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West Virginia Personal Options
INTELLECTUAL/DEVELOPMENTAL DISABILITIES WAIVER
PROGRAM

Program and Employer Guide

Personal Options supports your self-determination to live the life that you want with the services and supports that you need.

Personal Options supports you to make choices that allow you to:

- Exercise control over your life;
- Achieve your goals;
- Obtain skills and resources to participate in meaningful roles in the community;
- Take responsibility for your actions; and
- Determine your future!

West Virginia Personal Options – I/DD

West Virginia Personal Options Program and Employer Guide

Dear Participant and/or Program Representative:

We would like to take this opportunity to welcome you to the *Personal Options* program. We are excited to begin this partnership with you and we look forward to a long and mutually satisfying relationship.

We would also like to congratulate you. You are on your way to becoming a supervising employer. As an employer you will have more control over the services you receive because you will be making the decisions about hiring, training and supervising your employee(s).

To get started, you will need to meet with a PPL Resource Consultant to complete the paperwork necessary to establish you as the employer and to hire your employees. The Resource Consultant will also assist you with developing a Spending Plan which outlines how you choose to use your participant-directed budget.

The following material will help you to understand these and other responsibilities associated with your role as an employer.

We hope you will enjoy this process and we look forward to working with you.

Sincerely,

Public Partnerships, LLC

Personal Options Program and Employer Guide

Table of Contents

1. Overview of Personal Options – I/DD
2. Employer Roles and Responsibilities
3. Personal Options Enrollment Process
4. Supports for Self-Direction
5. Personal Options Planning
 - Developing the Service Plan
 - Developing the Spending Plan
6. Selecting, Hiring, Training and Supervising Employees
7. Employee Timesheets and Payments
8. Program Safeguards
9. Summary of I/DD Program Responsibilities

West Virginia Personal Options – I/DD

Purpose of this Guide

This guide has been developed as a resource for participants of the Intellectual Disabilities and Developmental Disabilities (I/DD) Waiver program who have chosen to direct their own services through the *Personal Options* program. The following material will provide you with information on how to enroll in *Personal Options* and begin directing your own services. This guide may also be helpful to legal representatives, family members and others assisting you.

1. Overview of Personal Options

Participant-direction is an optional service delivery method that gives Medicaid Waiver program members an alternative to receiving services through traditional provider agencies. Participant-direction allows greater choice and control over your Waiver services so that you may live as independently as possible in your home and community.

Participant-direction is the act of choosing and controlling aspects of your life including:

- Exercising your right to make choices and changes
- Deciding:
 - ✓ Who will provide your services;
 - ✓ What services will be provided;
 - ✓ When services will be provided; and
 - ✓ Where services will be provided.

Personal Options - I/DD

As a member of the Intellectual Disabilities and Developmental Disabilities (I/DD) Waiver program, you may choose Personal Options to manage a portion of your annual Medicaid budget. You and/or your appointed Program Representative can choose the types and amounts of services that are allowed to be participant-directed. You will continue to have the support of a Case Manager and you may still receive other services that you need through traditional provider agencies.

Personal Options at a Glance

- ✓ The *Personal Options* program is administered by the West Virginia Bureau for Medical Services (BMS). Additional information regarding Personal Options is available in the WV Intellectual Disabilities and Developmental Disabilities (I/DD) Waiver Policy Manual.
- ✓ *Personal Options* is available to all active members of the WV Intellectual Disabilities and Developmental Disabilities Waiver program except for those living in homes licensed by the Office of Health Facility Licensing and Certification (OHFLAC).

West Virginia Personal Options – I/DD

- ✓ To be referred to the *Personal Options* program, a WV I/DD Waiver member or his/her legal representative must complete a “Freedom of Choice” form. This is a simple one page document available through the program member’s Case Manager, BMS or the Administrative Services Organization (ASO).
- ✓ *Personal Options* participants manage an annual participant-directed budget based on their needs. This budget is not considered personal income of the participant.
- ✓ The annual budget is divided into monthly spending plans that specify the amounts of services to be provided by the participant’s employees and the employees’ rates of pay.
- ✓ The participant is the Employer of Record but may appoint a Program Representative to assist as needed with the responsibilities of directing his/her own services. Only under certain circumstances and with the approval of BMS may the appointed Program Representative also serve as an employee of the participant.
- ✓ *Personal Options* participants determine their employees’ scheduled hours of service and rates of pay. The rates of pay must be within state and federal limits and cannot exceed the current Medicaid rate for the service.
- ✓ The following services are available for participant-direction through the *Personal Options* program:
 - Person Centered Support (PCS)
 - Respite
 - Transportation
 - Participant Directed Goods and Services (PDGS)
- ✓ Participant Directed Goods and Services allows *Personal Options* participants to use up to \$1,000 annually from their budget to purchase approved goods and services that decrease their need for Medicaid services, increase safety in the home and community and/or promote independence. The \$1,000 is inclusive of any funds used for Environmental Accessibility Adaptation (EAA) for vehicles or homes. Examples include assistive technology, grab bars, personal response systems, etc.
- ✓ Financial Management – Public Partnerships, LLC (PPL) serves as the Fiscal/Employer Agent, performing payroll and tax functions on behalf of *Personal Options* participants. PPL’s services are paid for by the Bureau for Medical Services at no cost to the participant. No administrative fees are deducted from the participant’s Medicaid budget.
- ✓ Each *Personal Options* participant is assigned a PPL Resource Consultant who provides training and ongoing assistance regarding employer responsibilities, spending plan development and budget utilization.

