

WELCOME!

Public Partnerships LLC welcomes you to PA OLTL Participant-Directed Services (PDS).

Participant-directed services are designed to give you choice and control over your services so that you may live independently in your home and community.

You will be able to select, hire and manage a Direct Care Worker (DCW) who will help you with your activities of daily living. You will be able to determine how services, outlined in your Individual Service Plan, will be provided to you.

Public Partnerships supports Pennsylvania's persons with disabilities, seniors, and their families who make their own decisions about what services they receive, how services are delivered, and by whom. This handbook is designed to guide you through the enrollment process, orient you to your role as an employer (referred to as Common Law Employer) and provide skills and training that will help you be an effective employer. Public Partnerships hopes you use this handbook as your resource guide to refer to when you have questions about Participant-directed services (PDS).

This Handbook answers these questions and others:

- What do I need to do to enroll in participant-directed services?
- Who can work for me to provide my services?
- How long will enrollment take?
- How do I hire workers?
- How do I need to do as an employer?
- How can Public Partnerships help me?
- When can I begin receiving services through Public Partnerships
- How does my worker get paid?
- Can you help me complete my forms?

Public Partnerships will meet with you to help you.

This handbook will address questions you may have concerning Participant-directed services. When Public Partnerships receives your referral from your Service Coordinator, we will call you to schedule an appointment. You will meet with a Public Partnerships' Enrollment Specialist who will visit with you and the worker(s) you would like to hire. The Enrollment Specialist will review important program information, answer any questions, and assist with enrollment in PDS; including the completion and submission of enrollment packets, employer packets, and employee packets.

ADDITIONAL RESOURCES

Many other resources are available for download from the Public Partnerships' website at www.publicpartnerships.com

Visit the Office of Long Term Living (OLTL) Website at <http://www.dhs.state.pa.us/dhsorganization/officeoflongtermliving/>



EMPLOYER ORIENTATION & SKILLS TRAINING HANDBOOK

Office of Long-Term Living
Participant-Directed Services
Public Partnerships LLC
P. O. Box 1108
Wilkes-Barre, PA 18773

CUSTOMER SERVICE

Toll-Free Phone: 1-877-908-1750

TTY: 1-800-360-5899

Email: cs-oltl@pcgus.com

Hours of Operation: Monday – Friday 8:00 am EST – 5:00 pm EST, Saturday 9:00 am EST – 1 pm EST

Over-the-Phone Enrollment: 1-877-908-1752

Hours of Operation: Monday – Friday 8.00 am EST – 6:00 pm EST

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Contact & Quick Reference Information

Customer Service:

Toll Free Phone: 1-877-908-1750
TTY: 1-800-360-5899
E-mail: cs-oltl@pcgus.com

Customer Service Hours:

Monday - Friday: 8:00 a.m. – 5:00 p.m.
Saturday: 9:00 a.m. – 1:00 p.m.

Public Partnerships responds to calls and e-mails within 24 business hours.

Over-The-Phone-Enrollment for New Hires; CLE and DCW call together: 1-877-908-1752

Public Partnerships' Customer Service will only discuss participant information with the participant, the CLE, the Designated Representative, the Service Coordinator, other Public Partnerships' staff who can assist, and staff from the Department of Human Services.

Requesting Forms:

Download forms @ www.publicpartnerships.com

Toll Free Phone: 1-877-908-1750
TTY: 1-800-360-5899
E-mail: cs-oltl@pcgus.com

Public Partnerships can provide program materials in alternate formats and languages. Please contact Customer Service @ 1-877-908-1750 to request information.

Enrollment Forms Fax: 1-855-858-8158

Enrollment Forms E-mail: padpw-oltl@pcgus.com

Mailing Completed Enrollment Forms:

Address: PA OLTL
Public Partnerships LLC
PO Box 1108
Wilkes-Barre, PA 18773-9905

Timesheet Submission:

ELECTRONIC TIMESHEET SUBMISSION:

Public Partnerships' Better Online Web Portal access: <https://fms.publicpartnerships.com/PPLPortal/login.aspx?>

Using Public Partnerships' BetterOnline Web Portal Instructions: www.publicpartnerships.com

PAPER TIMESHEET SUBMISSION

Timesheet Fax: 1-855-858-8162
Or Mail to: Public Partnerships
PO Box 1108
Wilkes-Barre, PA 18773-1108

ELECTRONIC TIMESHEET VERIFICATION

Toll Free Phone: 1-877-908-1750; Option 1

Please wait for three-days (3) from the day the timesheet was faxed in to verify receipt of the timesheet. Please wait for five-days (5) if the timesheet was mailed in to verify receipt of the timesheet.

SECTION 1: Common Terms in This Handbook

In this Handbook, the term **Participant** refers to the individual who is receiving Participant-Directed Services. Participant-Directed Services (PDS) are services that allow a participant to take more control of their services and gives the participant the power to manage their workers. In many instances, the persons receiving services may also become the employer over the workers providing their services.

An employer overseeing workers is known as a **Common Law Employer** or CLE in program materials. The Common Law Employer receives an Employer Identification Number (EIN) through the IRS and is considered the Legal Employer. The Common Law Employer is responsible for managing Direct Care Workers and approving or rejecting the Direct Care Worker's timesheets. The Common Law Employer is either the participant or the participant's representative. The Common Law Employer cannot be a Direct Care Worker. In some cases, the participant may designate another individual to become the Common Law Employer (CLE). For ease of instruction Common Law Employer or CLE is used throughout this manual.

A participant or the Common Law Employer can also designate an individual, known as a **Designated Representative**, who may call into Customer Service and obtain information on behalf of the participant or Common Law Employer. This individual may also approve timesheets on behalf of the participant if necessary. For an individual to become a Designate Representative, the participant or Common Law Employer must complete a Designated Representative Form.

A **Direct Care Worker** refers to a person hired by a Common Law Employer (CLE) to provide services approved by the Pennsylvania Department of Human Services (PA DHS), Office of Long-Term Living (OLTL), Participant-Directed Services (PDS) Program. The services the Direct Care Worker will provide are in the Participant's **Individual Service Plan (ISP)**, which details the needs and wants of the Participant. References to a Direct Care Worker are shown as **DCW** in Public Partnerships program materials.

The **Service Coordinator** coordinates services for the Participant.

Public Partnerships is the vendor (also referred to as a Financial Management Service provider) contracted by PA DHS to assist Participants with employment-related paperwork, payroll functions, and tax withholding and filing. Public Partnerships *is not* the employer of the Direct Care Workers (DCW's).

Public Partnerships serves as the financial institution for **Financial Management Services (FMS)**, to issue payment for all qualified Direct Care Workers.

Public Partnerships is also the **Fiscal/Employer Agent (F/EA)**, and assists participants with the responsibilities of PDS such as processing payroll and performing required tax functions.

The **Pennsylvania Department of Human Services (PA DHS)** provides the compliance requirements and oversight for Medicaid and State-funded programs, including Medical Assistance, SNAP, TANF, child care, child welfare, and other programs that improve the quality of life for Pennsylvanians.

The PA DHS **Office of Long-Term Living** provides the compliance requirements and oversight for Medicaid and State-Funded programs.

PARTICIPANT-DIRECTED SERVICES KEY TERMS AND THEIR DEFINITIONS

TERM	DEFINITION
Authorization(s)	When Public Partnerships refers to "authorizations" this means specific services approved in a Service Plan. The authorization provides Public Partnerships the approval to pay timesheets based on the time period and number of units (or dollars) that you have been approved to receive.
Blaze	Auto-generated phone call recording providing you important information. Please follow instructions provided by the message
Check or Direct Deposit Issued Date	This is the date that Public Partnerships will cut your paycheck and either mail it or upload it to your bank for direct deposit.
Common Law Employer (CLE)	This is the term used to define the Employer type utilized in program services. This individual receives an Employer Identification Number through the IRS and is considered the LEGAL Employer. This individual is responsible for managing DCWs and approving or rejecting timesheets. The CLE is either the Participant or the Participant's representative except in the Attendant Care Waiver or Act 150 program where the Participant must be the CLE.
Denied	This is a timesheet status which means that Public Partnerships is unable to pay the timesheet as it was submitted. You may need to resubmit a corrected timesheet in order to be paid.
Designated Representative (DR)	This is an individual designated by the Participant and/or CLE (by completing a Designated Representative Form) that may call into Customer Service and obtain information on behalf of the Participant or CLE. This individual may also approve timesheets on behalf of the Participant if necessary.
Direct Care Worker	This is an individual who provides hourly services to the Participant.
Emergency Contact	This is an individual whom Public Partnerships may contact in case of an emergency if the CLE, Participant or DR is unavailable.
Good to Go	This is related to the enrollment status of a Participant and their Direct Care Worker. It means that Public Partnerships has received and processed all the Participant's employer/employee paperwork and it is complete and correct. It also means all required background checks have been passed and/or approved by the CLE.
Good to Pay	This is a timesheet status which means that the timesheet has been approved and will be paid on the next scheduled check run date.
Participant	This is the individual receiving services.
Pay Period End Date	Pay Periods are bi-weekly; the pay period end date is the last date in that pay period. Be sure not to cross pay period dates on the same timesheet.
Pay Period Start Date	Pay Periods are bi-weekly; the pay period start date is the first date in that pay period. Be sure not to cross pay period dates on the same timesheet.
Pay Schedule	You will be paid for bi-weekly timesheets. This document outlines what days a pay period covers, when timesheets should be submitted and what date you should expect a timesheet to be paid.
Pending	This is a timesheet status which means that there is an issue with your timesheet that is preventing it from being paid.
PPL Web Portal	This is a website where a participant can review their authorizations and approve/reject electronic timesheets and where a DCW can submit electronic timesheets. The web portal is called the BetterOnline web portal.
Support Ticket	Documentation of information provided to a caller who has called in or e-mailed Public Partnerships' Customer Service.

Timesheet Received Date	This is the date and time by which Public Partnerships must receive your pay in order to pay it by the check issue/deposit date.
Vendor	This is an individual or organization which provides Goods & Services (only applicable to Participants enrolled in "Services My Way").

SECTION 2: Common Law Employer Information

Individuals who receive Participant-Directed Services (PDS) are known as Participants in the program. Participants employ Direct Care Workers (or DCW's) to provide their services. In PDS, Participants who employ Direct Care Workers are called *Common Law Employers* or CLEs. The Common Law Employer will decide who provides direct care services to the Participant, and when and how the services will be provided. The CLE is the Employer for the Direct Care Worker(s) and payments made to the Worker(s) are delivered by Public Partnerships using OLTL Medicaid funds. The CLE should discuss with the Direct Care Worker their willingness, ability, and skills necessary to self-direct services.

A Participant may, in some programs, appoint another individual to be the CLE. A Participant who is interested in this option should contact their Service Coordinator to see if it is permitted. Public Partnerships will provide the forms needed for the chosen individual to become the Common Law Employer. This Handbook provides additional discussion about these forms.

Common Law Employer Responsibilities

To employ workers, the CLE must agree to be responsible for some key employer-related tasks. They will be required to attest to their willingness to perform these responsibilities by providing their signature when they complete enrollment materials. As a Common Law Employer, responsibilities include to:

- Recruit, hire, train, manage and dismiss, if necessary, Direct Care Workers (DCW(s)). Additional information on this topic is available in this Handbook.
- Verify DCW(s)' qualifications. Ensure that DCW(s) complete the enrollment process, including completion of all required forms. (Public Partnerships provides all enrollment forms the Participant, and their DCW(s) need to complete). These forms will establish an agreement between the Participant and their DCW. The forms will include the DCW's hire date, wage rate, job title, and provide the DCW important information regarding the employment policies and rules.
- Train DCW(s) to perform the services that are specified in the Individual Service Plan created by the Service Coordinator.
- Decide how much to pay DCW(s) within the established wage range provided by OLTL.
- Develop and implement a backup plan. (The Service Coordinator can assist in creating a backup plan.)
- Approve and submit all worker time and invoices. (Additional information is available in this Handbook.)
- Evaluate the performance of their DCW(s).
- Establish work schedules and tasks that the DCW(s) will deliver. (Additional information is available in this Handbook.)
- Report suspicions of Medicaid fraud or financial abuse related to the delivery of participant-directed services.

