alternative funding sources are not available. Individual Goods and Services are purchased from the individual's self-directed budget through the fiscal intermediary when approved as part of the ISP. Examples include a laundry service for a person unable to launder and fold clothes or a microwave for a person unable to use a stove due to her/his disability. This will not include any good/service that would be restrictive to the individual or strictly experimental in nature.

Personal Care Aide (PCA) is a person who provides personal care services to the Independent Provider Consumer. Certain people are not allowed to be the Personal Care Aide including the following; a spouse, legal guardians, financial power of attorneys, and individuals with certain criminal convictions.

Personal Care Aide (PCA) Services mean the provision of direct support services provided in the home or community to individuals in performing tasks they are functionally unable to complete independently due to disability, based on the Individual Service Plan. Personal Care Aides (PCAs) Services may include but are not limited to:

a. Participant assistance with activities of daily living, such as grooming, personal hygiene, toileting, bathing, and dressing.

b. Assistance with monitoring physical condition.

c. Assistance with preparation and eating of meals (not the cost of the meals itself).

d. Assistance with housekeeping activities (bed making, dusting, vacuuming, laundry, grocery shopping, cleaning).

e. Assistance with transferring, ambulation; use of special mobility devices; assisting the participant by directly providing or arranging transportation (If providing transportation in the Independent Provider Program, the PCA must have a valid driver's license and liability coverage as verified by the FI.)

Personal emergency response (PERS) means an electronic device that enables certain individuals at high risk of institutionalization to secure help in an emergency. The individual may also wear a portable "help" button to allow for mobility. The system is connected to the person's phone and programmed to signal a response center once a "help" button is activated. This service includes coverage for installation and a monthly service fee. Providers are responsible to insure the upkeep and maintenance of the devices/systems.

Registry means the official list, maintained by EOHHS or its designee, of qualified Personal Care Aide(s) (PCAs) who are available to provide services. Consumers may utilize the registry when hiring PCAs through the Independent Provider Program.

Representative is a person designated by the Independent Provider Consumer to assist him/her in managing some or all the

requirements of the program. A Representative cannot be paid to provide this assistance. The representative also cannot be paid to provide direct care or hands on care.

Self-directed means a consumer-controlled method of selecting and providing services and supports that allows the individual maximum control of the home and community-based aid services and supports, with the individual acting as the employer of record with necessary supports to perform that function, or the individual having a significant and meaningful role in the management of a provider of service when the agency-provider model is utilized. Individuals exercise as much control as desired to select, train, supervise, schedule, determine duties, and dismiss the aid care provider.

Service Advisory Agency (SA) means an agency that will assess service needs, assist with planning what services are needed and how to receive them, be an additional resource to the consumer, representative, and/or family to promote safety and quality of care

Service advisement team means a team, consisting of the Service Advisor, a Nurse and a Mobility Specialist, that will focus on empowering participants to define and direct their own personal assistance needs and services. The Service Advisor guides and supports, rather than directs and manages the participant through the service planning and delivery process. A portion of the participant's monthly budget is set aside to pay the agency for the services it provides.

Special medical equipment or **Minor assistive devices** means the following:

a. Devices, controls, or appliances, specified in the plan of care, which enable participants to increase their ability to perform activities of daily living;

b. Devices, controls, or appliances that enable the participant to perceive, control, or communicate with the environment in which they live; including such other durable and non-durable medical equipment not available through the

participant's medical insurance that is necessary to address participant functional limitations.

Supports for consumer direction or **Supports facilitation** means empowering participants to define and direct their own personal assistance needs and services, guides and supports, rather than directs and manages, the participant through the service planning and delivery process.

Taxes are the fees deducted from the consumer's monthly budget that are required to be paid on behalf of employees (PCAs):

- FICA (Federal Insurance Contributions Act): Finances care for the aging, disabled, and survivors. Including funding for Medicare for people who cannot afford medical insurance.
- FUTA (Federal Unemployment Tax Act): Finances employment programs at the federal level.
- SUTA (State Unemployment Tax Act): Finances employment programs at the state level.
- RITDI (Rhode Island Temporary Disability Insurance): Provides income to employees who cannot work for a period of time due to illness or injury.