West Virginia Personal Options – I/DD

- ✓ Participants who choose *Personal Options* will continue to receive Service Coordination as well as other chosen services (i.e. Speech Therapy, Nursing, Therapeutic Consultant services, etc.) through traditional provider agencies.
- ✓ Personal Options participants may choose to transfer some or all of their participant-directed services back to traditional provider agency services at any time.

Benefits of Personal Options

In addition to having increased choice and control over services, *Personal Options* participants report increased satisfaction and quality of life. Other benefits include:

- *Personal Options* services are not subject to traditional service limits or “caps”. Instead, Personal Options participants have “budget authority” which allows them to choose a service mix and employee wage rates that meet their needs using the funds available in their annual participant-directed budget.
- The monthly spending plans can be revised as the participant’s needs change and when they choose to increase or decrease their employee’s rates of pay. Revisions are easy and often involve only a phone call with the PPL Resource Consultant.
- *Personal Options* employees are classified as companion workers and may be scheduled to work more than 40 hours per work week based upon the participant’s needs.
- Participant-Directed Goods and Services (PDGS) is available only through participant-directed service models.
- Employee paperwork is reduced to a user-friendly timesheet and transportation invoice which may be submitted to PPL by mail, fax or through a secure web portal.
- The cost of participant-directed services is often less than traditional agency services. This allows Personal Options participants to receive more services from their annual Medicaid budget.

2. Employer Roles and Responsibilities

Upon receipt of your referral to the *Personal Options* program, a PPL Resource Consultant will contact you and/or your legal representative to schedule an enrollment meeting. During this meeting, the Resource Consultant will assist you with the completion of your Enrollment Packet which contains all the necessary tax forms to establish you as the “employer of record” with the Federal and State governments. Your role as an employer and managing a participant-directed budget has nothing to do with your personal income taxes. You should continue to file your personal taxes (if applicable) as you have always done. As an employer, you will be required to pay employer taxes (Social Security, Medicare, and unemployment taxes) on the wages you pay your employees. PPL handles all tax payments for you and the costs are deducted from your participant-directed budget. During the enrollment meeting, your Resource Consultant will further educate you on this process.

As an Employer, you will:

West Virginia Personal Options – I/DD

- Maintain a safe working environment, free from harassment, hostilities or drugs
- Recruit, select, train, supervise and fire employees;
- Ensure your employees meet the required qualifications including a criminal background check, CPR and First Aid certifications;
- Direct completion of employee training;
- Develop your monthly spending plans;
- Determine your employees' rates of pay (within state guidelines);
- Determine your employees' work schedules and duties;
- Verify, sign and submit complete and accurate timesheets for your employees;
- Adhere to your monthly spending plan allocations;
- Keep track of your monthly spending;
- Create and maintain a current an emergency back-up plan for times when employees are unable to report to work as scheduled ; and
- Submit all required PDGS documents including an invoice, a completed W-9 form and receipts to your Resource Consultant.

You are responsible for making sure your employees provide services and supports as defined in your Individual Program Plan (IPP). The plan will give specific direction your employees regarding the kind of help you need and exactly how you want that help to be provided.

You are responsible for making sure your employees accurately document all tasks performed and time worked on their timesheets and transportation invoices. Your signature on these documents will verify these forms are properly completed.

Appointment of a Program Representative to help with the responsibilities of self-direction

Participants needing help with the responsibilities of directing their own services may appoint a program representative, such as a family member or trusted friend. An "Appointment of Representative" form is provided in the enrollment packet.

The appointed Program Representative must:

- Show a strong personal commitment to the you in assuring that your needs are met
- Respect your preferences
- Be willing and able to help you with the requirements of participant-direction
- Assist you in verifying your employees' timesheets and transportation invoices
- Be at least 18 years old

The Program Representative CANNOT:

- Be paid for assisting you with your employer responsibilities
- Be hired by you to provide IDD Waiver services
- Be known to abuse drugs or alcohol
- Have any history of physical, mental or financial abuse

West Virginia Personal Options – I/DD

Participant Rights and Responsibilities

The following I/DD Waiver program requirements obligate you to:

- Manage your health and safety
- Notify your PPL Resource Consultant of any change in medical status or care needs
- Notify your PPL Resource Consultant of overnight admissions to a hospital, nursing home or other facility.
- Contact your PPL Resource Consultant immediately if there are changes in your Medicaid coverage
- Notify your PPL Resource Consultant of any change in residence, address or phone number
- Maintain a safe home environment
- Cooperate with scheduled in-home visits
- Maintain monthly phone contact with the PPL Resource Consultant
- Manage your spending plan with your PPL Resource Consultant
- Ensure your employees follow your Individual Program Plan
- Verify services were provided by signing time sheets and transportation invoices
- Discuss concerns with your PPL Resource Consultant
- Report incidents of abuse, neglect or exploitation to the Protective Services hot line at 1-800-352-6513
- Report any illegal activity of employees to local police or appropriate authorities

Maintaining medical eligibility for the I/DD Waiver program

You will be assessed through the BMS' Administrative Services Organization (Kepro) annually to determine whether you continue to meet the medical eligibility requirements for the program. This annual assessment also determines the amount of your annual Medicaid budget for I/DD Waiver services.

Maintaining financial eligibility for the I/DD Waiver program

You are required to complete a periodic financial eligibility review through your local DHHR office. Your Case Manager will assist you with this process.