Additional Common Law Employer tasks are included in the Common Law Employer Agreement which is signed, and agreed to, by the CLE. Public Partnerships provides this form during the enrollment process.

Other Support Individuals

Designated Representative: Regardless of whether the Participant is the CLE, in most programs they may choose to appoint a Designated Representative, such as a trusted friend or family member, to assist them with some of the responsibilities of self-direction. A Designated Representative cannot be the DCW or be paid for their services.

The representative must show a strong personal commitment to the Participant in assuring their services are received. They must be respectful of the Participant's preferences and be willing to assist them with self-direction. If the Participant chooses to appoint a Designated Representative, they will need to complete a Designated Representative Form. Public Partnerships can provide this form, or you can download it from our website @ www.publicpartnerships.com.

Emergency Contact: Emergency contact information will be provided to Public Partnerships by your Service Coordinator at the time of your referral. You may update this information at any time by calling Public Partnerships' Customer Service @ 1-877-908-1750.

The Role of Public Partnerships in Participant-Directed Services

Public Partnerships provides Financial Management Services on behalf of the Participant. Public Partnerships is the contractor chosen by the Office of Long-Term Living (OLTL) to support the Participant, and their employer role, by performing some key tasks on their behalf. Some of these key tasks include:

- Providing pre-populated Common Law Employer tax forms and DCW enrollment packets.
- Offering in-home or over-the-phone meetings with a Public Partnerships' Enrollment Specialist, to complete CLE and DCW paperwork.
- Processing and reviewing completed CLE and DCW paperwork.
- Performing all necessary record checks on prospective DCWs.
- Maintaining electronic copies of CLE and DCW paperwork.
- Issuing payments to DCWs bi-weekly with the receipt of properly submitted timesheets.
- Providing payments to vendors on behalf of Participants enrolled in the Services May Way (SMW) program.
- Withholding, submitting and reporting employer/employee local, state, federal, and other taxes.
- Filing monthly, quarterly, and annual forms and tax deposits with state and federal agencies.
- Issuing W-2 statements to each DCW in January.
- Procuring a workers' compensation insurance policy for DCWs
- Providing monthly reports to manage budgeted hours (or dollars, if SMW)
- Providing 24/7 online access to information via PPL Web Portal.
- Providing support for the Public Partnerships' BetterOnline web portal
- Providing toll-free customer service via phone, fax, and email
- Providing translation and interpreter services.

Public Partnerships also has Enrollment Managers who assist Service Coordinators, on behalf of Participants and DCWs, with the enrollment process. Some of the Enrollment Manager's key tasks include:

- Serve as the main point of contact for Service Coordinators
- Respond to day-to-day participant-direction inquiries as requested by the Service Coordinators
- Assist with researching escalated inquiries brought to their attention by Public Partnerships' Customer Service or Service Coordinators
- Support the training and educational needs of the Service Coordination Entities and Service Coordinators
- Inform Service Coordinators and Service Coordination Entities of significant changes or updates to the BetterOnline Web Portal.

SECTION 3: Enrollment in Participant-Directed Services

Once a Participant is determined eligible for services they work with a Service Coordinator who assists in developing a Service Plan that meets their needs. The Service Coordinator submits a referral to Public Partnerships letting us know that they have chosen Participant-Directed Services as part of their Service Plan.

Some Participants choose to hire their DCWs as well as utilize an agency for some of their service needs; this combination is referred to as a Combination Model of Service. Public Partnerships only supports the participant while they are utilizing Participant-Directed Services.

The Enrollment Process

Following is a description of the *Enrollment Steps* that need to be completed by the Participant and their Direct Care Worker for them to become enrolled with Public Partnerships and to begin receiving services.

STEP 1

Public Partnerships receives referral information from a Service Coordinator for an individual who is interested in Participant-Directed Services.

STEP 2

Review, Sign, and Date the CLE Enrollment Documents that Public Partnerships mails. In most cases, the CLE will only need to confirm that the information on the enrollment forms are correct since they are pre-populated with information provided by the Participant's Service Coordinator. Forms should be sent to Public Partnerships in the postage-paid envelope provided.

STEP 3

The Participant/CLE and the potential worker will call the Public Partnerships' Over-the-Phone-Enrollment Team at **877-908-1752** to start the hiring process. Public Partnerships will then mail a Direct Care Worker Packet to the Participant/CLE, that contains the information of the individual(s) who want to work for them. This handbook provides a great deal of information to assist in hiring a Direct Care Worker (DCW).

**A Participant may, instead, mail in the two-page application form sent to them by Public Partnerships; but calling the number above reduces enrollment processing times.*

Public Partnerships will call the Participant/CLE to schedule a CLE Orientation Visit with an Enrollment Specialist who will review important information, answer questions, and assist with the completion of the CLE and DCW enrollment documents. CLE Orientation Visits can also be scheduled by calling 1-855-388-4090.

STEP 4

Review, complete and sign the DCW documents mailed to the Participant/CLE, in a second mailing, by Public Partnerships. These documents are largely pre-populated based on the information provided in STEP 3 above. Mail the form in the postage-paid envelope provided by Public Partnerships.

STEP 5

Review the CLE handbook while Public Partnerships completes the enrollment process. Public Partnerships reviews the completed and signed documents and processes any background checks that are required. Public Partnerships may contact the CLE for additional information if missed on the forms and may send back documents for the CLE to review and correct with their potential worker. These should be mailed back to Public Partnerships as soon as possible to prevent delays.

When all background checks are complete, and all forms are done, Public Partnerships will verify that an Authorization for Service is received from the Service Coordinator. Public Partnerships will notify the Service Coordinator if an Authorization for Service is not received.

STEP 6

Read, completely, the Good to Go Welcome Packet. Public Partnerships will send a "Good to Go" Welcome Packet to the CLE in a third mailing. This packet includes a letter stating that the CLE and one or more workers are now Good to Go.

STEP 7

The CLE can now begin scheduling their DCW(s) to provide services.

Completing Enrollment Forms

Public Partnerships will send enrollment forms, with instructions. The forms include the Common Law Employer (CLE) Pre-Populated Forms. The Participant needs review and confirm that the information provided to Public Partnerships by their Service Coordinator is accurate. If the information on the pre-populated forms is correct, they will only need to sign and date all forms. If there is incorrect information on the forms, please contact Public Partnerships so we can update the information and send corrected forms. Please do not sign any forms if the information is incorrect. Please do not use white-out on enrollment forms. These forms can be broken down into two sections: Required Forms and Forms Available upon Request. Samples of the titles of the required CLE pre-populated forms and a short description of each form's purpose are below:

Required Forms

1. **Confirmation of Employer Information Form:** This form verifies the demographic information of the CLE. If it is correct, the CLE should sign the required forms in the CLE Packet. If any information is incorrect, please call customer service, 1-877-908-1750, to receive a corrected CLE Packet.
2. **IRS Form SS-4:** This form allows Public Partnerships to obtain an Employer Identification Number (EIN) which is used to open state employer accounts and designate all tax deposit and filing responsibility to Public Partnerships. All federal payroll related transactions that Public Partnerships reports on the Participant's, and their workers' behalf, will be associated with the EIN obtained when Public Partnerships submits this form. (NOTE) If the Participant has previously obtained an EIN, please check "Yes" in line 18 and write their EIN in the space provided.
3. **Form 2678:** permits Public Partnerships to represent the Participant and to withhold, submit and report all federal related payroll taxes on their behalf. If they have a Power of Attorney (POA) sign their forms, please provide the POA document.
4. **Form 8821:** allows Public Partnerships to receive and discuss federal payroll related tax matters, related to the Participant's EIN, on their behalf. This form only allows Public Partnerships to talk and write to the IRS. Public Partnerships cannot make decisions about the Participant's personal life.
5. **Common Law Employer Designation Form:** The two pages of this form, formally designate the Participant as the Common Law Employer or appoints another appointee as the Common Law Employer. By checking one of the three checkboxes and signing, the CLE is stating that they understand and agree to the attestation of responsibilities.
6. **Common Law Employer Agreement Form:** The three pages of this form provide the list of responsibilities of the CLE, the program rules and lists an Emergency Contact for the Participant. By signing this form, the CLE states they understand and will be compliant with program rules. (NOTE) the CLE must maintain a copy of this form.

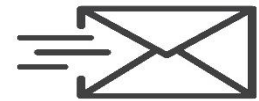


Additional Forms

- **Vendor Payment Request Form:** requested by calling Customer Service. This form is only for Participants enrolled in Services My Way who received Participant Directed Goods and Services (PDGS).
- **Designated Representative Form:** This optional form is available for CLE's who would like an additional individual to support the CLE. The Designated Representative duties may include scheduling workers, signing timesheets, contacting PPL for assistance.
- **Criminal History Background Check Participant/CLE Acceptance of Responsibility Form:** If the new hire has a criminal record, Public Partnerships will notify the Participant. If the Participant would like to hire a worker with a criminal history, they will be required to complete this form. Public Partnerships will mail this form with the new hires' criminal record.
- **Qualified Direct Care Worker Rate Sheet.** The Participant will receive this form with instructions for completion when they hire a new worker. They may also submit this form if they increase their worker's wage.
- **DCW Termination Form:** If the Participant needs to terminate their worker for reasons, such as poor performance, they can request a termination form so that Public Partnerships can update the status of the worker.

Mailing Completed Enrollment Forms

Once the Participant has completed all CLE forms, they need to submit them to Public Partnerships in the attached postage-paid envelope so that we can review the materials for completion. If the postage paid envelope is lost, please remit all forms to:



PA OLTL
Public Partnerships LLC
PO Box 1108
Wilkes-Barre, PA 18773-9905

Or, even better, save time by faxing or e-mailing the forms!

Enrollment Forms Fax:
1-855-858-8158

Enrollment Forms E-mail:
padpw-oltl@pcgus.com

Pre-existing Employer Identification Number.

The IRS requires that a CLE have an Employer Tax Identification number. How do you know if the Participant already has an Employer Identification Number (EIN)? If they owned a business or received Participant-Directed Services, previously, they may have an existing EIN. To prevent delays, please contact Public Partnerships Customer Service at 877-908-1750.

Direct Care Workers (DCW) Application Form, with Instructions.

The DCW Application Request Form is to be completed with the Participant's worker(s). Public Partnerships recommends that Participants complete this 2-page form, that is mailed to the Participant in the same mailing as the CLE pre-populated forms, before calling the information in to our processing center. Call-in information is located on the form. This form can also be mailed to Public Partnerships. Mailing in the form may delay the workers' application processing time. Once Public Partnerships has entered the information into our system, Public Partnerships will then send a pre-populated New Direct Care Worker packet to review with the worker(s).



**New Direct Care Worker (DCW)
Application Request Form**

The Pre-Populated Direct Care Worker Forms

Once Public Partnerships enters the DCW Application Request Form, Public Partnerships will mail pre-populated DCW forms to be completed and signed by the Participant with their DCW. The DCW will need to complete some forms that Public Partnerships are not able to pre-populate. Public Partnerships has provided instructions to assist the DCW in completing any forms that are not pre-populated. If there is incorrect information on the forms, please contact Public Partnerships so that we can update the information and send corrected forms. Please do not sign any forms if the information is not correct. Please do not use white-out

on forms. Submit the completed DCW forms to Public Partnerships in the enclosed postage-paid envelope so we can review the completed forms. If the postage paid envelope is lost, please remit all forms to:

PA OLTL
Public Partnerships LLC
PO Box 1108
Wilkes-Barre, PA 18773-9905

Enrollment Timeframe

Enrollment forms completion. The time it takes to enroll the Participant, and their workers will depend on several factors including the time it takes to ensure that all forms are completed correctly. CLE's should review the instructions that are provided with enrollment forms. Upon receipt of incorrect or missing information on enrollment forms, Public Partnerships will either call to gain needed information or will mail out forms to correct the errors. It is important to return the forms to Public Partnerships as soon as possible so that there are no delays in enrolling workers. Public Partnerships estimates the enrollment process to be from one (1) week to thirty (30) days from the time Public Partnerships receives the enrollment material.