Workers' Compensation Insurance are funds that provide for monetary awards paid to individuals who are injured, disabled or killed on the job. Workers' Compensation Insurance is a cost of employment paid by the participant from her/his monthly budget.

Independent Provider Program
Required National Criminal Background Checks

The following crimes, upon conviction, can disqualify a potential PCA from employment:

- murder,
- voluntary manslaughter,
- involuntary manslaughter,
- first-degree sexual assault,
- second-degree sexual assault,
- third-degree sexual assault,
- assault on persons sixty (60) years of age or older,
- assault with intent to commit specified felonies (murder, robbery, rape, burglary, or the abominable and detestable crime against nature),
- felony assault,
- patient abuse,
- neglect or mistreatment of patients,
- burglary, first-degree arson, robbery,
- felony drug offenses, felony larceny, or felony banking law violations,
- felony obtaining money under false pretenses,
- felony embezzlement,
- abuse, neglect and/or exploitation of adults with severe impairments, exploitation of elders, or
- a crime under section 1128(a) of the Social Security Act (42 U.S.C. § 1320a-7(a))

When no disqualifying information is found, the BCI Unit will inform the potential PCA and the Fiscal Intermediary (FI) of this fact.

When there is an incomplete NCBC result returned, the BCI Unit will inform the potential PCA, in writing, without disclosing the nature of the incomplete result when a charge or charges appear on the record without a disposition. In addition, the BCI Unit will inform the FI, in writing, that an incomplete NCBC result was returned, without disclosing the nature of charge or charges that appear on the record

without disposition.

When disqualifying information is discovered in a potential PCA's NCBC, the BCI Unit will inform the potential PCA, in writing, without disclosing the nature of the disqualifying information, that there is disqualifying information in their NCBC.

A potential PCA with disqualifying or incomplete information in their NCBC may request a copy of the full NCBC report from the BCI Unit at the Rhode Island Office of the Attorney General.

To obtain a copy of the NCBC, the prospective PCA must directly contact the Bureau of Criminal Identification of the Office of the Attorney General, at 4 Howard Ave, Cranston, to obtain a copy of the NCBC record containing disqualifying information or an incomplete record that may contain possibly disqualifying information.

The consumer must make a judgment regarding the employment of the potential PCA if such disqualifying information in the NCBC does not fall under a Category I offense.

Any conviction for an offense listed under Category I disqualifies an individual from serving in a caring capacity as a PCA in this Program.

Category I offenses are convictions for:

- murder, voluntary manslaughter, involuntary manslaughter;
- first-degree sexual assault;
- second-degree sexual assault;

- assault on persons sixty (60) years of age or older;
- assault with intent to commit specified felonies (murder, robbery, rape, burglary, or the abominable and detestable crimes against nature);
- first-degree arson;
- crimes under section 1128(a) of the Social Security Act 42 USC § 1320a-7(a);
- criminal offense related to person's involvement in any program under Medicare and Medicaid;
- abuse, neglect and/or exploitation of adults with severe impairments, exploitation of elders;

- felony domestic violence committed less than five (5) years ago;
- car-jacking;
- felony assault committed less than five (5) years ago; and/or
- felony battery committed less than five (5) years ago.

Category I offenses cannot be waived by the consumer.

Category II offenses are convictions for:

1. Transportation for indecent purposes;
2. Felony assault committed over five (5) years ago;
3. Felony battery committed over five (5) years ago;
4. Felony drug offense committed less than five (5) years ago;
5. Robbery;
6. Breaking & entering;
7. Burglary;
8. Illegal possession of a firearm;
9. Misdemeanor domestic assault;
10. Third-degree sexual assault;
11. Circulation of obscene publications & shows;
12. First or second-degree arson; and/or
13. Prior employment history of child or client abuse, neglect or mistreatment.

If the consumer chooses to employ a potential PCA who is found to have disqualifying information, listed in **Category II** offenses, the consumer shall document in writing to the FI, that they have considered all of the following factors:

- The circumstances, severity and duration of the crime;
- Whether the victim of the crime was elder adult or an individual with a developmental or other disability;
- length of time that has elapsed since the commission of the crime for which the individual was convicted;
- length of time that has elapsed since the completion of any imposed sentence;
- length of time with no further convictions of crimes;

- the individual's conduct in seeking and actively engaging in rehabilitation;
- the individual's ability to explain their remorse for the crime and/or efforts to prevent commission of such a crime in the future;
- the extent to which the crime bears a direct impact on performing the job for which the individual is applying;
- any expert opinions of health care providers and clinicians who have worked with the individual if the individual chooses to share such confidential information; and
- any work history, education and job training before and after the commission of the crime.

