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Authorized Signature

Number: APD-PT-16-031
Issue date: 8/30/2016

Topic: Long Term Care

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other: _____

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services(ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children’s Intensive In Home Services |
| <input type="checkbox"/> County DD Program Managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> ODDS Children’s Residential Services | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Child Welfare Programs | |

Policy/rule title:	Medicaid and OPI In-home service payments		
Policy/rule number(s):	411-030-0040(8), 411-031-0020, 411-031-0050	Release no:	
Effective date:	09/01/16	Expiration:	
References:	2015-2019 SEIU / Oregon Home Care Commission Collective Bargaining Agreement (CBA)		
Web address:	http://www.dhs.state.or.us/policy/spd/rules/411_030.pdf http://www.dhs.state.or.us/policy/spd/rules/411_031.pdf		

Discussion/interpretation:

Homecare workers (HCWs) who serve Medicaid or OPI consumers are required to complete vouchers that capture the dates and times of each shift they work. These vouchers list the “Total hours authorized” and the “Service period worked.”

Article 8, Section 4 of the CBA establishes that in order to be paid, HCWs must turn in a properly completed voucher. Subsection Article 8, Section 1, subsection (b) states that no payment will be paid for hours without prior authorization.

HCW: It is the HCW's responsibility to make sure the number of hours worked and claimed on a voucher do not exceed the Total hours authorized. A HCW who repeatedly works or claims to work hours that were not prior authorized is committing fiscal improprieties under OAR 411-031-0020(25)(a)(I) and is grounds for a HCW's provider number to be terminated.

Consumer: It is the consumer's or their representative's responsibility to manage their HCW's schedule, ensure that the HCW does not exceed authorized hours and ensure the number of hours claimed on a voucher is correct BEFORE signing it. A consumer who signs a voucher with more hours than the Total hours authorized demonstrates an inability to manager their consumer employer responsibilities under OAR 411-030-0040(8)(a)(C) and (D). Being unable to act as an employer means that to continue receiving in-home services, the consumer must either assign a representative [see OAR 411-030-0020(47)] to act as the employer, or must receive in-home services from an in-home agency.

Exceptions: Occasionally, there may be an emergency that requires a HCW to work more hours than normally scheduled on a particular shift, and doing so may cause the HCW to risk exceeding the Total hours authorized. For instance, the consumer may become severely ill and the HCW needs to wait till the emergency vehicle arrives or another HCW is unable to arrive to provide critical care. In these instances, it is the HCW's responsibility to contact the consumer's case manager **no later than two business days after** the additional hours were worked.

Upon being contacted by a HCW claiming to need additional hours, Case Managers must determine whether the hours remaining in the consumer's service period can safely be adjusted to compensate for the additional hours worked, or whether authorizing more hours for the service period is necessary. Case Managers should authorize hours beyond the Total hours authorized only if the HCW worked those hours in response to the consumer's legitimate emergent need and the consumer's Total hours authorized cannot be safely adjusted to meet the consumer's needs for the remainder of the service period. Any authorization of additional hours must be documented in the consumer's ACCESS case narrative.

If a HCW requests hours beyond the Total hours authorized on three or more occasions during a consumer's service authorization period, the Case Manager should conduct a reassessment to ensure that the consumer's service needs are captured correctly in the CA/PS.

Implementation/transition instructions:

When HCWs submit vouchers that claim more hours than the Total hours authorized, voucher entry staff should only pay the Total hours authorized, not the number of hours claimed.

As set forth in [PT 15-041](#) and [PT 16-012](#), after being entered with the authorized hours, vouchers that claim more hours than authorized should be forwarded to the consumer's Case Manager. Case Managers must send HCWs the "HCW Exceeding Authorized Hours Letter" and send consumers or consumers' representatives the "Consumer Exceeding Authorized Hours Letter" (letters) that are attached to this transmittal when:

- A HCW submits a signed voucher claiming hours that exceed the Total hours authorized by 10% or more, or
- More than half of the signed vouchers that a HCW turns in over the course of a 3-month period exceed the Total hours authorized by 5%.

Letters may be sent for any voucher with excess hours starting on 9/1/16. However, starting with the vouchers submitted for the 9/16/16-9/30/16 pay period with excessive hours, both letters must be sent.

Each violation of the policy, requires specific options for the consumer and the Home Care Worker.