Background Clearance Checks. The number and type of background clearance checks required for the worker will also have a major impact on the time it will take to enroll a worker. The table below shows the timeframe for processing three types of background checks. Workers cannot begin working before all documents are processed accurately and all background checks have been completed and signed off on by the CLE. If there has been no contact from Public Partnerships about the status of a worker's enrollment, beyond the maximum timeframe listed, please call Public Partnerships' Customer Service.

TYPE OF CHECK	IS REQUIRED....	The timeframe for completing forms and background checks
STATE POLICE	ALWAYS	3 Days to 30 Days
CHILD ABUSE HISTORY	IF THE PARTICIPANT HAS A CHILD IN THE SAME HOME WHERE THE WORKER WILL BE PERFORMING SERVICES	30 Days
FBI CHECK	If the worker has not lived in PA, continuously for two years	14 Days to 30 Days

Public Partnerships Assistance Through the Enrollment Process

Public Partnerships is committed to assisting the Participant through the enrollment process. There are several ways we will reach out to notify the Participant of enrollment forms, or other, issues:

- **Blaze** – Public Partnerships utilizes an automatically generated phone message that calls CLE's for a few reasons. The first is to let them know that corrections are needed and the second is for missing information needed for enrollment. The CLE should call the Customer Service number provided to receive assistance on form completion.
- **Email** – Public Partnerships sends forms that need to be corrected, along with an explanation of the correction needed, to the CLE to review and update with the Direct Care Worker (DCW).
- **A phone call to Service Coordinators** – Public Partnerships reaches out to Service Coordinators to gain information.
- **A phone call to Participants** – Public Partnerships program staff may reach out to the Participant directly to assist with the enrollment forms.

The C#. The E#. How Public Partnerships identifies the Participant and DCW.

When the Participant begins the enrollment process, they will receive a reference number that begins with a "C" and is followed by numbers. Public Partnerships utilizes the "C#" to locate the Participant's information in our system. This number is also used to submit time for their workers.

When the applicant begins the hiring and enrollment process, a reference number will be assigned that begins with an "E" and is followed by numbers. Public Partnerships utilizes the "E#" to locate the worker information in our system if needed. The E# is for reference only and does not guarantee employment. This number is also required for submitting time for workers. Note: If the

new DCW already works for another participant through Public Partnerships, they must still complete the entire DCW enrollment paperwork; however, their “E#” will stay the same.

Review, Sign and Date Forms

Public Partnerships has made every effort to make completion of enrollment and other forms easy by providing pre-populated forms and instructions. The Participant should review all the forms they sign and date. Their signature on program forms means that they understand and agree to the information on the forms and that they agree to follow the program rules included on the forms.

Please contact Customer Service if there are any questions about the Pre-Populated Direct Care Worker Forms.

Customer Service: 1-877-908-1750

Public Partnership’s ‘Good to Go’ Notification

‘Good to Go’ Notification (Welcome) Packet. Public Partnerships will review the completed DCW Forms and apply for the required background checks. Once the Participant has completed the enrollment process, Public Partnerships will mail them a Welcome Packet that includes the ‘Good to Go’ notification and a Welcome Packet. Once they receive this, they may begin scheduling workers to provide services. The packet includes:

- A Welcome Letter with your “Good to Go” date
- A unique Public Partnerships ID number
- Public Partnerships’ Payroll Schedules
- Timesheets & Instructions
- Key Program Rules
- Instructions on submitting timesheets electronically and using Public Partnerships’ BetterOnline web portal
- Information on Workers’ Compensation and keeping workers safe in the Participant’s home
- Please Remember that the DCW cannot begin working until both the Participant and their worker are “Good to Go.”

Section 4 Recruiting and Hiring Workers

A CLE will want to hire qualified workers to ensure they can provide the services that the Participant needs as specified in the Individual Service Plan. The Individual Service Plan is developed by the Participant and their Service Coordinator. The Service Coordinator can provide the Participant with a copy of their Service Plan. Please have the worker review the Service Plan before beginning services so that they are aware of their roles and responsibilities.

TIP: Back-up worker. Be sure to hire a worker to serve as a back-up in case the primary worker is not able to provide services at some time.

Developing a Task List (job description) and Work Schedule

Before recruiting workers, the Participant may want to develop a task list. This list will help Participants clearly define what services they need when interviewing potential workers. The Service Plan can be a guide to help the Participant define the tasks authorized for payment to their worker.

Once the Participant and their Service Coordinator have identified the tasks in their Service Plan, they can determine a work schedule which should include the days of the week and the times of the day the work will be done. Below is a sample schedule.



Eating



Bathing



Dressing



Transferring



Toileting



Walking or moving around

What tasks are approved in my service plan?

DAYS OF THE WEEK	SUN	MON	TUES	WED	THURS	FRI	SAT
Bathing	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____
	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____
Dressing	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____
	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____
Toileting	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____
	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____
Meal Preparation	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____	AM _____
	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____	PM _____

What days do I need work done?

What hours should the tasks be performed?

The CLE Determines which DCW(s) to Hire

Once the Participant has determined what Service Plan tasks are needed to be performed by a worker, the CLE must choose a worker or workers to hire. A CLE may hire relatives (excluding a spouse), neighbors, friends, and other acquaintances. A SPOUSE, LEGAL GUARDIAN, or POWER of ATTORNEY cannot be a worker. If the Participant does not already have someone in mind to provide them with services, consider networking with others to let them know you are looking for a worker(s). Leads may come from other program participants, neighbors and friends, church members, Senior Center staff, and others.

Writing an Ad

A CLE may decide to recruit workers by advertising. Places they may choose to advertise might include, local newspapers, local colleges that offer healthcare fields of study and internet sites, ie.craigslist.com. A CLE may also use Public Partnerships' MyChoice4Care™ provider directory.

Public Partnerships' MyChoice4Care Provider Directory

Public Partnerships' provider directory allows Common-Law Employers to search a database of available workers. This Directory includes current workers in the Participant-Directed Services program who are looking for more hours to work. Go to www.mychoice4care.com to set up a Provider profile and preferences today! Please visit the Public Partnerships' website for more information and tips on creating a great profile. Any direct-care workers hired by Common-Law Employers through Public Partnerships' MyChoice4Care directory will still need to complete the enrollment process before they can begin working for the Common-Law Employer.

An advertisement should be concise to keep ad costs low and to make sure the message is clear. It should be specific enough to attract qualified and willing applicants.

Be sure to include the following when placing an ad:

- The key duties to be performed
- Days of the week to be worked
- Time of the day to be worked
- Wage range
- Skills required or level of training desired (LPN, HS diploma)
- Transportation needs
- Location where work is to be done

Place an advertisement in the classifieds section under the MEDICAL/HEALTHCARE/HOMECARE heading so it can be viewed by those who have interest in and who have qualifications that coincide with the services the Participant is requesting. Run an ad on Sunday in newspapers to maximize the number of viewers who may be potential candidates. Take advantage of newspapers that run ads in online editions too. A sample ad is below.

In-Home Care Needed.

Meal prep.; Bathing.

Downtown Mercer

M-W-F, 9-3.

College students are welcome to apply. Refs. Req'd. \$11/hr.

Call Jane @ 614-123-4567. E.O.E.

Phone Screening

It is important for the Participant to be organized when applicants are called so that each applicant can be fairly evaluated. Keeping a notebook by the phone will assist them in recording information about potential applicants. Write down the applicant's full name and phone number. Be sure to have a list ready of job duties to be performed by the candidate. Write a list of questions to ask before responding to calls. Good questions to ask include:

- Are you from the area?
- Do you have a valid driver's license?
- Do you have any related work experience?
- Are you able to work the hours needed?
- When are you available to start?
- Do you have references?
- After hearing the job duties, are you interested in the position?

If the Participant decides they would like to interview the candidate, set up an interview time allowing for one to one and ½ hours to avoid schedule conflicts. Be sure to repeat the date and time of the interview, to ensure everyone has the same understanding. Request a cancellation call if the applicant cannot make it or if the applicant determines that he or she is no longer interested in the position.

Interviewing

There are minimum requirements for workers who want to work. They are:

- Be 18 years of age or older
- Have the required skills to perform the services specified in the ISP
- Possess the ability to communicate effectively with the Participant

- Possess a valid social security number
- Have a criminal background check performed by Public Partnerships before starting work
- Demonstrate to the Participant's satisfaction the competencies needed to perform paid tasks as specified in the Service Plan or be willing to receive training to obtain critical skills or competencies.
- Have a valid Driver's License if the person will provide transportation

The Participant may have additional requirements depending on the type of tasks needed.

Conducting the Interview – Steps for interviewing

The interview will be successful if the Participant is organized and prepared before each interview. Be sure to have:

- A list of questions or topics to discuss during the interview
- A notebook to record answers, comments, and follow-up information with the interviewee
- A list of any special equipment– show the applicant the equipment he or she would be required to operate and explain that training will be available for its use
- A list of the tasks to be performed and anticipated work schedule for the candidate to review

Public Partnerships recommends that interviews be done at a location other than the Participants' home. Good places to meet may include a library, a coffee shop or a café or another family member's home. The Participant may also want to have someone co-interview with them.

By law, the interviewer cannot ask about:

- Private organizations a candidate belongs to
- Religious affiliations
- Date of birth (except when that information is required for satisfying minimum age requirements)
- Lineage, ancestry, national origin, descent, parentage, or nationality
- Names and addresses of relatives other than a spouse and dependent children
- Sex or marital status
- Height or weight, unless the Participant can show that the information is essential for the duties of the position
- Physical or mental disabilities - However, it is permissible to ask if the applicant has any disabilities that would prevent him or her from satisfactorily performing the job.

'Civil Rights Acts of 1964 and 1991, the Age Discrimination in Employment Act of 1967, and the Americans with Disabilities Act of 1991.

The Interview Process:

STEP 1: DURING THE INTERVIEW, THE PARTICIPANT SHOULD:

- Introduce themselves and their co-interviewer/support person.
- Describe their disability to the candidate.
- Describe how work performed supports their daily living requirements.
- Describe the qualities they value in a worker.
- Encourage casual conversation to make their applicant feel at ease.
- Ask questions that are open-ended to prevent yes/no responses and elicit more detail.
 - Ask the applicant to describe their previous work; tasks performed.
 - Ask the applicant likes/dislikes of previous work.
 - Ask the applicant why they left previous employers.
- Listen to the candidate to determine whether they:
 - Answer questions completely.
 - Give responses that satisfy the Participants.
 - Demonstrate enthusiasm and interest in the position.

STEP 2: SET EXPECTATIONS. IT IS IMPORTANT DURING THE INTERVIEW TO DO THE FOLLOWING:

- Discuss the wage the Participant will offer the worker
- Outline a DCW's pay periods. Public Partnerships issues payment 14 days after the last day of the pay period. Direct Deposit payments deposit to their bank account on payday; paper checks will be mailed on payday
- Review the tasks needed and the work schedule as well as any work schedule flexibility

- Provide the type and timing requirement of notice they require if the DCW is unable to work
- Define their preferences for calling in sick
- Advise the candidate of their smoker/non-smoker policy
- Advise the candidate if they have pets
- Discuss their “hands-off” rules regarding their personal property

STEP 3: ALLOW FOR QUESTIONS

- Address questions candidly
- Write a list of questions the candidate asks that the Participant will address at a later time

STEP 4: IDENTIFY REFERENCES

- Obtain personal references from the candidate
- Obtain professional/work references from the candidate
- Consider requesting a signed waiver from the candidate allowing them to discuss work history with their references. A sample reference form is below

Sample Reference Authorization

Name (Please print) _____

I request < Reference Name> to serve as a reference for me. The purpose of this reference is for consideration for employment.