Independent Provider Program
How the Prospective PCA gets the National Criminal Background Check

R.I. General Laws § 40-8.14-4(c)(5) requires perspective independent provider personal care aides (PCAs) to undergo a national criminal background check (NCBC).

If you would like to provide services to a consumer in the Independent Provider Program, you must undergo a NCBC.

To obtain a NCBC:

Please bring this to the Bureau of Criminal Identification of the

Office of the Attorney General, RI Office of Attorney General,
4 Howard Avenue, Cranston, RI (BCI Unit).

The cost for a NCBC is $35.00.

Forms of payment include check, money order, or credit cards (**cash not accepted**). Please make any check payable to "BCI".

Please note: a processing fee of two (2) percent plus fifty (50) cents will be charged per credit card transaction, therefore, the additional processing fee when using a credit card is $1.20 in addition to the $35 cost for a NCBC.

Please bring a valid form of identification:

- Valid state issued driver's license
- Valid state issued identification card
- Valid United States passport

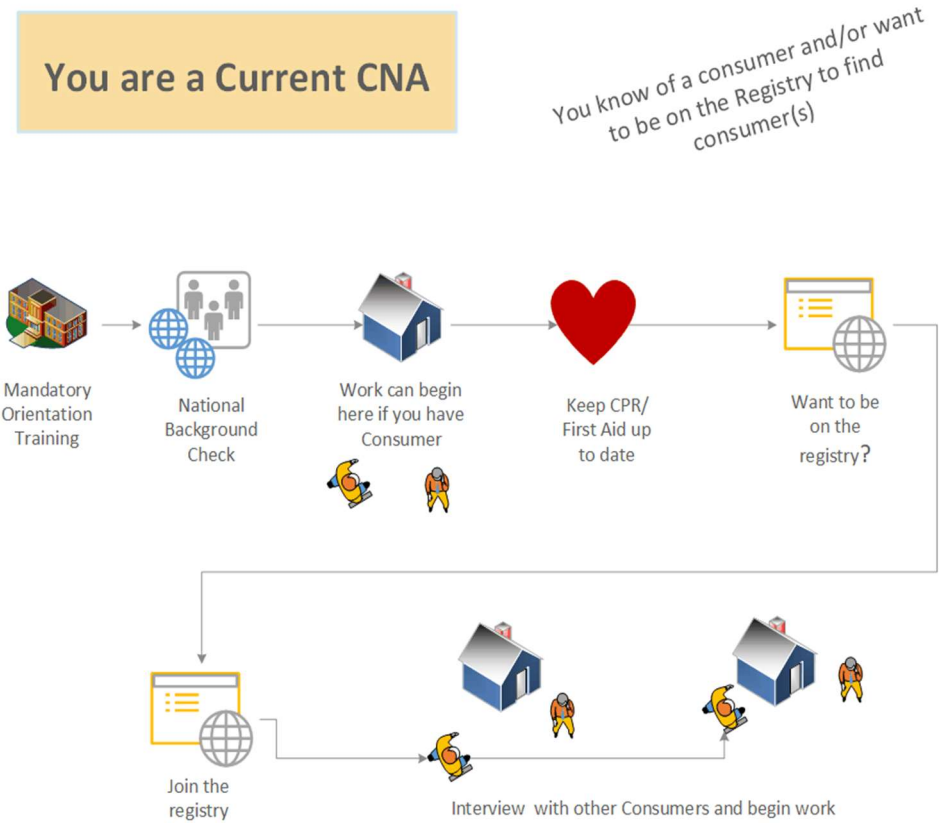
How long will it take to process a NCBC?

The NCBC should be processed on the same day. If you have a number of disqualifying factors, this may delay the processing of the NCBC.

NOTE: Be sure to write your email address on the fingerprint form so you can get the results.