If you receive notice that you are no longer medically or financially eligible for I/DD services, you have the right to appeal the decision. In order to continue to receive services during the appeal process, you must submit your appeal request (Request for Medicaid Fair Hearing form) within 13 days of receiving the notice of decision. You must notify your Resource Consultant of the appeal. If you do not appeal within the 13 days, *Personal Options* services are discontinued and your employees can no longer be paid through the program.

Note: PPL does not set policy for the I/DD Waiver program or *Personal Options*. Questions regarding I/DD Waiver and *Personal Options* policy should be directed to the Bureau for Medical Services.

West Virginia Personal Options – I/DD

Personal Options participants have the same rights as other I/DD members. These rights are explained in the I/DD Waiver Policy Manual which is available through your Case Manager or from the Bureau for Medical Services. The Policy Manual is available on-line at: www.wvdhhr.org

You have the right to:

- Privacy and confidentiality regarding I/DD services
- Be treated with dignity and respect at all times
- Have the involvement and support of people you choose
- Make decisions about your personal assistance needs
- Receive information you need to make informed choices
- Appeal decisions regarding the I/DD Waiver Program and *Personal Options*
- Access the WV DHHR Fair Hearing process
- Be involved in decisions about your I/DD services
- Be notified of changes in *Personal Options* in a timely manner
- Transfer to different provider agency

3. *Personal Options Enrollment Process*

Referral to the Personal Options Program

- A. To begin self-directing services through the Personal Options program, you or your legal representative must first complete a Freedom of Choice (FoC) form which is available through your Case Manager, the Bureau for Medical Services (BMS) or the Administrative Services Organization (ASO). This form is submitted to the ASO (Kepro) by your Case Manager.
- B. Kepro will notify PPL of your interest in the Personal Options program.
- C. PPL will contact you or your legal representative by phone within 3 business days of receipt of the FOC referral from Kepro. The PPL staff will provide information, answer questions and explain the enrollment process.
- D. During the initial phone contact a projected “start” date of the transfer from traditional services to participant-directed services will be determined. The “start” date must fall on the first of a month.
- E. An IDT meeting (annual team meeting or critical juncture meeting) must be held with your Case Manager and other members of your Interdisciplinary Team (IDT). At this meeting, you and/or your legal representative will choose the types and amounts of traditional and participant-directed services that are necessary to meet your assessed needs.
- F. Following the team meeting, your Case Manager will submit the chosen services to Kepro for approval and authorization.

West Virginia Personal Options – I/DD

- G. Kepro may request additional information or documentation as necessary to authorize the requested services.
- H. Once the chosen participant-directed services have been approved/authorized by Kepro, PPL will be issued service authorizations that will be used to determine the amount of money in your participant-directed budget.
- I. Upon receipt of the service authorizations, PPL will contact you or your legal representative to schedule an enrollment meeting with a Resource Consultant. This meeting is typically held in your home but can be held at PPL's offices or a community location such as a public library.

Enrolling in Personal Options

- The enrollment meeting should occur within 14 days of PPL's receipt of the service authorizations from Kepro. You and/or your legal representative (if applicable), your appointed Program Representative (if applicable) are required to attend the meeting. If your employees are available it is advised that they also attend the meeting so that the Resource Consultant can provide training, answer questions and assist with the completion of enrollment forms. The enrollment meeting typically takes approximately 2 ½ hours but the time may vary depending on the questions asked, the number of employees being hired, etc.
- The enrollment forms reflect the policies and procedures of the I/DD Waiver program, *Personal Options* and PPL. A brief description of these policies and the purpose of each of the forms is indicated in the Enrollment Packet. You may wish to keep a copy of the forms for your records. The PPL Resource Consultant will provide you with a binder to assist you in maintaining your records. *Note: PPL will make enrollment materials (including this guide) available to you in alternate formats upon request. Alternate formats may include: Braille; Large Print; Audiotape; Electronic Format (CD or floppy disk).*
- During the enrollment meeting, you and/or your legal representative will receive training on the policies, procedures and responsibilities pertaining to directing your own services. If necessary, your appointed Program Representative will assist you with these responsibilities.
- During the enrollment meeting, the Resource Consultant will provide you and/or your representative(s) with an Employer Packet and an Employee Packet which contain all the forms necessary to begin directing your services and hiring workers.
- The Resource Consultant will assist you and/or your representative(s) with the development of the participant-directed spending plan which identifies the types and amounts of participant-directed services to be self-directed as well as the wages that will be paid to the employees providing these services.

West Virginia Personal Options – I/DD

- Upon completion of the enrollment meeting, the Resource Consultant will submit all documents to PPL for processing.
- Once all employer and employee documents have been successfully processed by PPL, the Resource Consultant will contact you or your Program Representative to inform you of the “start date” for your participant-directed services.

Note: Your employees may not begin providing services until your PPL Resource Consultant contacts you with their start dates and PPL Employee Identification Number.

4. Supports for Self-Direction

Public Partnerships, LLC

The WV Bureau for Medical Services has contracted with Public Partnerships, LLC (PPL) to provide *Personal Options* participants with important supports for participant-direction. PPL is a national company that assists states to implement participant-directed service models. PPL provides several services and supports:

- Financial Management Services
- Resource Consultant Services
- Customer Service
- Financial Operations Center
- Employee Training Materials
- Personal Options Resource Guide
- Worker Directory and Peer Support
- PPL Website: www.PPLFirst.com
- Personal Options – I/DD program web portal for budget oversight and electronic timesheet and travel invoice submissions: <https://fms.publicpartnerships.com/PPLPortal>

Financial Management Services

PPL Financial Management Services help you manage your budget, employer responsibilities and purchasing of approved goods and services. PPL functions as the Fiscal/Employer Agent for the Personal Options program, processing payroll and performing required tax functions on your behalf.