The reference may be given in the following form(s): (check one or both spaces)

_____ written _____ oral

I authorize the above person to release information to <Participant Name> and provide an evaluation of my work performance and character.

This authorization is valid for two (2) months from the date of my signature below.

Signature

Date

STEP 5: DETERMINE NEXT STEPS

- Discuss the timeframe in which they plan to make a decision
- Discuss any follow-up items they may need from the candidate
- Review any follow-up items they need to provide to the candidate

Sample Reference Questions

1. I am considering hiring this person for personal assistance work that will be provided in my home. Some key duties are <describe>. Do you think this person would be a good fit for the job?
2. When did this person work for you?
3. What was this person's job with you? Can you describe the key responsibilities of their job with you?
4. Were there any problems with:
 - A. Attendance
 - B. Reliability
 - C. Honesty
 - D. Integrity
5. Would you consider this person for rehire? Why/Why not?
6. Is there anything else you would like to share with me about this person?

To Make the Hiring Decision

- Review all information from screening and interviewing
- Determine which candidates possess the skills, experience, and traits they value
- Choose top candidates and prioritize their hiring preference
- Consider hiring two or more workers; at minimum one primary worker and one backup worker
- Notify selected candidates and determine a potential start date
- Schedule time to complete all Direct Care Worker forms and have the criminal background check completed. Remember that Public Partnerships is available to assist with form completion

Hiring the Chosen Candidate(s)

- Negotiate a wage with the worker; Public Partnerships will provide the maximum wage that the program allows a Participant to pay their worker
- Review all forms for completeness and accuracy to avoid delays
- Send forms to Public Partnerships for processing
- Remind the candidate that a least one background check is required; additional background checks may be necessary.
- Public Partnerships will notify them in writing when all documents are complete and when their worker can provide services – this is known as the “Good to Go” notification.
- Public Partnerships cannot pay workers for time worked before the “Good to Go” notification is sent
- DCW Enrollment usually takes between one to four weeks to complete
- Background checks may take longer to receive and process
- Public Partnerships will provide the Participant with any criminal history results for their candidate. Based on the results, Participants may choose to waive criminal history results and hire their candidate or, they may choose not to hire the candidate

Training

Most people have preferences for the way their services are performed. Therefore, they will need to provide training for new employees. Here are some suggestions to help with employee training:

- Explain the Participant’s service needs as outlined in their Service Plan
- Develop a training plan
- Explain each task the DCW will perform
- Explain technical words they may use
- Describe each step carefully
- Stress safety
- Train on equipment they use and give detailed instructions
- Review what to do in an emergency:
 - Provide a list of emergency numbers
 - Provide a list of medications
 - Review their medical condition and what emergencies they might face
 - Review the actions the worker should take in case of a medical emergency.
- Have the worker repeat instructions back to them to ensure comprehension
- Be patient and respectful
- Be aware of their workers’ feelings
- Consider using another trainer who is aware of their routine/equipment/needs
- Be consistent and try not to change the routine
- Establish expectations for good work habits on day one
- Give their employee feedback
- Correct mistakes
- Praise good work
- Evaluate their employee’s work and behavior
- Emphasize that they, as the employer, are the decision maker

Supervising

Supervising and evaluating their employee(s) will be an on-going task for them as an employer. Good supervision can improve both the quality of assistance they receive and their relationship with their employee(s). In participant-direction, they are the supervisor for their employee(s). As a supervisor, they will direct, oversee and manage the DCWs who work for them. Supervising is more art than science. They will need to work with their employee on what style of supervision works best for the Participant and their DCW. Participants need to:

- Provide ongoing training
- Monitor their employee's work
- Be clear about what they want
- Work with their DCW(s)
- Learn to say "no."
- Be in charge
- Deal with problems
- Take disciplinary action when necessary
- Praise their employee
- Treat employees with respect

Dismissing a Direct Care Worker

Most people do not like dismissing or firing someone. However, sometimes an employee they hired may not work out. People change, and situations change. If they find their employee is not meeting their needs, they may have to dismiss that person. Keeping a hiring agreement up-to-date and keeping a regular schedule for reviewing their employee's job performance can help them decide if they have grounds for dismissal. Participants should weigh all their options before they dismiss an employee. Sometimes trying to correct problems with an employee might be a better option since hiring a new employee will take time and effort, and there is no guarantee a new employee will be a better worker. In the event they terminate an employee, they will need to notify Public Partnerships of this change immediately. They should complete the Direct Care Worker Termination Form and mail it to Public Partnerships within 24 hours of terminating their DCW or call Customer Service to report their DCW's termination. The Direct Care Worker Termination Form and Instructions are provided to the Participant in the CLE New Employer packet. They may also download the form from the Public Partnerships website or call Customer Service at 1-877-908-1750 for a form to be mailed to them. Once the CLE has completed signed and dated the form, it should be sent to Public Partnerships. Be sure to list the date and reason why the Direct Care Worker is no longer employed. The information provided on this form will help determine whether the Direct Care Worker is eligible for unemployment benefits. Please make sure their terminated worker submits their final timesheet as soon as possible. For immediate terminations, please contact Customer Service. It could take some time to hire a new worker (Please refer to page 10; Enrollment, DCW Application Form). Contact their Service Coordinator about implementing the backup plan or making other arrangements to obtain services.

State Unemployment Insurance (SUI)

If the Participant is permanently terminating or temporarily not receiving Participant-Directed Services, their Direct Care Worker may be eligible to receive unemployment insurance benefits. The Participant should advise their DCW that they have a right to apply for unemployment insurance benefits. Once Public Partnerships receives notice that the DCW has applied for unemployment benefits, it will provide the required wage and termination history to the regional State Unemployment Insurance Office.

How Does the Participant Provide a Safe Work Environment for Their Direct Care Worker?

Just as the Direct Care Worker must ensure the Participant's safety, they have the same duty toward them. Looking out for the Direct Care Worker's safety can prevent injuries that could result in Direct Care Worker's Compensation claims and put the Participant's health and safety in jeopardy by possible lack of coverage for their care needs. Participants should:

- Conduct a tour of their home
 - Look for anything that could be a safety hazard, such as possible tripping hazards like rugs or sharp edges
 - Make sure any issues found are corrected
 - Keep a First Aid kit available
- Keep emergency information for each DCW they employ in case they need to contact someone on the DCW's behalf
- Train Direct Care Workers on proper transferring techniques to prevent injury
- Make sure universal precautions are taken to protect the Participant and the DCW
- Have smoke detectors and fire extinguishers
 - Train the Direct Care Worker on how to use the fire extinguisher.
 - If their Service Provider offers training have their Direct Care Workers attend
- Be aware of dangerous substances in their home, such as bleach

- Provide gloves for use by the Direct Care Worker
- Keep all mechanical equipment checked and maintained
- Ensure all pets are free of parasites
- Develop a Safety Plan and train their Direct Care Worker
 - Keep the Safety Plan in a visible place

Resources are available on Public Partnerships' website, www.publicpartnerships.com:

- Safety Guidelines for Home Visits
- TEN COMMANDMENTS OF BODY MECHANICS
- Preventing Falls

Additional resources are available at: WELLAdvised|www.babbins.com

STEPS TO MANAGING A WORKPLACE INJURY

- Post the doctor's panel in an area that is accessible by their worker
- Remind their worker to report immediately any injury or work-related illness to you. (Their worker's benefits could be delayed or denied if injuries are not reported immediately.)
- Upon injury, please provide the list of approved providers to their worker
- In case of emergency, call 911
- File a claim with the Workers' Compensation Administrator

Pennsylvania Workers Compensation Insurance for DCW's

- Public Partnerships secures a Workers Compensation Insurance Policy on their behalf for the coverage of their worker(s) during the time they are providing services to the Participant. As the employer of workers, they should know that The PA Workers' Compensation Act gives employers the right to establish a list of designated health care providers for a worker to visit if they experience a workplace injury. Public Partnerships has established this list on their behalf. They are required to provide the list of designated health care providers to their worker(s). Injured workers must: Seek treatment for the work injury or illness with one of the designated providers for 90 days from the date of the first visit. There are some specific guidelines provided in the rules and regulations for these lists:
 - The employer must provide written notice to the employee of the employee's rights and duties.
 - The notice must be signed by the employee at the time of hire, whenever changes are made to the list and at the time of injury.
- The list must contain at least six providers; three of the six providers must be physicians.
 - Providers, as defined in the Act, are more than just physicians.
 - Each provider's name, address, telephone number, and specialty must be included on the list.
- If a specialty is not on the list and the specialty care is reasonable and necessary for treatment of the work injury, the employee will be allowed to treat with a health care provider of his or her choosing. *Martin v. WCAB (Emmaus Bakery)*, 652 A.2d 1301 (Pa. 1995)
 - The employer may not direct the employee to any specific provider on the list.
- The employee may switch from one designated provider to another designated provider.
- Listed providers must be geographically accessible.
- Listed providers must contain specialties appropriate for the anticipated work-related medical problems of the employee.
- If the employer's list of designated providers fails to comport with the Act and the regulations, the employee has the right to treat with a provider of his or her choice.

LOCATING A DESIGNATED HEALTH CARE PROVIDER

Doctor Panels are listings of medical providers by county, and are provided on the Public Partnerships website:

www.publicpartnerships.com

Public Partnerships recommends that they download this information shortly after the Direct Care Worker is hired.

Participants/DCWs may also contact Public Partnerships' Customer Service to request a copy of the Doctor Panel listing for their county.

Filing a Claim

In the event of a claim, please contact:

Babb Absence Management Services (Third Party Administrator)

Toll-Free #: 1-800-892-1015 (PA)

850 Ridge Avenue

Pittsburgh, PA 15212-6095

Fax: 1-412-322-1756

Determining Wages with the Direct Care Worker

Determining wages for the Direct Care Worker is an important part of hiring and retaining Participant's workers. It is not necessary to pay workers at the same wage, but it is important to pay them a wage that is reflective of the work they perform. Paying workers at a lower starting wage allows for the opportunity to promote through performance evaluations. Worker satisfaction and retention are increased by rewarding performance. Other factors to consider when determining wages are:

- Experience and Credentials
- Education and Degree
- Type of work to be performed
- The difficulty of work performed
- Time and duration of shift

A major responsibility of the CLE is to negotiate an hourly wage with each of their workers. A completed rate sheet must be done for each new worker and whenever a worker is receiving an increase or decrease in wage. Public Partnerships will send the CLE the Qualified DCW Rate Sheet form in their Direct Care Worker Pre-Populated Enrollment packet.

Section 5 Paying Direct Care Workers

The DCW Wage

A rate sheet must be done every time there is a new DCW hired, a new service is added, or a change is made to the existing wage. The Participant may change a DCW wage by completing the Qualified DCW Rate Sheet. Additional forms may be obtained by calling Customer Service or downloading the form from the Public Partnerships' website, www.publicpartnerships.com. Next, is an example of the Qualified DCW Rate Sheet along with instructions. For additional questions about completing the wage sheet, contact a Public Partnerships' Customer Service Representative at 1-877-908-1750. Public Partnerships will process wage changes within two weeks from the date the form is received.

The NEW Employer Maximum DCW Wage Sheet

The Employer Maximum DCW Wage Sheet is included with the CLE Enrollment Packet. It is a guide for newly referred Participants/CLEs to use to determine the maximum wage that a DCW can be paid. Wages are based on Regions. To determine the maximum wage, they may pay a DCW, locate the COUNTY they reside in under the Region Number in Table 2: [2]. Then find the corresponding Maximum DCW Hourly Wage that can be offered for their Region in Table 1: [1]. If they live in Mifflin County, their Region is Region 2, and their Maximum DCW Wage is \$10.79/hour. (Note) The rates below are for example only. Please view updated Maximum DCW Hourly Wage Rates at www.publicpartnerships.com.