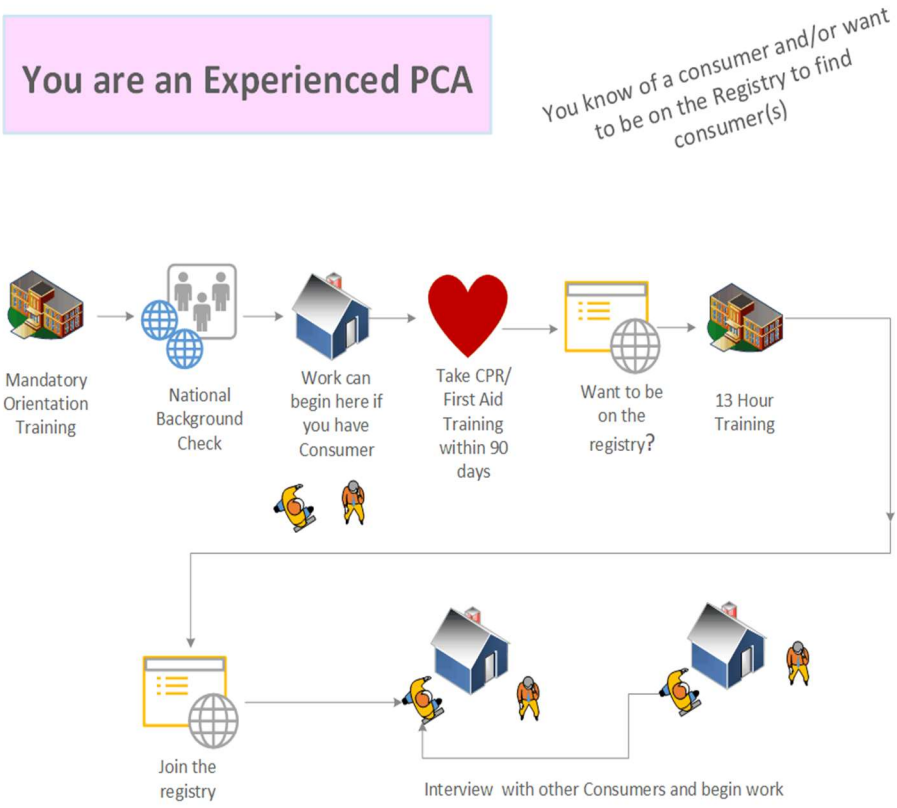
Appendix C – Training Options for the PCA #1

(note: A CNA in the IP Program must operate as a PCA while in the home)