Voucher Exceeds 10% of Authorized Hours	Action for Consumer	Action for HCW
First Violation	CM sends Warning Letter	CM sends Warning Letter
Second Violation	CM sends Warning Letter and makes referral to STEPS	CM notifies Central Office CO sends Warning Letter
Third Violation	CM notifies consumer that they must: <ul style="list-style-type: none">• Appoint a representative;• Choose to receive services through an In-Home Care Agency; or• Choose a different service setting (Medicaid) or close the case (OPI).	CM notifies Central Office CO sends Termination Letter

Any time a Case Manager sends these letters, copies of the letters should be put in the consumer's case and scanned in EDMS. A narration should be made into the consumer's ACCESS narrative, and copies of the letters should be e-mailed to

APD.Voucherletters@dhsola.state.or.us Central Office will be tracking HCW and consumer violations of this policy and the notices.

When the hours a HCW claims on any voucher exceed the Total hours authorized by less than 10%, or if the hours a HCW claims on all vouchers exceeds the Total Hours authorized by 5-10% less frequently than half of the time during a 3-month period, Case Managers should speak to the HCW about the importance of not exceeding the Total hours authorized on their vouchers. This counts as an indirect case management contact, and should be narrated.

When a consumer or consumer's representative signs a voucher authorizing hours that exceed the Total hours authorized by less than 10%, or exceed the Total Hours authorized by 5-10% less than half of the time, Case Managers should speak to the consumer or consumer's representative about the importance of scheduling and keeping track of their HCWs' work time. For Medicaid consumers, this counts as a direct case management contact, and should be narrated.

Local/branch action required:

Send letters to consumers and HCWs as directed in this transmittal. Narrate letters being sent

Field/stakeholder review: Yes No

If yes, reviewed by: APD Operations

Filing instructions:

If you have any questions about this policy, contact:

Contact(s):	Chris Ellis		
Phone:	503-945-7035	Fax:	503-947-4245
Email:	Christopher.m.ellis@state.or.us		

<DATE>

<CONSUMER NAME>

<CONSUMER ADDRESS>

<CITY, STATE, ZIP>

Dear <HCW NAME>;

Your homecare worker <NAME> turned in a voucher for the <DATE> through <DATE> service period. This voucher authorized <NAME> to work no more than <XX> hours. Based on the Start Times and End Times that <NAME> entered for each shift, <NAME> claimed to have worked a total of <YY> hours.

There is no record that <NAME> got prior approval from your case manager to work more than <XX> hours. Because <NAME> was authorized to work <XX> hours, <NAME> will be paid for <XX> hours.

Oregon Administrative Rule (OAR) 411-030-0040(8)(a) states that in order to be eligible to receive services from a homecare worker, consumers must be able to schedule the homecare worker's work, leave, and coverage and track the hours worked and verify the authorized hours completed by the homecare worker. By signing your homecare worker's voucher for more hours than were authorized, you have not shown that you are able to do these.

If your homecare worker and you sign another voucher that claims more hours than authorized, your case manager will make a referral to the "Steps to Success" program for you. Steps to Success can help you understand how to manage your homecare worker's task list and authorized hours, and can help you to understand your person-centered service plan.

If you get help from the Steps to Success program, and you're still not able or not willing to make sure your homecare worker's hours don't go over the amount authorized, you may have to start receiving services from an in-home service agency instead of a homecare worker.

Please contact me if you have any questions.

Sincerely,

Case Manager

<DATE>

<HCW NAME>

<ADDRESS>

<CITY STATE ZIP>

Dear <HCW>;

You are receiving this letter because you have submitted a voucher claiming more hours than you were authorized to work. On voucher #XXXXXXX, you claimed XXX hours. This voucher only authorized you a total of YYY hours.

Sometimes there is an emergency that causes you to work more hours than your voucher authorizes. Your consumer may become ill, or a homecare worker who is scheduled to relieve you might have a sick child at home. If something like this happens, you must contact the consumer's case manager immediately. If this sort of emergency happens when the local office is closed, you should leave a message. You **MUST** get authorization from a case manager within 2 business days in order to claim more hours than are authorized on your voucher.

As a homecare worker, it is your responsibility to keep track of the hours that you work for your consumer-employer(s), and it is your responsibility to make sure that you don't claim more hours than you have been authorized to work. Oregon Administrative Rule (OAR) 411-031-0020(25) lists "Repeatedly working or claiming to work hours not prior authorized on a consumer-employer's service plan" as Fiscal Improprieties. OAR 411-031-0050(3) lists Fiscal Improprieties as a violation that can result in provider enrollment being terminated.

You have turned in a voucher claiming more hours than authorized. If you turn in another voucher claiming more hours than authorized, even if you just made a math error or only went over by a little bit, your provider enrollment may be terminated.

Sincerely,