PPL Financial Management Services include:

- ✓ Assisting you and your employees to understand and comply with I/DD Waiver program policies and requirements;
- ✓ Filing required paperwork with the State and Federal governments for you and your employees;
- ✓ Managing and verifying the required criminal background checks on your employees;
- ✓ Verifying the required training and qualifications of your employees;

West Virginia Personal Options – I/DD

- ✓ Verifying the qualifications of vendors of goods and services (*Note: PPL will only pay for approved goods and services as determined in your spending plan.*);
- ✓ Performing payroll and tax functions, including processing timesheets, transportation invoices, PDGS invoices and withholding and reporting State and Federal taxes (*Note: PPL does not provide tax advice.*);
- ✓ Helping you manage your Spending Plan for participant-directed services;
- ✓ Providing you with utilization reports to help you track your monthly spending and use of your participant-directed budget; and
- ✓ Performing quarterly and end-of-year tax reporting on your behalf.

PPL Resource Consultant (RC) Roles and Responsibilities

PPL Resource Consultant Services are closely coordinated with PPL Financial Management Services. Your assigned Resource Consultant will help you to:

- Understand and comply with I/DD Waiver Program Policies and *Personal Options* requirements
- Evaluate your needs and plan for services and supports to meet your needs
- Enroll in the *Personal Options* program
- Enroll your employees in the program
- Verify employees' criminal background results and
- Develop and submit your Spending Plan for approval
- Revise your Spending Plan as needed
- Select, hire, train, and manage your employees
- Identify and purchase approved goods and services
- Identify additional needed community resources
- Process the appointment of a Program Representative, if needed

The majority of these responsibilities will be addressed during your enrollment meeting. Afterward, your Resource Consultant will continue to provide you with support through monthly phone contacts.

PPL Customer Service

You may contact PPL Customer Service by calling (toll free) 1-877-908-1757. Customer Service representatives are available between the hours of 9:00 a.m. and 6:00 p.m., Monday - Friday, except for WV State and Federal holidays.

They can assist with questions about employee timesheets and pay checks, provide information and copies of forms you need for *Personal Options*. When you or your employees call Customer Service you will be required to provide identifying data before the representative can release the requested information. At the time you make the call, please be prepared to provide your PPL Participant or Employee identification number, Medicaid number, date of birth, etc.

West Virginia Personal Options – I/DD

You and your employees may occasionally receive an automated phone call from PPL's Customer Service Center informing you that CPR, First Aid or other training requirements are due to expire. Automated calls are also used to notify you of problems with timesheets and travel invoices, missing enrollment paperwork, etc. If you receive an automated call, please contact PPL's Customer Service Center as directed as soon as possible.

Personal Options Planning

Individual Program Plan

The Individual Program Plan (IPP) is the document that identifies your goals, areas of need, and preferences for services and supports that will help you to be more independent in your home and community. Your IPP is created during your annual Interdisciplinary Team (IDT) meeting with the help of your Case Manager and other members of your team. During the annual meeting as well as subsequent quarterly, six month and critical juncture meetings, you will choose and plan the services you wish to self-direct through the Personal Options program as well as the services you wish to receive through traditional provider agencies.

Some questions to consider at the IDT meetings:

- What are your areas of need?
- What services and supports will help you meet your needs?
- Do you want to manage your services or do you want to have an agency manage your services for you?
- Which services and supports can be purchased from traditional and which ones can be purchased through the Personal Options program?
- Who will provide paid services and supports for your training and support, transportation and other related needs?
- Who will provide informal services and supports?
- What other goals do you have?

Once you have developed your IPP, your Case Manager will submit service requests to Kepro for approval and authorization. Kepro will notify PPL of the services you have chosen to self-direct which will allow PPL to calculate your participant-directed budget. Upon receipt of this information, your PPL Resource Consultant will contact you to develop or update your spending plan with the authorized budget.

Spending Plan

The Spending Plan is a budgeting tool which helps you to accurately plan how and when you will use the Medicaid funds authorized to your participant-directed budget. The amount of your participant-directed budget is based upon the assessment of your needs completed by annually by Kepro. If you or your legal representative disagree with the amount of your participant-directed budget you may work with your Case Manager to "negotiate" additional funds to cover the cost of needed

West Virginia Personal Options – I/DD

services. Unused funds from one year’s participant-directed budget cannot be carried over to the following year.

Your PPL Resource Consultant will help you break down your annual participant-directed budget into monthly Spending Plans that specify the types and amounts of services you will receive and also identify the employees that will be providing the services and their rates of pay. You may specify more funds in months that you anticipate needing more services and less funds in the months that you will need less service. Only services that have been approved by the IDT, documented in the IPP and approved by Kepro may be included in your spending plans.

It is important you understand that your participant-directed budget is not reported as your personal income and you will not receive cash. Instead, it is an amount of money that is allocated on your behalf to pay your employees and PDGS vendors for your participant-directed services. PPL does not deduct any administrative fees from your participant-directed budget.