PCG | **Public Partnerships**
Supporting Choice. Managing Costs.™

Qualified DCW Rate Sheet
(Page 1 of 1)

Qualified Direct Care Worker (DCW) Rate Sheet

Complete this form for each new DCW and service procedure code or when there is a change to an existing DCW rate or service procedure code. DCW wage changes will be processed after the date received and will always go into effect at the beginning of pay period. If there is no rate entered minimum wage will be entered until a rate is received. If wage entered is more than allowed, then the maximum rate will be entered.

DCW Name (please print): _____

DCW Social Security Number: _____

New Service Change of Existing Service New Rate Change of Existing Rate

Service (Procedure Code)	DCW Rate per Hour
Personal Assistance Services (W1792)	
Respite (S5150)	
Participant Directed Community Supports (W1900)	

Common Law Employer Name (please print): _____

Common Law Employer Signature: _____ Date: _____

Participant's Name (if different from CLE): _____

Direct Care Worker (please print): _____

Direct Care Worker Signature: _____ Date: _____

MAIL FORM TO: PA OLTL
PUBLIC PARTNERSHIPS, LLC
P.O. BOX 1108
WILKES-BARRE, PA 18773-9905

New OLTL DCW Version 2.4

1. Complete Demographic Information
2. Check the appropriate box (For example for a new DCW, check the New Rate Box).
3. Fill in the rate per hour for the appropriate service which can be found in the Service Plan or by asking the Service Coordinator. Most services are W1792. For New CLE's and New DCW's you may use the **Employer Maximum DCW Wage Rate Sheet** provided to the CLE in the Enrollment Packet.
4. Both the CLE & the DCW must sign and date the form.
5. Mail this form to the address listed on the form.

2

3

4

5

Table 1

Region	Service	Maximum DCW Hourly Wage Rate
Region 1	PAS	\$11.72
Region 1	Respite	\$11.47
Region 2	PAS	\$11.20
Region 2	Respite	\$10.99
Region 3	PAS	\$12.27
Region 3	Respite	\$12.02
Region 4	PAS	\$13.78
Region 4	Respite	\$13.50

Table 2

Region 1	Region 2			Region 3	Region 4
Allegheny	Bedford	Jefferson	Susquehanna	Adams	Bucks
Armstrong	Blair	Lackawanna	Tioga	Berks	Chester
Beaver	Bradford	Lawrence	Union	Carbon	Delaware
Fayette	Butler	Lycoming	Venango	Cumberland	Montgomery
Greene	Cambria	Luzerne	Warren	Dauphin	Philadelphia
Washington	Cameron	McKean	Wayne	Franklin	
Westmoreland	Centre	Mercer	Wyoming	Fulton	
	Clarion	Mifflin		Huntingdon	
	Clearfield	Monroe		Juniata	
	Clinton	Montour		Lancaster	
	Columbia	Northumberland		Lebanon	
	Crawford	Pike		Lehigh	
	Elk	Potter		Northampton	
	Erie	Snyder		Perry	
	Forest	Somerset		Schuylkill	
	Indiana	Sullivan		York	

How the Maximum Wage Rate is Calculated

The maximum hourly wage rate for DCWs is calculated as follows:



- The bill rate must be lower than or equal to the regional maximum rate established by the PA Department of Human Services, Office of Long Term Living.
- State unemployment insurance experience rates (SUI) are unique to the Participant as an employer and based on their unemployment compensation claim history on their SUI account.
- A Workers' Compensation Insurance policy is obtained for Participants to cover injuries that may be sustained by their workers in the course of their work.
- The maximum hourly wage rate for a DCW may be different than that of a DCW for another employer.
- Accordingly, the maximum hourly wage rate for their DCW is subject to change.

Factors that may Affect Wages in Future Periods

One factor that may affect the CLE's ability to pay wages is a change in State Unemployment Insurance (SUI) Rate. SUI Rate is unique to each CLE, and CLE's have many different SUI Rates based on DCW leave activity. This rate is affected by turnover of DCW's who have successfully filed claims for unemployment compensation from the CLE's SUI Account. If a DCW is terminated and able to collect unemployment, the Rate for the CLE may increase which increases the tax expense and ultimately reduces

available money for wages. It is important to review and evaluate DCW's correctly to avoid any misunderstandings around reasons for termination.

Another factor that may affect the CLE's ability to pay wages is a change in the Workers' Compensation Insurance Rate. Every CLE has a Workers' Compensation Insurance policy to cover injuries sustained by workers in the course of work. Any changes to the WC Insurance rate could drive the expense up or down and ultimately alter available money for Wages.

Wage may also be impacted by increases or decreases in the employer tax rates.

Using Public Partnerships' BetterOnline Portal to Find DCW's Maximum Wage

1. Login to the Public Partnerships' web portal at <https://fms.publicpartnerships.com/PPLPortal/login.aspx?>
2. Click on "Participant Profile"
3. Scroll to the bottom of the screen and click on "Associated Direct Care Workers"
4. Click the "Services" hyperlink in the last column on the right
5. View DCW maximum rate in 4th column of "services" window

Associate Direct Care Workers to Participant

Direct Care Worker Name	Phone Number	Direct Care Worker Type	Print Forms	Participant - Direct Care Worker Checklist*	Good To Go*	Services
QA TESTDCW	717-884-7708	IP	Print Forms	Checklist Complete: Yes	Yes	Services

Participant Direct Care Worker Services

Service Name	Service Description	Service Code	Maximum Rate	Minimum Rate	Actual/Desired Rate	Billable Rate	Rates Count
<input checked="" type="checkbox"/> Personal Assistance Services	Personal Assistance Services	W1792	11.8	As Negotiated	\$10.25	\$11.99	Rates [1]

Submitting Timesheets with the Direct Care Worker

PAYROLL SCHEDULE

Once the Participant has received notice that they and their DCW are "Good to Go," they will receive a 'Good to Go' Welcome Packet. The Packet will provide them the information and instructions for submitting their Direct Care Worker's time for payment. The Participant/DCW will receive one payroll schedule—either Payroll Schedule A or Payroll Schedule B. Participants should follow this payroll schedule when submitting time with their workers. Sample Payroll Schedule A and Schedule B are on the next page, along with a description of the important dates to follow when completing the worker's timesheet.

Following the Payroll Schedule for their workers' time submissions is key to ensure they are paying their workers on time. Follow the Payroll Schedule provided to the Participant in their *Good to Go* Welcome Packet. Review the column descriptions below for key dates.

Columns 1 and 2 are the Begin and End Dates of the Payroll Period. The Participant will want to be sure that they submit timesheets that correspond to the Pay Period Start Date and the Pay Period End Date of the pay schedule. Column 3 is the due date for submitting timesheets online and for mailing and faxing paper timesheets. Column 4 is the pay date for all timesheets submitted timely and accurately for the pay period.



If you currently submit your payroll using SCHEDULE B, turn this page over

PAYROLL SCHEDULE - A

PENNSYLVANIA OLT Participant Directed Models of Service 2016-2017

Pay Period START DATE	Pay Period END DATE	Timesheet Received 6/17/2016 - 6/18/2016	Check or Direct Deposit Received	Holiday
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY
11/29/2016	12/1/2016	12/1/2016	12/1/2016	12/1/2016
12/1/2016	12/28/2016	12/28/2016	1/5/2017	
12/27/2016	1/2/2017	1/2/2017	1/2/2017	
1/2/2017	1/23/2017	1/23/2017	2/9/2017	
1/24/2017	2/9/2017	2/9/2017	2/19/2017	
2/7/2017	2/23/2017	2/23/2017	3/4/2017	
3/1/2017	3/14/2017	3/14/2017	3/27/2017	
3/15/2017	3/28/2017	3/28/2017	4/10/2017	
3/29/2017	4/11/2017	4/11/2017	4/24/2017	
4/12/2017	4/25/2017	4/25/2017	5/9/2017	
4/26/2017	5/9/2017	5/9/2017	5/23/2017	
5/10/2017	5/23/2017	5/23/2017	6/6/2017	
5/24/2017	6/6/2017	6/6/2017	6/20/2017	
6/13/2017	6/20/2017	6/20/2017	7/4/2017	
6/21/2017	7/4/2017	7/4/2017	7/18/2017	
7/4/2017	7/18/2017	7/18/2017	8/1/2017	
7/18/2017	8/1/2017	8/1/2017	8/15/2017	
8/1/2017	8/15/2017	8/15/2017	8/29/2017	
8/15/2017	8/29/2017	8/29/2017	9/12/2017	
9/12/2017	9/26/2017	9/26/2017	10/10/2017	
9/27/2017	10/10/2017	10/10/2017	10/24/2017	
10/24/2017	11/7/2017	11/7/2017	11/14/2017	
11/7/2017	11/21/2017	11/21/2017	12/5/2017	
11/21/2017	12/5/2017	12/5/2017	12/19/2017	
12/5/2017	12/19/2017	12/19/2017	1/2/2018	
12/19/2017	1/2/2018	1/2/2018	1/16/2018	
1/2/2018	1/16/2018	1/16/2018	1/30/2018	
1/30/2018	2/13/2018	2/13/2018	2/27/2018	
2/13/2018	2/27/2018	2/27/2018	3/13/2018	
3/13/2018	3/27/2018	3/27/2018	4/10/2018	
4/10/2018	4/24/2018	4/24/2018	5/8/2018	
5/8/2018	5/22/2018	5/22/2018	6/5/2018	
6/5/2018	6/19/2018	6/19/2018	7/3/2018	
7/3/2018	7/17/2018	7/17/2018	7/31/2018	
7/31/2018	8/14/2018	8/14/2018	8/28/2018	
8/28/2018	9/11/2018	9/11/2018	9/25/2018	
9/25/2018	10/2/2018	10/2/2018	10/21/2018	
10/21/2018	10/29/2018	10/29/2018	11/18/2018	
11/18/2018	11/26/2018	11/26/2018	12/13/2018	
12/13/2018	12/31/2018	12/31/2018	1/20/2019	
1/20/2019	2/7/2019	2/7/2019	2/27/2019	
2/27/2019	3/14/2019	3/14/2019	3/31/2019	
3/31/2019	4/18/2019	4/18/2019	5/15/2019	
5/15/2019	5/29/2019	5/29/2019	6/26/2019	
6/26/2019	7/13/2019	7/13/2019	7/30/2019	
7/30/2019	8/17/2019	8/17/2019	9/14/2019	
9/14/2019	9/28/2019	9/28/2019	10/27/2019	
10/27/2019	11/10/2019	11/10/2019	11/25/2019	
11/25/2019	12/9/2019	12/9/2019	12/23/2019	
12/23/2019	1/6/2020	1/6/2020	1/20/2020	
1/20/2020	2/3/2020	2/3/2020	2/17/2020	
2/17/2020	3/7/2020	3/7/2020	3/23/2020	

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FAX SIGNED TIMESHEETS TO PPL AT (855) 858-8162
Or mail to: Public Partnerships, LLC, P.O. Box 1108 Wilkes-Barre, PA 18773-1108
Learn how to submit timesheets quickly using the **BetterOnline™** Portal at
<http://www.publicpartnerships.com/programs/pennsylvania/PADPWOLTL/program.asp>