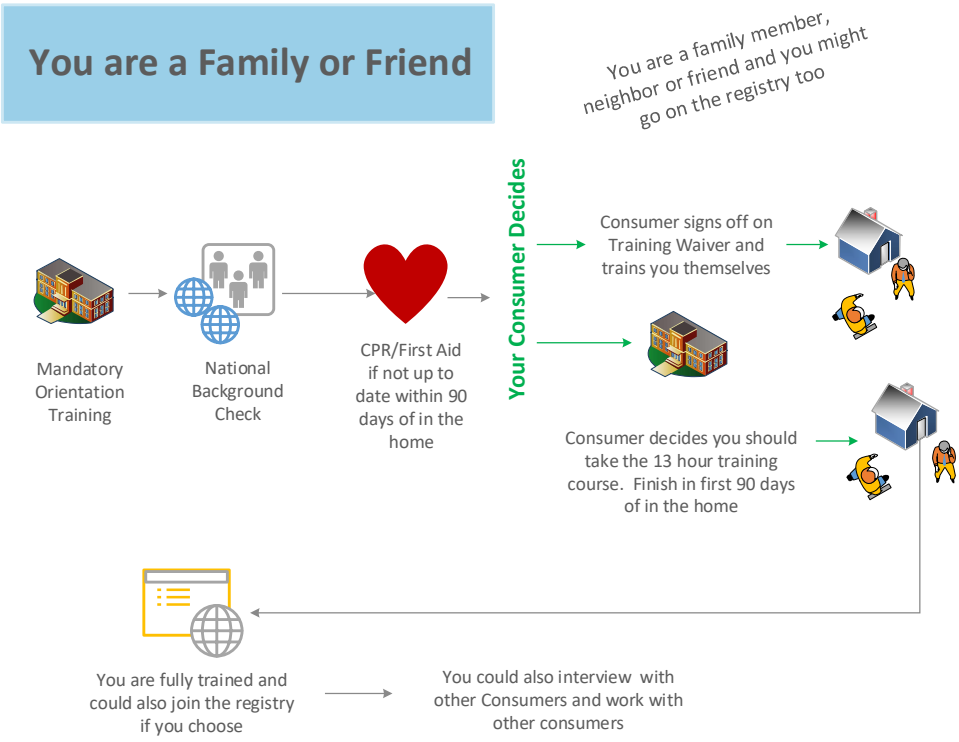


Appendix C – Training Options for the PCA #2

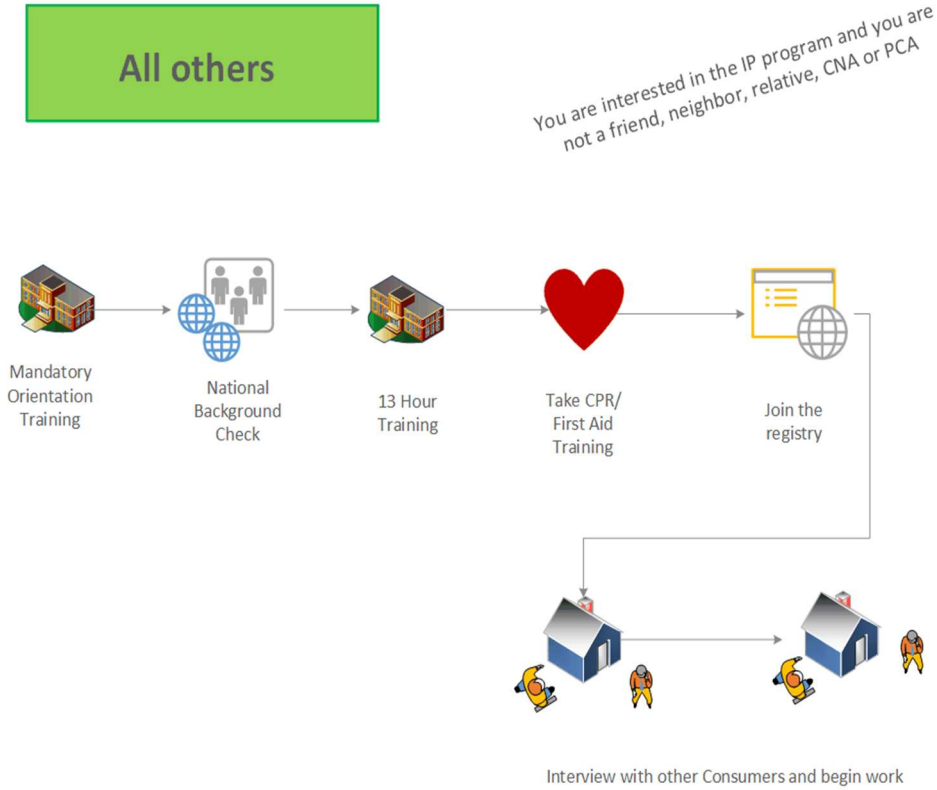
(An Experienced PCA is not an IP PCA)



Appendix C – Training Options for the PCA #3



Appendix C – Training Options for the PCA #4



Appendix D – Activities of Daily Living (ADLs) Allowed Services Under IP:

Aid in Bathing: personal hygiene & grooming, foot care, foot soak, applying foot lotion, shampoo hair, comb/brush, shaving.

Aid in Dressing: dressing & undressing; apply lamb's wool & elastic stockings.

Aid in Transferring: movement & mobility – moving from bed to chair.

Aid in Toileting: continence-related tasks including control & hygiene.

Aid in Eating: preparing food & feeding.

Aid in walking/climbing stairs.

Aid in applying dry heat & cold packs to intact skin.

Empty catheter bag, commode, urinal; and

Assist with bowel/bladder retraining

Appendix E – Instrumental Activities of Daily Living (IADLs) Allowed Services Under IP:

Aid in grocery shopping;

Aid in cooking;

Assistance with using the phone & looking up phone numbers;

Assist in housework: cleaning, dusting, vacuuming, laundry;

Assistance in using public transportation and/or arranging for transportation

Assistance in scheduling appointments; and reminding consumer to take medication.