Through PPL’s web portal you can monitor your monthly and year-to-date spending. This information will enable you to receive the maximum benefit of your participant-directed budget. Funds that you do not use in one month may be carried over for use in future months, within the same budget year. Your Resource Consultant will explain PPL's policy and procedure for moving unused funds.

As an employer, you will be required to pay employer taxes (Social Security, Medicaid, and unemployment) on the wages you pay your employees. PPL will deduct these taxes from the monthly Spending Plan amount for your employee services.

Important Points

- The Spending Plan is an official document that will be used by PPL as an authorization to pay for services and supports on your behalf.
- PPL *cannot* pay for anything that is not in your approved Spending Plan.
- The amount of funds you specify in each monthly Spending Plan may vary to meet your changing needs. However, you cannot specify zero funds in any month and cannot deplete your participant-directed budget prior to the end of your budget year.
- In Personal Options – I/DD program, unspent funds in your monthly budget can be carried over for use in future months. PPL's policy and procedure for moving money will be explained to you by your Resource Consultant.

Developing Your Spending Plan

Step One: Determine your need for paid and natural (unpaid) supports

Identify your need for paid services. Refer to your IPP.

Questions to Ask

- *How many hours of PCS and/or Respite services do you need per month?*
- *How many hours can you “afford to purchase” with your participant-directed budget?*
- *Who will you hire to provide services?*

West Virginia Personal Options – I/DD

- *What hourly rate you will pay your employee(s)?*
- *Will you pay a different rate for different employees based on experience, duties, etc.?*
- *How many hours will your employees work per day, week and month?*
- *Will your employees provide Transportation services?*
- *What is the total cost monthly cost of Services?*
- *Who will provide any remaining hours of natural/unpaid support?*

Step Two: Determine your need for Goods and Services

Questions to Ask

- *Do I need Goods and Services to support my independence or to reduce the need for other Medicaid services?*
- *What vendor will I choose to purchase Goods and Services? (Note: PPL can issue PDGS payments only to qualified vendors and vendors who accept checks as a form of payment.)*

Determine your Emergency Back-Up Plan for Person Centered Support and Respite Services

You are required to develop a written back-up plan that identifies individuals (employees, family members or friends living close by, etc.) who can assist you if your employee is unable to work for you at planned times. If individual is to be an employee (paid support) he/she must meet all requirements including completion of a criminal background check, CPR and First Aid certification.

In addition to identifying the individuals who can assist you when your regular employee is not available, the back-up plan should address your health and safety needs. Your Case Manager and/or Resource Consultant can assist you with the development of your Emergency Back-up Plan.

Current Medicaid Services and Rates for Personal Options – I/DD

Service	Unit	Current Rate
Person Centered Supports	Hourly	Set by you with employee \$8.75 and \$9.88* per hour
Respite	Hourly	Set by you with employee \$8.75 and \$9.88 per hour
Transportation	Mile	Set by you with employee Up to \$0.50 per mile
Participant Directed Goods and Services	Item or Service	\$1,000.00 limit per year

*Tax exempt employees may be eligible for a higher rate, talk to your RC for details

West Virginia Personal Options – I/DD

Spending Plan Limits

PPL cannot pay for any hours worked by employees that exceed the amount of funds you previously specified in the monthly Spending Plan. Your employees should not work hours that you have not pre-approved. If you schedule your employees to work hours beyond the amount in the Spending Plan, you will be required to pay the employees for the additional hours.

PPL cannot pay for Goods and Services that exceed the amount authorized by Kepro or that exceed the amount you specified in your Spending Plan. You may choose to purchase items that cost more than what you have in your Spending Plan but you will be required to pay the difference.

Note: If you continually have difficulties managing your participant-directed budget, PPL may require that you appoint a Program Representative to assist you with this responsibility. In rare cases it may be recommended that a participant transfer from *Personal Options* to Traditional Services so that services can be more closely monitored.

Making Changes to Your Spending Plan

You may contact your Resource Consultant and request to add or remove services, increase or decrease employee wage rates and make other changes to your Spending Plan any time. Unless there has been a significant change in your needs and a critical juncture IDT meeting has been held, changes to your Spending Plan will begin on the first day of the following month, not within the month that you request the change.

Monitoring your Spending Plan

You may use the BetterOnline web portal to monitor and track your employee's hours. You are responsible for ensuring the hours worked stay within the funds specified in the Spending Plan. PPL will not pay for services that exceed the allocated monthly funds.

Requesting Additional Funds for Your Participant-Directed Budget

If your needs change during your budget year and you require additional services, you must contact your Case Manager to schedule a critical juncture meeting. During this meeting you and other members of your team will discuss your needs and make changes to the types and amounts of services outlined in your IPP. If necessary, your Case Manager can request additional funds for your Participant-Directed Budget. Once these funds have been approved by Kepro, your Resource Consultant will contact you to update your Spending Plan as necessary to reflect your current needs.

Participant Directed Goods and Services (PDGS)

Participant-Directed Goods and Services (PDGS) are services, equipment or supplies not otherwise provided through Medicaid that address an identified need or needs in your IPP. PDGS *must* decrease

West Virginia Personal Options – I/DD

your need for other Medicaid services or increase your independence and safety in your home and/or community. PDGS are limited to \$1,000 per budget year in combination with Traditional Environmental Accessibility Adaptation services.

The purpose and dollar amount of PDGS must be approved by your IDT, identified on your IPP and authorized by Kepro. You must use the authorized PDGS within your budget year—it cannot be carried over to the following year.

