

Policy Transmittal Aging and People with Disabilities



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Number: APD-PT-18-039

Issue date: 9/19/2018

Topic: Long Term Care

Due date:

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: Types A and B | <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:	Homecare Worker Provider Enrollment Standards		
Policy/rule number(s):	OAR 411-031-0040(8)(a)	Release number:	
Effective date:		Expiration date:	
References:	OAR 411-031		
Web address:	http://www.dhs.state.or.us/policy/spd/rules/411_031.pdf		

Discussion/interpretation:

Oregon Administrative Rule (OAR) 411-031-0040(8) (Homecare Worker Provider Enrollment Standards) was amended on July 31, 2018 to include the following changes:

- Remove the underage waiver option
- Prohibit the use of Tax Identification Numbers in lieu of Social Security numbers

These changes apply to all Homecare Workers (HCWs).

Removal of the underage waiver option

APD will no longer consider waivers for prospective HCWs under the age of 18. If an applicant requests an underage waiver, APD/AAA staff should advise the requesting person that HCWs must be 18 to become enrolled providers. If an applicant does not meet the standards of enrollment outlined in OAR 411-031-0040(8)(a), the application will not be processed. There are no appeal or hearing rights for applicants who don't meet enrollment standards.

Removal of the use of Tax Identification number in lieu of Social Security numbers

Applicants pursuing provider enrollment as a HCW must have a Social Security number that matches their legal name. APD will not consider Tax Identification Numbers (TIN) sufficient for Provider enrollment. If the applicant cannot demonstrate that they possess a valid Social Security number that matches their legal name, their application will not be processed. The applicant does not have hearing rights in this matter.

The current HCW provider enrollment standards are as follows:

ENROLLMENT STANDARDS.

A HCW must meet all of the following standards to be enrolled with the Department's Consumer-Employed Provider Program and may not work or claim payment for services unless they meet the following criteria:

- (A) Maintain a drug-free workplace.
- (B) Complete background check as described in OAR 407-007-0200 to 407-007-0370 with an outcome of approved or approved with restrictions. The Department or AAA may allow a HCW to work on a preliminary basis in accordance with OAR 407-007-0315 if the HCW meets the other provider enrollment standards described in this section of rule.
- (C) Demonstrate the skills, knowledge and ability to perform, or to learn to perform the required work.
- (D) Possess current U.S. employment authorization that has been verified by the Department or AAA.
- (E) Be 18 years of age or older.
- (F) Complete an orientation described in section (8)(e) of this rule.

(G) Have a Social Security number that matches the HCW's legal name as verified by the Internal Revenue Service or Social Security Administration.

(H) Agree to participate in continuing education requirements as established by the Oregon Home Care Commission.

Applicants pursuing provider enrollment as a HCW have the responsibility to demonstrate that they meet all criteria.

Local/branch action required:

Central office action required:

Field/stakeholder review: Yes No

If yes, reviewed by: OPs/Policy

Filing instructions:

If you have any questions about this policy, contact:

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