If you currently submit your payroll using SCHEDULE A, turn this page over

PAYROLL SCHEDULE - B

PENNSYLVANIA OLT Participant Directed Models of Service 2016 - 2017

Pay Period START DATE	Pay Period END DATE	Timesheet Received 6/17/2016 - 6/18/2016	Check or Direct Deposit Received	Holiday
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY
11/22/2016	12/5/2016	12/5/2016	12/19/2016	
12/5/2016	12/19/2016	12/19/2016	1/2/2017	
12/20/2016	1/5/2017	1/5/2017	1/19/2017	
1/5/2017	1/19/2017	1/19/2017	2/9/2017	
1/17/2017	2/9/2017	2/9/2017	2/23/2017	
1/31/2017	2/23/2017	2/23/2017	3/13/2017	
3/13/2017	3/27/2017	3/27/2017	4/10/2017	
4/10/2017	4/24/2017	4/24/2017	5/8/2017	
5/8/2017	5/22/2017	5/22/2017	6/5/2017	
6/5/2017	6/19/2017	6/19/2017	7/3/2017	
7/3/2017	7/17/2017	7/17/2017	7/31/2017	
7/31/2017	8/14/2017	8/14/2017	8/28/2017	
8/28/2017	9/11/2017	9/11/2017	9/25/2017	
9/25/2017	10/2/2017	10/2/2017	10/21/2017	
10/21/2017	10/29/2017	10/29/2017	11/18/2017	
11/18/2017	11/26/2017	11/26/2017	12/13/2017	
12/13/2017	12/31/2017	12/31/2017	1/20/2018	
1/20/2018	2/7/2018	2/7/2018	2/27/2018	
2/27/2018	3/14/2018	3/14/2018	3/31/2018	
3/31/2018	4/18/2018	4/18/2018	5/15/2018	
5/15/2018	5/29/2018	5/29/2018	6/26/2018	
6/26/2018	7/13/2018	7/13/2018	7/30/2018	
7/30/2018	8/17/2018	8/17/2018	9/14/2018	
9/14/2018	9/28/2018	9/28/2018	10/27/2018	
10/27/2018	11/10/2018	11/10/2018	11/25/2018	
11/25/2018	12/9/2018	12/9/2018	12/23/2018	
12/23/2018	1/6/2019	1/6/2019	1/20/2019	
1/20/2019	2/3/2019	2/3/2019	2/17/2019	
2/17/2019	3/7/2019	3/7/2019	3/23/2019	
3/23/2019	3/31/2019	3/31/2019	4/10/2019	
4/10/2019	4/24/2019	4/24/2019	5/8/2019	
5/8/2019	5/22/2019	5/22/2019	6/5/2019	
6/5/2019	6/19/2019	6/19/2019	7/3/2019	
7/3/2019	7/17/2019	7/17/2019	7/31/2019	
7/31/2019	8/14/2019	8/14/2019	8/28/2019	
8/28/2019	9/11/2019	9/11/2019	9/25/2019	
9/25/2019	10/2/2019	10/2/2019	10/21/2019	
10/21/2019	10/29/2019	10/29/2019	11/18/2019	
11/18/2019	11/26/2019	11/26/2019	12/13/2019	
12/13/2019	12/31/2019	12/31/2019	1/20/2020	
1/20/2020	2/7/2020	2/7/2020	2/27/2020	
2/27/2020	3/14/2020	3/14/2020	3/31/2020	
3/31/2020	4/18/2020	4/18/2020	5/15/2020	
5/15/2020	5/29/2020	5/29/2020	6/26/2020	
6/26/2020	7/13/2020	7/13/2020	7/30/2020	
7/30/2020	8/17/2020	8/17/2020	9/14/2020	
9/14/2020	9/28/2020	9/28/2020	10/27/2020	
10/27/2020	11/10/2020	11/10/2020	11/25/2020	
11/25/2020	12/9/2020	12/9/2020	12/23/2020	
12/23/2020	1/6/2021	1/6/2021	1/20/2021	
1/20/2021	2/3/2021	2/3/2021	2/17/2021	
2/17/2021	3/7/2021	3/7/2021	3/23/2021	

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Submitting Direct Care Workers Time

Public Partnerships recommends that employers work with their DCWs to submit and approve timesheets using e-timesheets through the Public Partnerships' BetterOnline web portal. Electronic timesheets can be submitted up until 5:00 p.m. on Tuesdays. Public Partnerships can process your timesheets more efficiently when they are submitted and approved online. Electronic timesheet filers benefit from knowing that:

- The online timesheet entry process guides them, helping to eliminate any errors that might prevent payment delays, before submission
- Their timesheet submission is confirmed
- Participants can track timesheets to confirm that their DCW(s) time is paid
- With Public Partnerships, Participants have the opportunity to approve and submit their worker's timesheet electronically utilizing a secure username and password that they create to log in. Their worker can enter time online by creating and logging in with a unique username and password. Entering time electronically through Public Partnerships' BetterOnline web portal is easy, will save them time and help them reduce errors that delay the payment of timesheets. If they submit online, they will not need to submit a paper timesheet for their worker. Be sure to approve and submit the Direct Care Worker's electronic timesheet. Public Partnerships cannot process timesheets not approved by the Participant, the employer.
- Submitting paper timesheets via fax or mail is an option for those who don't have a computer. See the appendix in this Handbook for instructions.

Submitting Timesheets Using Public Partnerships' BetterOnline Portal; for the Participant and Their DCW

PART A: REGISTERING TO USE PUBLIC PARTNERSHIPS' BETTERONLINE PORTAL

STEP 1

Go to the following web address and click **Sign Up**.

<https://fms.publicpartnerships.com/PPLPortal/login.aspx?>

STEP 2

Select **PENNSYLVANIA** from the drop-down list of states. Select **PA DPW OLTL** as the program. Select **Participant** as their Role if they are the Participant or Common Law Employer,

Select **Direct Care Worker** as their Role if they are the Direct Care Worker.

STEP 3

On the next screen, verify who they are by completing the following data fields:

PPL ID: This number is generated by Public Partnerships and is unique to the Participant and DCW. Your ID is located at the beginning of this letter.

Last Name: Enter their last name.

DOB: If their Role is Participant, enter the **Participant's** date of birth. (Format example: 12/12/1988)

SSN/TIN: If their role is Direct Care Worker, enter the **DCW's** Social Security Number without dashes. (Format example: 123456789)

STEP 4

On the next screen, create their Username and Password.

Username - Public Partnerships suggests that they use the first initial of their first name and their full last name.

Password - Their password is case sensitive and should be:

- at least **six (6)** characters long
- contain **at least one (1)** numerical character
- contain **one (1)** capitalized character
- contain **one (1)** lower case character

Confirm Password by retying it.

Email Address - Enter an e-mail address

Security Questions - Choose three questions from the drop-down menu and enter the answer in the field next to it.

STEP 5

Once they are satisfied with the information they have provided, hit the **SUBMIT** button.

CONGRATULATIONS! They are now registered and ready to submit/approve timesheets.

PART B: DCW E-TIMESHEET SUBMISSION (THIS SECTION SHOULD BE PROVIDED TO DCWS.)

STEP 1

Log in to BetterOnline portal and click "Direct Care Worker View Timesheet" then "Create Timesheet."

STEP 2

DCWs will see all of the Participants they are currently working with. Click "Create Timesheet" next to the Participant for whom they are submitting time worked.

STEP 3

Click the “Calendar Icon” and choose one date that they worked to start their timesheet.

STEP 4

In the service field, select their service from the service code drop-down menu and enter their beginning worked time for the ‘**Time In**’ field to mark the beginning of their shift and the ending work time for the ‘**Time Out**’ field for the end of the shift.

Special Case: *If they worked more than one shift, had a break during the day and then came back and worked another shift, select “There are more hours” after entering the first shift, and a new line will appear for the additional shift.*

STEP 5

When completed, click “next” to review their time then scroll to the bottom of the timesheet, and click “**Edit**,” “**Save My Work**” or “**Submit**.”

- a. If they need to make any corrections to their timesheet, click the “**Edit**” button and make the necessary changes, then click “**next**”.
- b. If they need to come back and finish their timesheet at a later date, click “**Save My Work**” to save their unfinished timesheet.
- c. If their timesheet is complete for the period, check the box next to “I hereby certify...” then click “**Submit**.” The timesheet will be submitted to their Participant/CLE for approval.

Remember that their CLE will need to review and approve their timesheet for them to be paid!

PART C: PARTICIPANT E-TIMESHEET APPROVAL

STEP 1

Log in to BetterOnline portal and click “Participant View Timesheet.” Select “Submitted” in the “Timesheet Status” drop-down menu then click “Search.”

STEP 2

Click “Approve/Reject” next to the timesheet they would like to review. Once they have reviewed the timesheet for the correct times submitted by the DCW, they are ready to “Approve” or “Reject.”

STEP 3

Scroll to the bottom of the timesheet, and

- a. Approve timesheet by checking the box next to “I hereby certify...” then click “Approve.” The timesheet will be submitted to Public Partnerships for processing
- or**
- b. Click “Reject.” They will need to select a rejection reason and add notes. The rejected timesheet will be sent back to the DCW to make corrections.

Time4Care™ Mobile Timesheet Application

PCG Public Partnerships’ new Time4Care mobile application will provide their workers the flexibility and convenience of using a cell phone to enter and submit timesheets for their approval. It is now available for download on Apple and Android phones.

Using the app is extremely simple. Workers download and log-in using their current BetterOnline web portal username and password. Time submitted using the mobile app will also be visible in Public Partnerships’ BetterOnline web portal.

Timesheet Errors

Public Partnerships understands that errors may occur when the Participant and their worker are completing and submitting timesheets. When Public Partnerships receives a timesheet with errors, we will contact the CLE’s phone number on record. We will leave an automated message informing them that we could not process the timesheet and to please contact Customer Service at the number provided. It is important for CLEs to update their phone number, if necessary, so that Public Partnerships can successfully contact them.

If Public Partnerships finds errors in processing a timesheet, even if the timesheet was submitted on time, it may delay receipt of payment. If you receive a call about a timesheet with errors, please call Customer Service, and they will make every attempt to process the timesheet as soon as possible to avoid any additional delays.

Public Partnerships cannot process timesheets for Participants who do not have a valid Service Authorization. If this happens, the Participant should reach out to their Service Coordinator to update their Service Plan. Upon receipt of the Service Authorization, Public Partnerships will process the DCW timesheet at the next available payroll.

When Public Partnerships receives a paper timesheet that was scanned and read for verification; it may have an issue that causes it to “pend.” Pend status means that there is an issue with the timesheet that is preventing it from being paid. In cases where timesheets pend, Public Partnerships will send a notification through its blaze messaging system. The blaze message will advise Participants that the timesheet is pending and that they should contact Customer Service for assistance in resolving the timesheet issue. Calling Public Partnerships Customer Service as soon as they receive this message will help prevent delays in payments to their workers.

Most Frequent Pend Messages

PEND MESSAGE	CORRECTIVE ACTION
Date Worked is after PPL End Date	Submit timesheets according to the pay periods provided in the Payroll Schedule.
Duplicate entry on IN PROCESS Time Sheet No.	Another timesheet has been submitted for the same hours. The timesheet will pay for all hours that do not have a duplicate entry. Time will need to be resubmitted once the duplicate issue is resolved.
Duplicate entry on PAID Time Sheet No.	Another timesheet has been submitted and paid. This timesheet will deny for these hours.
Ineligible for Medicaid or Ineligible for Waiver	The Participant should contact their Service Coordinator to discuss this message.
Worked Units exceeds the Units remaining on the Authorization.	The budgeted units have been exceeded. The timesheet will pay for any units beneath the authorized amount. The Participant should contact their Service Coordinator.
Timesheet is too old to be paid - check Date Worked and Setup Days Tolerance 165	Timesheet is submitted beyond the standard timeframe for reimbursement. Public Partnerships will need to request permission to make payment on this timesheet. Timesheets should be submitted according to the Payroll Schedule.

Section 6 Other Program and Services Information

Difficulty of Care Federal Income Tax Exclusion

Does the Participant receive services from a worker who lives full-time with them? If so their worker may be eligible for a Difficulty of Care Income Tax Exclusion for the services they provide to them. If their worker lives in the home where they are providing services, Public Partnerships encourages them to have their worker review important information on our website at <http://www.publicpartnerships.com/programs/pennsylvania/PADPWOLTL> and seek tax advice to determine their eligibility for the exclusion. This form is optional, and not a mandatory form needed to enroll in the program.