When you are ready to use your authorized PDGS funds to purchase the item/service, you must submit to your Resource Consultant the PDGS application and an invoice from the chosen vendor that specifically identifies the item/service and the total cost. Your Resource Consultant will notify you once the PDGS application has been approved and payment to the vendor is requested. Once you have purchased the item/service, you must provide the receipt or other verification of payment.

PDGS Restrictions

You may not use Medicaid funds to purchase the following:

- Gifts
- Payments to someone to serve as a Program Representative
- Clothing
- Food and beverages
- Electronic entertainment equipment
- Utility payments
- Swimming pools and spas
- Costs associated with travel
- Comforters, linens, drapes, and furniture
- Vehicle expenses including routine maintenance and repairs, insurance and gasoline
- Monthly internet service
- Medications, vitamins, herbal supplements
- Printers
- Yard work
- Illegal drugs or alcohol
- Household cleaning supplies
- Respite services
- Spa services
- Education
- Personal hygiene
- Adult day care
- Discretionary cash
- Additional non-permissible items can be found in the I/DD Waiver Policy Manual

5. Selecting, Hiring, Training and Supervising Employees

Employee Qualifications and Program Requirements

All employees must:

- Be eligible for employment in the U.S;
- Pass a criminal background check for initial employment and every five years;
- Pass the Office of Inspector General (OIG) Medicaid Exclusion List, initially and monthly thereafter;

West Virginia Personal Options – I/DD

- Complete all forms in the Employee Packet and submit them to your Resource Consultant;
- Complete mandatory training for initial employment and annually thereafter;
- Maintain current CPR and First Aid certifications.

Note: Individuals are not eligible for employment through *Personal Options* if the individual has been convicted of certain offenses that may place you at risk of personal health, safety or Medicaid fraud. A listing of exclusionary convictions is available in the I/DD Waiver Policy Manual.

Selecting an Employee

You may hire individuals living in your community or your neighbors, friends, family members to provide your services. You may not hire your spouse or your Program Representative. You should consider the advantages and disadvantages prior to hiring a family member, friend or neighbor:

- Friends and family may be more dependable, easier to find, live nearby and know your needs better. You may feel more comfortable with them in discussing your needs and goals.
- Some disadvantages to hiring friends and family might be that it may be more difficult to supervise them as employees and maintain your personal relationships. It can be especially difficult if you have to fire a friend/family employee.
- If you hire from within the community you may need to place an advertisement, check the postings, ask contacts in your community or view employee profiles from the Personal Options PPL Provider Connect site <https://wv.pplproviderconnect.com/s4s/CustomPage/Index/1>

Interviewing Applicants

Prior to the face-to-face interview you should prepare a list of questions that you will ask each applicant by phone. Write down the name and telephone number of each applicant and take notes to help you remember their responses to your questions.

Do not ask questions that could be considered discriminatory. The following are suggestions for interview questions:

- **What did you like most and least about your previous job?**
- **Are you able to do heavy lifting?**
- **Do you have any previous experience working with or for people with disabilities?**
- **Why are you interested in this type of work?**
- **What qualities, skills or special experience do you believe you would bring to the job?**
- **How would you feel about taking direction from me?**
- **What kind of situations do you find most stressful?**

West Virginia Personal Options – I/DD

- **How do you typically deal with stress?**
- **How would you define confidentiality?**
- **Do you have any questions about the job?**
- **Who are your references that I may contact?**

Without giving your exact address, generally describe where you live and ask if the travel could be a problem. Ask if they are available for the hours and days that you need them. Discuss any special equipment you might use. Near the end of the conversation, ask the applicant if they have any questions about the job and answer them as best you can.

Once all the phone interviews are completed, make a list of who you might want to hire and contact their references. Calling references can help provide more information including past work history and reliability. When you call, explain who you are and why you are calling. Listen to how the person answers your questions. Do they appear to be uncomfortable and hesitate before responding or do they provide direct answers? Remember to take notes.

After completing phone interviews and checking references you will want to schedule a face-to-face interview with your most promising applicants. You might want to have a friend or family member join you for the interview.

Hiring an Employee

When you decide to hire an employee, include in your job offer:

- the days and times the employee will be scheduled to work;
- job duties and responsibilities;
- the services the employee will be providing (Respite or Person-Centered Support) and the hourly wage; and
- the rate of reimbursement for Transportation services (if applicable).

Once these issues have been agreed upon, the employee may complete the paperwork in the Employee Packet.

Training an Employee

The I/DD Waiver Policy Manual requires that employees meet certain requirements and have specific training prior to providing services.

- Employees must pass a criminal background check (CBC) through the WV State Police at the time of employment and every five years thereafter.
- Employees must pass the Office of Inspector General Medicaid Exclusion List at the time of employment and every month thereafter.
- Employees must have and maintain current CPR and First Aid Certification through an approved vendor.
- Employees complete mandatory training in required content areas before providing services and annually thereafter.

West Virginia Personal Options – I/DD

Mandatory Training:

- ✓ Demonstrated ability to perform participant-specific tasks;
- ✓ Emergency Procedures such as implementation of Positive Behavior Support plan and physical interventions (if applicable)
- ✓ Emergency Care including the Crisis Plan and Emergency Back-Up Plan. The Crisis Plan is developed and approved by the IDT and addresses how to respond to medical and environmental emergencies. The Emergency Back-up Plan is developed at the time of enrollment on Personal Options and addresses situations when an employee is unable to report to work as scheduled.
- ✓ Infectious Disease Control (training module provided in enrollment packet)
- ✓ Recognition, Documentation and Reporting of Abuse, Neglect and Exploitation (training module provided in enrollment packet)
- ✓ Participant-Specific Training including review of the participant’s current IPP
- ✓ Current certification in First Aid by an approved vendor including American Heart Association, American Red Cross, etc. Find a complete list on the BMS website.
- ✓ Current certification in Cardiopulmonary Resuscitation (CPR) from an approved vendor including American Heart Association or American Red Cross, upon hire and current thereafter. Find a complete list of approved vendors on the BMS website.