Appendix F – Activities of Daily Living (ADLs) Services Not Allowed Services Under IP:

Sterile dressing application;

Wound care;

Broken Skin Care (i.e. Any treatment to non-intact skin;

Gastric lavage or gavage (including any tube feeding);

Injections;

Vaginal Irrigations;

Cutting toenails or fingernails for diabetics;

Cutting toenails;

Giving advice on medical/nursing matters;

Changing Foley catheter;

Tracheostomy tube care;

Oxygen application;

Medication distribution and/or organization;

Total consumer lift and/or transfer;

Mechanically assisted equipment usage;

Recording of urine output with exception of none and/or changes in urine color.

Appendix G – Instrumental Activities of Daily Living (ADLs) Services Not Allowed Services Under IP:

Transportation for
Emergency Medical needs;

Transportation to
non-daily-essential
activities
(i.e. casino, liquor store, etc.)

Appendix H – Registry, PCA descriptions

PCA Code	City or Town of Residence	Gender	Age Range 18-25, 26-40, 41-59, 60+	Do you drive?	Distance willing to travel in miles	Languages spoken	Is a CNA? Yes or No	Experience in care giving

Number of Hours avaiable to provide PCA care	Days of the week available	Times of day available on which days	Are you available for Emergencies? Yes or No	Must you work in a smoke free environment? Yes or No	List pets you are allergic to, if any	Any other allergies that would affect PCA work?	Short Statement

Appendix I – Registry on EOHHS Website

PCA Code	City or Town of Residence	Gender	Age Range 18-25, 26-40, 41-59, 60+	Do you drive?	Distance willing to travel in miles	Languages spoken	Is a CNA? Yes or No	Experience in care giving	Number of Hours avaiable to provide PCA care	Days of the week available	Times of day available on which days	Are you available for Emergencies? Yes or No	Must you work in a smoke free environment? Yes or No	List pets you are allergic to, if any	Any other allergies that would affect PCA work?	Short Statement
A242	East Providence	Female	18-25	Y	25	English, Portuguese	Yes	worked 2 years as a Cna	10	M, W, F	2-6pm	No	No	Cat	latex	I have taken all of the training required for the PCA position and I am so interested in the concept of self-direction
B52	Warwick	Male	60+	N	60	English, German, French, Italian	No	none	40	M,T,W, TH, F, ST, SD	anytime	Yes	Yes	None	none	I like people and I grew up always having a grandparent around. I think I would be a great assistant for you.
A756	Block Island	Female	26-40	Y	10	English	No	have taken care of my mother	40	M,T,W, TH, F, ST, SD	Mornings	Yes	No	Birds	wool	I like to take long walks on the beach on Block Island. I have noticed there are fewer young people in the winter these days here on the island. I think I can be helpful for those that need care and have no one to help them.

Appendix J – MTM Reimbursement Form

To setup a re-imbursement for mileage when driving your car to bring your consumer to non-emergency medical appointments only, you can register with MTM for a debit card for mileage re-imbursement. To do so,

Visit:
https://www.mtm-inc.net/rhode-island/recipients/
for more information.

You will need to register with MTM to start this process. Begin by calling:

1-888-513-0703

Once registered you will use the MTM Reimbursement Trip Log. An example of the log forms follows.

Call MTM with any questions on the submission of mileage and the re-imbursement process.

MTM

Reimbursement Trip Log

Mail, fax, or email completed logs to:

MTM, Attention: Trip Logs
16 Hawk Ridge Dr.
Lake St. Louis, MO 63367

Fax: 1-888-513-1610

Email: payme@mtm-inc.net

Instructions:

- You must call MTM on or before the day of your medical appointment. The number to call can be found on the back of your card or by calling member services. You will receive a trip number during this call. You will need to write the number down on this Trip Log. To be reimbursed, you must submit a Trip Log for all trip requests.
- Submit Trip Logs no more than 60 days past the date of the first appointment.
- Any healthcare professional at the facility can sign the Trip Log. *This includes nurses, therapists, physician assistants, or nurse practitioners.* It doesn't have to be the doctor.
- We suggest you make copies of your blank Reimbursement Trip Log. If you need a new copy of this form, you may call and request one be mailed to you, or you may download this form at www.mtm-inc.net.
- A one-way trip is from your home to the appointment. A round trip is from your home to the appointment and then back home. For trips with more stops, such as an extra trip from the first appointment to a second appointment before going back home, please enter each trip leg on a separate line, for example:
  - 1st leg- home to first doctor
  - 2nd leg- first doctor to second doctor
  - 3rd leg- second doctor to home
- If you don't have a Trip Log, ask your healthcare provider for a note on their facility letterhead. The note should state that you were seen and the date of the appointment. Once you have a new trip log, attach the note from your healthcare provider in place of a signature.
- Incomplete forms cannot be processed. It is your responsibility to complete this form correctly.
- Keep a copy of your Trip Log for your records.
- **Questions about the Reimbursement Process?** Please call: **1-888-513-0703.**