A Difficulty of Care Income Tax Exclusion Form must be completed and submitted to Public Partnerships if their worker determines they are eligible. This form is included in the DCW Pre-Populated packet that will be mailed to them once the worker and the Participant have called over-the-phone enrollment to provide their new hire information. This form is also available on our website, or they can call Customer Service to have a form mailed to them. If they have additional questions after reviewing this information, please call Customer Service at 1-877-908-1750. Public Partnerships is unable to provide tax advice.

Fair Labors Standard Act and the Live-In Exemption Form

Effective for hours worked on and after January 1, 2016

Minimum Wage – The Participant is required to pay their worker(s) at least minimum wage, currently \$7.25 per hour.

Overtime – The Participant is required to pay their worker(s) overtime pay for hours worked over 40 hours in one week unless the Participant and their worker are covered under the Live-In Domestic Service Employees Exemption described below. A week is from 12:01 a.m. Sunday through 11:59 p.m. the following Saturday. Public Partnerships will adjust eligible workers' pay based on this new requirement. If a Participant's worker(s) qualify for overtime, the Participant must have an Overtime Authorization in their service plan for their worker(s) to be paid overtime. The participant should discuss this with their Service Coordinator. If the Participant's worker(s) qualify for overtime and the Participant has an Overtime Authorization in their Service Plan that covers the date(s) of overtime, the worker(s) will be paid at the overtime rate, which is one and a half times the DCW's normal hourly rate, for each hour worked over 40 hours in a work week.

Live-In Domestic Service Employees Exemption – A live-in domestic service employee is one who resides in the household where employed. "Reside" means to live in the home on a permanent basis or for extended periods. OLTL requires the DCW to take this exemption if it applies to their situation. This exemption means the Participant's worker(s) will be paid at the regular wage rate for all hours worked. Even if they work more than 40 hours per week, they will not receive overtime pay. To confirm the Live-In status of the DCW, Public Partnerships will provide the Fair Labor Standards Act Live-In Exemption Form in the DCW's pre-populated packet. This form can be downloaded from Public Partnerships' website or by contacting Customer Service. This form should be completed any time the live-in status of the worker has changed. The DCW should also complete an address change form. This form can be downloaded from Public Partnerships' website, or by contacting Customer Service.

Common-Law Employer for Multiple Participants – One person will no longer be allowed to serve as the Common-Law Employer for multiple participants. A Common-Law Employer and Participant must be in a one-to-one relationship (one CLE to one Participant). Public Partnerships' will notify the Participant if this applies to them. Please work with the Service Coordinator to find a different person to be the Common-Law Employer if needed.

PCG Public Partnerships
PA OLTL - Participant Directed Services

Phone: 1-877-908-1750
TTY: 1-800-360-5899
Form Fax: 1-855-858-8158
Paperwork E-mail: PADPW-OLTL@pcgus.com

PCG Public Partnerships
Supporting Choice. Growing Lives.

**Fair Labor Standards Act
Live-In Exemption Form**

The United States Department of Labor (US DOL), Fair Labor Standards Act (FLSA), requires household employers to pay employees overtime pay for hours worked over 40 per workweek unless the employee qualifies for an exemption. Use this form to notify PCG Public Partnerships if the employee qualifies for the live-in exemption from overtime pay. You may also use this form to revoke the exemption when the employee no longer qualifies for the exemption.

Consumer/Participant Name:	Consumer/Participant ID:
Common Law Employer Name (complete this section only if someone else is designated as the employer):	
Attendee/Employee Name:	Attendee/Employee ID:

STEP 1: DETERMINE IF THE EMPLOYEE QUALIFIES FOR THE LIVE-IN EXEMPTION FROM OVERTIME PAY
The live-in exemption is:

- Available only in programs where the participant or their representative is the sole employer under the FLSA;
- Applies only to the employer/employee pair based on the "Residency Test" (below); and
- Applies to all services provided by the employer for that employee.

Residency Test
A live-in employee is exempt from overtime premium pay if the employee "...resides on the employer's premises either permanently or for extended periods of time". "Employer's premises" means the household where employed. "Permanently", or "...extended periods of time" means the employee lives, works, and sleeps in the household where employed for at least five (5) days a week (120 hours) or more.

STEP 2: CERTIFY THE EMPLOYEE'S ELIGIBILITY FOR THE LIVE-IN EXEMPTION FROM OVERTIME PAY
Please check one box below to identify whether or not the employee qualifies for the live-in exemption.
 YES, the employee qualifies for the live-in exemption.
 NO, the employee does not qualify for the live-in exemption.

If the employee qualifies for the live-in exemption:

- All hours, including overtime (over 40 hours per workweek), will be paid at regular rates for all services.

STEP 3: SIGN AND AUTHORIZE

Participant/Employer	Date	Employee	Date

By signing, we understand that it is our responsibility to inform PCG Public Partnerships when the employee no longer lives with the employer. Both parties must sign to claim the exemption. Only the employer must sign to revoke the exemption.

IMPORTANT: Live-In providers of Medicaid waiver services may be eligible for the IRS Difficulty of Care (DOC) federal income tax exclusion. The DOC income exclusion may also qualify employees for a refund of state income taxes. Employees do not need to request a corrected W-2 to request a tax refund. To learn more, visit <http://www.irs.gov/indiv/individuals/Current-Medicaid-Waiver-Payments-May-Be-Excludable-From-Income>

SUBMIT COMPLETED FORM: Fax to: 1-855-858-8158 or E-mail to: PADPW-OLTL@pcgus.com

Rights as a Participant – PA DEPARTMENT OF HUMAN SERVICES

As a Participant of services, there are specific rights. They are:

CIVIL AND PERSONAL RIGHTS

- The right to be treated with dignity and respect;
- The right to be free from threats and intentional injury;
- The right not to be discriminated against based on race, ethnicity, national origin, religion, gender, age, current or anticipated mental or physical disability, sexual orientation, genetic information, or source of payment;
- The right not to be filmed, taped, or photographed without their consent;
- The right to have information provided in a language or method they understand.

RIGHTS ABOUT APPLYING FOR SERVICES

- The right to have personal, medical, and financial information held confidential and private unless otherwise specified by law;
- The right to be informed about programs for which they may be eligible;
- The right to oral and written notice about eligibility, including the reasons for the decision and description of appeal rights from the Department of Human Service's fair hearing procedures;
- The right to oral and written notice of the outcome of an eligibility interview - and the reasons for the decision - if it results in a change in services (for example, increased, decreased, or terminated services);
- The right to have an initial eligibility determination within 90 days of application;
- The right to have a functional and financial eligibility screening for publicly funded long-term care services and the right to be told of the outcome of the screening.

RIGHTS ABOUT THE PROCESS USED TO DETERMINE THEIR SERVICES

- The right to accurate, unbiased information and assistance;
- The right to accept or refuse any information, referrals, or services if they are their own legal decision maker;
- The right to have an in-home interview within seven working days after a request for services is made;
- The right to choose a service coordination agency and service coordinator (SC);
- The right to be involved in developing their Service Plan;
- The right to include friends, family or others of their choosing to be included in their service planning activities, decision-making, and service delivery;
- The right to request the involvement of a Registered Nurse (RN) in the service planning process.

RIGHTS ABOUT GETTING SERVICES

- The right to have input on the services they get based on an Individual Service Plan, described in writing that includes the supports, services, and resources needed to meet their goals;
- The right to choose a provider (or, at their request, to have a provider chosen for them). They are not required –nor can they be forced -- to use a specific provider or to use one provider for all services;
- The right to ask for a change of provider, for any reason, at any time, through their SC;
- The right to see their personal record and to ask that it be changed;
- The right to an alternative accessible format, including cognitively accessible formats, and reasonable accommodations when seeking assistance from the Service Coordination Agency. (Such modifications may include, but not be limited to, interpreters – including American Sign Language, taped material, and adaptive devices/technology.)

RIGHT TO FILE A COMPLAINT

- The right to file a complaint about their services with either their Service Coordinator or with the Office of Long-Term Living.
- Right to file a grievance – timely access to formal hearings
- The right to file a grievance about any service, including eligibility determinations for Medicaid Waiver services or state-funded programs, or get a hearing by procedures set forth under 55 Pa. Code, Chapter 275 (relating to appeal and fair hearing);
- The right to timely access to a formal administrative hearing as required by Medicaid rules.
- The right to file a grievance with the Office of Long-Term Living even if a complaint has not previously been filed.
- There are specific responsibilities they must meet when they apply for or get services provided through the Office of Long-Term Living. If they do not meet these responsibilities, they may lose their services. Their responsibilities include:

- To treat Service Coordinators (SCs) and DCWs, providers, and others with respect and dignity;
- To not engage in behavior that puts them or others at risk – if they put their health and safety or the health and safety of others at risk, they may lose their services;
- To give accurate and timely information to their SC to help in the eligibility determination process and Service Plan development;
- To provide information about other services they have in place that are paid for by other programs, such as Medicare or private insurance;
- To use informal supports, including their family, friends, neighbors, or another support system to help them whenever possible;
- To be active in making decisions and looking for and picking resources that best meet their needs;
- To adhere to program requirements - failure to do so may result in loss of services;
- To tell their Service Provider when they are unable to keep scheduled appointments, or when they will be hospitalized or away from home for a significant period;
- To give documentation of eligibility-related items, when asked as a condition of getting or continuing to get services;
- The legal responsibility, under penalty of law, to be truthful, accurate, and complete when giving the information needed for eligibility determination, as attested to on the relevant program forms;
- To allow all on-site monitoring visits by the SC;
- To submit accurate time sheets and to report potential fraud and abuse;
- To have an individual backup plan for times when their DCW is not available.

For Financial Eligibility Determination, Their Responsibilities as a Participant include to:

- Tell the County Assistance Office (CAO) and their SC of any private health insurance they have. (They must use private insurance to pay their medical bills before these expenses are charged to a state or Medicaid program. They must also let the county know when they are no longer covered under private insurance.);
- Tell the CAO when there are changes in their medical costs. (For example, these changes might include when their condition changes, their doctor no longer feels it is necessary to purchase drugs or when there is no longer a need to pay for therapy because private insurance has begun to pay for it.);
- Tell the CAO if they give assets to another person (including but not limited to money, property, monetary gifts, etc.). This exchange of assets may affect their eligibility for Medicaid waiver programs;
- Report to the CAO changes in finances, which may affect their eligibility or the amount of benefits or services they receive. Check with their local CAO for details. (These changes might include an increase or decrease in their income or a change in the amount of assets they have; it might also include receiving an inheritance.);
- Report to the CAO changes in household circumstances, which might affect their eligibility for the amount of benefits or services that they receive. (These changes may include when any of their children reach 18 years of age, when someone moves in or out of the household, marital status, or when they or any other household occupant becomes pregnant or has a baby.);
- Report to their SC and the CAO a change in address, contact information, and any other pertinent information that may affect eligibility or service delivery.

Updating Their Address or Phone Number

If the Participant moves or changes their phone number, they must let Public Partnerships know so the CLE section of the Participant's profile can be updated. To do this, complete the Common Law Employer Address/Phone Change Form provided to them in their CLE New Employer packet. They can also call Customer Service, 877-908-1750, and request a form in the mail. They should always notify both Public Partnerships and their Service Coordinator if they move.

They should also notify Public Partnerships if their DCW's address changes. Their DCW should complete the DCW Change of Information Form, which they can download from the Public Partnerships' website, or they can request the form from Customer Service.