Note: It is the employee’s responsibility to pay for the Criminal Background Check, CPR and First Aid training. PPL and your Case Manager will provide training materials at no cost for the remaining required areas.

PPL will maintain copies of your employees’ criminal background check results, training records and certifications.

Supervising Employees

The relationship you will have with your employees is uniquely intimate. Always remember your basic rights:

- Your employee should do a good job for you
- Your employee should ask you questions about how to do the job you want
- Your employee should arrive to work on time and be ready to work
- Your employee should let you know if they are going to be late
- Your employee should ask for time off by letting you know ahead of time
- Your employee should be courteous and attentive to your needs
- Your employee should respect your personal life. They should not talk about you or your needs to anyone outside of the job.

There is no such thing as the “perfect” employee. We are all individuals with our own unique set of skills and qualities—some good and some bad. There are things we do well and things we do

West Virginia Personal Options – I/DD

not do so well. You must have confidence your employees' ability to perform their jobs. And, most importantly, you must be comfortable with them as a significant person in your life.

Supervision of employees requires that you understand the importance of communication and listening and that you are able to utilize appropriate methods for resolving conflict.

On the Job Training

You should train your employees to provide your services in the manner that best meets your needs and preferences. Clearly explaining your needs will improve the care provided by your employees and help eliminate confusion. There are many things to consider:

- Provide a tour of your home and introduce employees to all family members
- Share important information about your abilities, needs, and preferences
- Explain, demonstrate and have the employee practice some of the assigned duties
- Address safety and security needs
- Discuss your expectations
- Train your employee on documentation and time sheet requirements

6. Employee Timesheets and Payments

Timesheets

Each day your employees should record their hours worked rather than waiting until the pay period. This helps to ensure that you, their employer verify the accuracy of their timesheets before submitting to PPL for payment. (Specific timesheet instructions are included in the binder provided by your Resource Consultant at the time of your enrollment meeting.)

Your employees will be paid every 2 weeks. PPL will pay employees when we receive an accurately completed timesheet. Your employee will submit time sheets according to the payroll schedule provided by PPL. Timesheets submitted after the deadline will be paid late.

Timesheets may be completed and verified in the BetterOnline web portal at <https://fms.publicpartnerships.com/PPLPortal/login.aspx>.

West Virginia Personal Options – I/DD

Pay Checks

As a fiscal employer agent with the State of West Virginia, PPL provides financial management services, including all payroll and tax services. You will not handle any money. Your employee will receive their check from PPL based on the specific pay schedule.

After you approve the timesheet you or your employee should call Customer Service or review the timesheet in the BetterOnline web portal to verify it was completed with no errors that could delay payment. When calling Customer Service you may be asked to provide the PPL identification number, and date of birth and/or your role as it relates to the participant.

Employee Wages

You may set your employee's rate of pay between \$8.75(current minimum wage) and \$ 9.88 (current Medicaid rate for employee services less employer taxes) per hour. Employees that are tax exempt (such as biological or adoptive parents working for their children, among others) are eligible for a maximum rate of \$10.96. PPL will also help you monitor your spending as identified in your approved spending plan.

Taxes

Your employees will be required to pay all applicable State and Federal taxes on the wages earned providing Person-Centered Support and Respite services. PPL will deduct these taxes from your employees' paycheck. Deductions are based on tax forms completed by the employee.

Mileage is not reportable as income, so it is not taxed. It is considered reimbursement for your employee for transporting you. Your employee may also request mileage from DHHR with a Non-Emergency Transportation form. This mileage will be reimbursed by DHHR and will not come from your budget.

Employee Benefits

You may not use funds from your participant-directed budget to purchase health benefits for your employees or pay them for vacations, sick leave, etc.

Overtime Pay

Employees who do not live with the participant will be paid overtime for any hours worked over 40 in one week in accordance with the Fair Labor Standards Act. Overtime will be paid at time and a half and will come out of the participant -directed budget. If you schedule your employee beyond what is budgeted in your spending plan you will be required to pay the overtime outside of your budget.

West Virginia Personal Options – I/DD

Worker’s Compensation

Your employee will be considered a domestic employee of a household employer and as such, unable to purchase worker’s compensation insurance coverage in West Virginia’s Personal Options program. Accordingly, domestic employees are not eligible for worker’s compensation benefits if injured on the job. You may wish to clarify with your homeowner or renter insurance to determine coverage.

7. Program Safeguards

Orientation and Training

A PPL Resource Consultant is available to provide you with orientation and training regarding *Personal Options* including rights, responsibilities, risks, and safeguards.

Program Representatives

Participants may appoint a non-legal representative, such as a trusted friend or family member to assist them with the responsibilities of self-direction as needed. A representative **cannot be** paid to provide this assistance.

Monthly Calls

PPL will monitor your health and safety through monthly phone contacts. Monthly contacts are a requirement of the program and must be completed. You may also call PPL during regular business hours to ask questions or report changes in your condition.