Member Info	First Name:	Last Name:	Medicaid #:
	Address:		Phone:
	City:	State:	Zip:

Payment Info	Make payment to:	Relationship to Member: ☐ Self ☐ Other:	Date of Birth:
	Address:		Phone:
	City:	State:	Zip:

Appendix J – MTM Reimbursement Form (continued)

MTM — **Reimbursement Trip Log (Continued)**

Trip #1	Trip Number (Call MTM for this before your trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where you were picked up: ☐ Home ☐ Other:			Healthcare Provider Phone:
	Healthcare Provider Name:	Healthcare Provider Address:		
	I certify that this patient was seen for a Medicaid covered health service.	**Signature & Title of Healthcare Provider:** ▶		
Trip #2	Trip Number (Call MTM for this before your trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where you were picked up: ☐ Home ☐ Other:			Healthcare Provider Phone:
	Healthcare Provider Name:	Healthcare Provider Address:		
	I certify that this patient was seen for a Medicaid covered health service.	**Signature & Title of Healthcare Provider:** ▶		
Trip #3	Trip Number (Call MTM for this before your trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where you were picked up: ☐ Home ☐ Other:			Healthcare Provider Phone:
	Healthcare Provider Name:	Healthcare Provider Address:		
	I certify that this patient was seen for a Medicaid covered health service.	**Signature & Title of Healthcare Provider:** ▶		
Trip #4	Trip Number (Call MTM for this before your trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where you were picked up: ☐ Home ☐ Other:			Healthcare Provider Phone:
	Healthcare Provider Name:	Healthcare Provider Address:		
	I certify that this patient was seen for a Medicaid covered health service.	**Signature & Title of Healthcare Provider:** ▶		
Trip #5	Trip Number (Call MTM for this before your trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where you were picked up: ☐ Home ☐ Other:			Healthcare Provider Phone:
	Healthcare Provider Name:	Healthcare Provider Address:		
	I certify that this patient was seen for a Medicaid covered health service.	**Signature & Title of Healthcare Provider:** ▶		
Trip #6	Trip Number (Call MTM for this before your trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where you were picked up: ☐ Home ☐ Other:			Healthcare Provider Phone:
	Healthcare Provider Name:	Healthcare Provider Address:		
	I certify that this patient was seen for a Medicaid covered health service.	**Signature & Title of Healthcare Provider:** ▶		
Trip #7	Trip Number (Call MTM for this before your trip):	Appointment Date:	Appointment Time:	Type: ☐ Round Trip ☐ One-Way
	Address where you were picked up: ☐ Home ☐ Other:			Healthcare Provider Phone:
	Healthcare Provider Name:	Healthcare Provider Address:		
	I certify that this patient was seen for a Medicaid covered health service.	**Signature & Title of Healthcare Provider:** ▶		
I have completed this form and I verify that the information on this trip log is true.		**Signature of Member, Parent/Legal Guardian, or Representative:** ▶		

We do not discriminate

MTM complies with applicable Federal civil rights laws and does not discriminate or treat people differently on the basis of race, color, national origin, age, disability, or sex.

MTM provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as: qualified interpreters and information written in other languages

If you need these services, call MTM: 888-561-8747.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with MTM:

16 Hawk Ridge Drive
Lake St. Louis, MO 63367
Toll-free: 888-561-8747
TTY: 711
Fax: 636-561-2962
Email: QM@mtm-inc.net

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, MTM is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at *https://ocrportal.hhs.gov/ocr/portal/lobby.jsf*, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD).

Complaint forms are available at *http://www.hhs.gov/ocr/office/file/index.html*.

English: ATTENTION: If you speak [English], language assistance services, free of charge, are available to you. Call 888-561-8747 (TTY: 711).

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-561-8747 (TTY: 711).

Portuguese: ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 888-561-8747 (TTY: 711).

Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電888-561-8747（TTY：711）。

French Creole: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 888-561-8747 (TTY: 711).

Cambodian: ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតឈ្នួល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ 888-561-8747 (TTY: 711)។

French: ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 888-561-8747 (ATS : 711).

Italian: ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 888-561-8747 (TTY: 711).

Lao: ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຫາ 888-561-8747 (TTY: 711).

Arabic: Arabe: ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 888-561-8747 (رقم هاتف الصم والبكم: 711.)

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 888-561-8747 (телетайп: 711).

Appendix J – MTM Reimbursement Form (continued)

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 888-561-8747 (TTY: 711).

Kru: Dè ɖɛ nìà kɛ dyéɖé gbo: Ɔ jǔ ké m̀ [Bàsɔ́ɔ̀-wùɖù-po-nyɔ̀] jǔ ní, nìí, à wuɖu kà kò ɖò po-poɔ̀ ɓɛ̀in m̀ gbo kpáa. Ɖá 888-561-8747 (TTY: 711)

Ibo: Ige nti: O buru na asu Ibo asusu, enyemaka diri gi site na call 888-561-8747 (TTY: 711).

Yoruba: AKIYESI: Ti o ba nso ede Yoruba ofe ni iranlowo lori ede wa fun yin o. E pe ero ibanisoro yi 888-561-8747 (TTY: 711).

Polish: UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 888-561-8747 (TTY: 711).

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 888-561-8747 (TTY: 711)번으로 전화해 주십시오.

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 888-561-8747 (TTY: 711).

Appendix K – IP Prospective PCA Letter of Intent

LETER OF INTENT

Independent Provider (IP) Program

State of Rhode Island
Executive Office of Health and Human Services
Office of Medicaid
3 West Road
Cranston, Rhode Island 02920

I, _____, acknowledge that I will be enrolling in the Independent Provider (IP) Program trainings and I have every intention to work towards becoming a PCA in the Independent Provider (IP) Program. This letter will be filed with the Fiscal Intermediary.

Thank you.

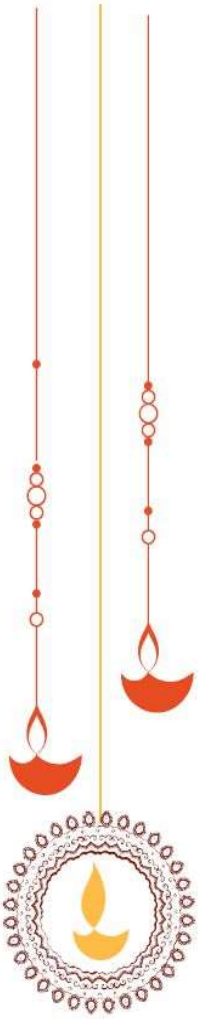
Address _____

_____

Date _____

Signature _____

Appendix L – IP Prospective PCA Check-Off List



Independent Provider Program Prospective PCA Check Off List

	Event	Date and Signoff
☐	Mandatory Orientation Training	
☐	National Background Check Done	
☐	CPR/First Aid Training Completed	
☐	13 Hour Training Completed	
☐	Registry Profile Completed by PCA, where appropriate	
☐	FI has added Profile to Registry, where appropriate	
☐	Interviewed with a consumer	
☐	Interviewed with a consumer	
☐	Interviewed with a consumer	
☐	Interviewed with a consumer	
☐	Interviewed with a consumer	
☐	Interviewed with a consumer	
☐	Interviewed with a consumer	

Prospective PCA _____

The EOHHS, the FI and trainer will initial and date participations to help you keep track.. If you log your interviews, it will help you keep track of those interviews.

This manual should not be construed to replace the Self-Directed Regulations 210-RICR-50-10-2, https://rules.sos.ri.gov/regulations/part/210-50-10-2 , which govern the Independent Provider (IP) program, but rather to supplement those Rules and Regulations. In the event of a conflict between this manual and the Rules and Regulations, the Rules and Regulations shall prevail. Moreover, this manual shall not be construed to provide any exhaustive description, criteria, definition or process and should not be construed as providing any type of legal standards whatsoever.

February 2020