Emergency Back-Up Plan

To ensure your health and safety, you will be asked to develop an Emergency Back-Up Plan for unscheduled absences of employee services.

Timesheet Verification

Careful monitoring will promote timely payment to employees and prevent accusations of Medicaid Fraud. You must report suspected fraud immediately to your Resource Consultant and your Case Manager.

PPL Web Portal

PPL’s BetterOnline web portal provides you the ability to check your budget usage. The portal will prevent planning and spending beyond the approved budget authorization. The payment structure will only allow payments within the monthly budget.

Reporting of Abuse, Neglect and Exploitation

As a participant in the Personal Options program, you are carefully monitored by your employees, Resource Consultant and Case Manager who are all mandated reporters of Abuse, Neglect and Exploitation.

- Abuse is the physical injury or pain or threat of such injury to an individual.
- Neglect is the failure to provide necessities of life to an individual, or the unlawful use of funds or other assets owned or paid to or for the benefit of an individual.
- Exploitation is the inappropriate sexual behavior of persons toward or to an individual.

Reporting Medicaid Fraud

Instances of fraud include, but are not limited to, falsifying information regarding services provided. The I/DD Waiver program is provided through Federal and State Medicaid funds. Misuse of these funds may be considered fraud.

You are expected to contact your Resource Consultant to report instances of suspected fraud. Provide as much information as possible, including:

1. The name of the Medicaid participant and their identifying information.
2. Names and contact information of other parties involved.
3. A description of the suspected fraudulent acts relating to your allegation.

Complaints and Grievances

Personal Options participants who are dissatisfied have the right to complain or file a grievance. A complaint about a program related issue can usually be resolved by PPL. A complaint may be about PPL personnel, disputes between employees and employers, PPL processes, or PPL tools. Please contact Customer Service with a complaint. Personal Options participants are encouraged to discuss concerns with their Resource Consultants or PPL administration in West Virginia.

A grievance is a concern or issue related to Personal Options rules, Case Managers, Kepro, the Bureau for Medical Services, or Public Partnerships. If a Participant has a grievance, there is a grievance form available for this process. The grievance process has 2 levels.

- Level 1 – Meeting with PPL administration within 10 days.
- Level 2 – Meeting with BMS if the grievance is not resolved at level 1.

Involuntary Transfer from Personal Options to Traditional Services

If you demonstrate the inability to self-direct waiver services, either due to a misuse of funds or on-going health and welfare risk, you will be required to appoint a Program Representative to assist you with the responsibilities of self-direction. If you refuse to appoint a Program Representative, you will be required to transfer to the traditional agency option. Your Resource Consultant will assist you in this process.

8. Summary of I/DD Program Responsibilities

Personal Options is a program within the Medicaid I/DD Waiver. As a participant in Personal Options you have some reporting responsibilities. As a participant in *Personal Options*, you also agree to participate in meetings, evaluations, assessments and reporting requirements that maintain your eligibility, and monitor your health and welfare.

What are the requirements?

- **Monthly Phone Contact with the PPL Resource Consultant**
- **Annual Assessment by Kepro Staff**
- **Annual and six month meetings with the Case Manager**
- **Spending plan review with the PPL Resource Consultant**

If you receive notice that you are no longer medically or financially eligible for I/DD services, you have 13 days to appeal the decision. While the appeal is in process, you continue to receive services. If you do not appeal within the 13 days, your services stop and your employees will not be paid.

What am I responsible for reporting?

You are responsible for the following:

- **Changes in Your Plan and Services**
- **Changes to the Spending Plan**
- **Requesting New Service Authorizations**
- **Requesting Transfer to Traditional Services**
- **Reporting Incidents, Abuse, Neglect and Exploitation**
- **Participating in Program Evaluation**

West Virginia Personal Options – I/DD

Participant Resource Information

I/DD PPL Fax Number: 1 (877) 567-0071

PPL Customer Service Center: 1 (877) 908-1757

9:00 AM - 6:00 PM Monday – Friday, except WV State and Federal Holidays. Offers support to participants, employees, and Case Managers. Call to verify receipt of time sheets, questions about your pay and to order more time sheets and documents.

Resource Consultant: Name: _____ Phone: (304) _____

8:30 AM – 5:00 PM Monday through Friday, except Holidays. Call for program questions, to request employee packets and if you are admitted into a hospital or nursing home. If unable to reach your Resource Consultant, please leave a message and the call will be returned within 24 hours.

Kepro: 866-385-8920 or local 304-380-0617, Fax 866-521-6882, email WVIDDWaiver@kepro.com. Call to verify referral process, eligibility assessment process.

Adult Protective Services: 1 (800) 352-6513. West Virginia Department of Health and Human Resources Adult Protective Services. Contact any time to report abuse, neglect and exploitation regarding the Personal Options participant.

Bureau for Medical Services: 1 (304) 558-1700

8:30 to 4:30 Call if you have specific questions regarding Personal Options

Fax Numbers:

PPL IDD Timesheet Fax: toll free 1 (877) 876-8351

PPL Administrative Fax: toll free 1 (877) 567-0071

Public Partnerships Online: www.PPLFirst.com

At the website you can find informational forms, required forms, optional forms, timesheet information and general program information.

Public Partnerships Web Portal: <https://fms.publicpartnerships.com/PPLPortal/login.aaspx>.

A login screen will appear. Login with your username and password you created in the registration process. Registration instructions will be found the PPL website.