The Service Coordinator's Role in Participant-Directed Services

If a Participant's needs change, they should contact their Service Coordinator for assistance. In addition to developing their Service Plan with them, their Service Coordinator plays an important role in assisting them with their participant-directed services. The Service Coordinator duties include:

- Providing information about participant-directed services
- Notifying (making a referral to) Public Partnerships that the Participant has chosen participant-directed services
- Assisting the participant in determining who will serve as the CLE
- Updating their Service Plan each year and for changes in their service needs

- May initiate informal supports or agency services until the Participant is ready to receive PD services and DCW is approved
- May assist Participants in completing enrollment forms
- Developing and implementing a backup plan
- Monitors the delivery of services and supports
- Oversees any transition to and from participant-direction or programs
- Reports temporary stops in services
- Keeps Participant's demographics updated

Reading Their Monthly Public Partnerships' Utilization Report

Once their employee begins working, the Participant will receive a monthly utilization report from Public Partnerships. Take a few minutes to review the report to make sure the information is correct. The report will contain information about how much their employee(s) are paid, how many hours they worked last month, the total amount of units allocated for each approved service, the amount of units remaining in their Service Plan. If any of this information does not match what they have recorded, contact Public Partnerships at 1-877-908-1750. Below are descriptions of the reports.

MONTHLY UTILIZATION REPORT

The Pennsylvania Office of Long-Term Living (OLTL) Monthly Utilization Report is a monthly report that describes their approved services and how many units have been used in their plan period, including the number of units paid to each worker for the month that is being reported to them. This report also describes the amount of unused services they have left for the remainder of their Service Plan period. This report will also be sent to their Service Coordinator and OLTL.

DIRECT CARE WORKER SUMMARY REPORT

The Pennsylvania Office of Long-Term Living (OLTL) Direct Care Worker Summary Report is a monthly report that describes what their direct care workers were paid in the reporting month and since January of the current year. It also identifies what Public Partnerships has paid in taxes on their behalf. This report will also be sent to their Service Coordinator and OLTL.

COMMON LAW EMPLOYER OVERUTILIZATION REPORT

The Pennsylvania Office of Long-Term Living (OLTL) Common Law Employer Overutilization Report is a monthly report that describes where they have overused their monthly service. The report will show if more than 110% of what they have approved in their plan has been used. This report alerts them when they have overused their monthly services for two months in a row from the month being reported to them. If the program Participant is on the following waivers: Attendant Care waiver, Independence waiver, COMMCare waiver, OBRA waiver, and the ACT 150 program; they have an annual Service Plan. This report calculates a projected monthly amount of services based on the total number of units* divided by the number of days in their annual Service Plan period. This breakdown helps ensure they are properly utilizing their services in their approved plan period. This report will also be sent to their Service Coordinator and OLTL.

COMMON LAW EMPLOYER UNDERUTILIZATION REPORT

The Pennsylvania Office of Long-Term Living (OLTL) Common Law Employer Underutilization Report is a monthly report that describes where they have used less than 80% of the monthly services that they have approved in their plan. This report alerts them when they have underused their monthly services for two months in a row from the month being reported to them. If the program Participant is on the following waivers: Attendant Care waiver, Independence waiver, COMMCare waiver, OBRA waiver, and the ACT 150 program; they have an annual Service Plan. This report calculates a projected monthly amount of services based on the total number of units* divided by the number of days in their annual service plan period. This breakdown helps ensure they are properly utilizing their services in their approved plan period. This report will also be sent to their Service Coordinator and OLTL.

WORKER WORKING 16+ HOURS SHIFT REPORT

The Pennsylvania Office of Long-Term Living (OLTL) Worker Working 16+ Hours Summary Report is a monthly report that describes when their worker(s) have worked for 16 hours or more during a single shift. The report will demonstrate all dates of services and shifts worked that are equal to or greater than 16 hours for the month being reported. This report will also be sent to their Service Coordinator and OLTL.

Services My Way Process for purchases of goods and services

Participants enrolled in Services My Way may make purchases for items or additional services. When a service coordinator sends a referral that includes a request for purchases, PPL will provide a vendor packet to be completed by the service coordinator and the participant that directs PPL to set up payments for vendors.

When a purchase is made the participant should complete and submit the Vendor Payment Request Form to Public Partnerships for a vendor payment to be issued.

60-Day and Annual Satisfaction Surveys

Sixty days after the Participant begin their services, Public Partnerships will mail them a Satisfaction Survey. They will also receive a survey, annually. Please answer the survey completely and honestly. The results of the satisfaction surveys will be compiled, and the results will be used to improve our procedures and guidelines. If they require assistance with the completion of their survey, please contact our Customer Service representatives at 1-877-908-1750.

Complaint and Grievance Process

Public Partnerships is committed to addressing the financial management needs of OLTL Participant- Directed Services Participants. At times Participants and CLE's are dissatisfied with a Public Partnerships' decision about their service or are dissatisfied with established processes or program rules. Procedures for obtaining a resolution and a response for a complaint are:

A Participant or CLE should call Public Partnerships' Customer Service line at 1-877-908-1750 and state that they wish to register a complaint. A Customer Service Supervisor will listen to the complaint, review information documented in a support ticket and any recorded phone calls to determine a response to the complaint. The Supervisor will ensure that the response is consistent with program rules. The Supervisor or other designation will provide an over-the- phone response, and a description of the complaint and response will be documented.

A grievance is a concern or disagreement with a Public Partnerships procedure, process or program rule that may be elevated from the complaint process or referred directly to Program Management for response or resolution. If a Participant/CLE wishes to file a grievance, they should contact Customer Service to obtain a grievance form. A written grievance will be reviewed by the Program Manager or other designated individual. The Program Manager has discretion in utilizing Public Partnerships' resources, including Executive Management and DHS staff to assist in determining appropriate responses to a grievance. Contact and follow up with the Participant will be made within two business days of receipt of the Grievance Form. A grievance form should be mailed to:

Public Partnerships, LLC
PO Box 61257
Harrisburg, PA 17106-9957
Attn. Program Manager

Additional Training for Participants

- Public Partnerships' Enrollment Specialists schedule visits to meet with the Participant in their home or over the phone. They can help the Participant with forms completion, understanding their role as an employer, how to submit payment for time, and much more.
- If Participants need additional training, please contact our Customer Service department who will provide them training or will refer their training request needs to Public Partnerships' Program staff who will reach out to them for an appointment. Public Partnerships' Enrollment Specialists are available one evening during the week if a participant would prefer to schedule an evening appointment.
- Visit the Public Partnerships' website for pre-recorded training sessions for Common Law Employers.
- Contact their Service Coordinator who will arrange training for them with Public Partnerships' Program Staff.

Become a PPL Portal User

Public Partnerships encourages the Participant to become a BetterOnline web portal user if they have access to a computer. Public Partnerships will send them instructions for setting up their Portal Account in their 'Welcome Packet.' They will receive this packet once the Participant, and at least one of their workers, has completed the enrollment process.

The Public Partnerships' BetterOnline web portal access allows Participants/DCWs to submit timesheets quickly and safely and provides autocorrect features and notifications so their timesheets are submitted correctly the first time. The BetterOnline portal allows them to check on the status of their timesheet from the time they submit a timesheet through the payment of a timesheet. It allows them to view timesheet history and to view the maximum wage they can pay their worker. It allows them to view the hours they have used and the hours they have available to use. It allows them to check on the enrollment status of their new workers and see what forms and background checks still need to be completed. And it allows them 24/7 access so that they can view their account anytime. If they need additional assistance setting up their account, please contact Customer Service.

Pennsylvania's Participant Direction Forum

Public Partnerships hosts Pennsylvania's Participant-Direction Forum, and they invite the Participant to join. The forum is an online community of participants and their representatives and common law employers, workers, and Service Coordinators, designed for giving and getting advice, sharing wisdom, and learning from experts, all while safeguarding the privacy of those who join.

The Participant can:

- Communicate with their peers
- Post questions and answers regarding the program
- Learn how others make the most of participant-direction
- Help others by sharing what they know about using the program

Forum moderators are members of the participant-direction community such as a Participant, DCW or a significant other.

How to get started:

- Go to: <https://groups.google.com/forum/#!forum/pdf-pa> by using their current Google account or creating a new one*.
- Click on "Join Group" to gain access to the site.
- Answer a question, post one of their own, or browse.

**Users can and are encouraged to use an anonymous identity to protect their privacy.*

APPENDIX Completing and Submitting the Direct Care Worker Paper Timesheet

Included in the Welcome Packet that Public Partnerships mailed to the Participant, are initial paper timesheets so that they can begin approving and submitting their workers' timesheets. Public Partnerships issues paychecks to workers on a bi-weekly basis (or every two weeks). Public Partnerships makes payment on timesheets that are completed correctly and submitted on time according to the payroll schedule that was provided to them in their Enrollment Packet (see earlier discussion on Payroll Schedules). They can mail or fax their paper timesheets. Be sure to:

Fill in the timesheet in a manner that will be easy to read. Their timesheet is being read by a machine. If it cannot read their timesheet, it may delay their payment.

Fill in all the required fields. They will not be paid unless all required fields are filled in.

Do not use colored ink. Use a Pen. Use black or blue ink. The machine has trouble reading light colors.

Use separate timesheets for different Participants. If their DCW works with more than one Participant, make sure they sign his/her timesheet for hours provided only to them.

Follow the Key to determine the appropriate information to enter in the fields below.

1 Participant (Last Name, First Name)

2 Direct Care Worker (Last Name, First Name)

3 Participant ID

4 Direct Care Worker ID

5 Week 1 Start Date (mm/dd/yyyy)

6 Week 2 End Date (mm/dd/yyyy)

7 Service Type

8 Time In/Out Grid

9 Total Hours for Week 1 and Week 2

10 Service Type Legend

11 Direct Care Worker Signature

12 Employer/Participant Signature

13 Date (mm/dd/yyyy)

14 Key for data entry

Key:
 * USE BLACK INK, PRINT ONE CHARACTER PER BOX, TRY NOT TO TOUCH THE LINES!
 CORRECT: 10 00 20
 INCORRECT: 10 00 20

Timesheet Key for Required Fields Check List

PLEASE BE SURE THEY HAVE ENTERED THE FOLLOWING INFORMATION ON THE TIMESHEET.

1. Participant ID
2. Participant Name
3. Direct Care Worker ID
4. Direct Care Worker Name
5. **Week 1 Start Date.** (This is the first day of the pay period. See their pay schedule.)
6. **Week 2 End Date.** (This is the last day of the pay period. See their pay schedule.)
7. **Time In/Time Out.** Enter in the time they started working, and the time they finished working
8. **AM/PM.** Correctly fill-in
9. Total Hours for each line and Subtotal for each week
10. **Service Type.** On the timesheet, they will see a column called "Service Type." In this column, they should enter a 1 for Personal Assistance Services, 2 for Respite or 3 for Participant-Directed Community Supports.
 - a. They will need to enter the service type number for each shift they work.
 - b. They may enter more than one service type on their timesheet.
 - c. If a service type is not filled-in, Public Partnerships will process the timesheet with service code 1.
 - d. Their Service Type is found in the Participant's Service Plan, or they can ask their Service Coordinator.
11. **Date of Employer/Participant Signature.** Date that the Employer/Participant has reviewed and signed the timesheet.
 - a. **Please note:** this signature MAY NOT be dated **before** the last day the Direct Care Worker provided services.
12. **Employer/Participant Signature.** The Participant, Common Law Employer or Authorized Representative's signature. An 'X' or a mark is accepted (as necessary) as a signature for Participants who are approving and signing timesheets
13. **Date Direct Care Worker Signature.** This is the date the Direct Care Worker completed and signed the timesheet.
 - a. **Please note:** this signature MAY NOT be dated **before** the last day that the Direct Care Worker provided services.
14. **Direct Care Worker Signature.** Signature of the Direct Care Worker who provided the services identified in this timesheet.

TIPS to keep in mind when submitting a paper timesheet

Make sure the timesheets are good copies. Participants/DCWs can make copies of the timesheets Public Partnerships has provided them but make sure they are full-size, clearly visible and not tilted or our machine will not read them.

Do not cross out information. The machine will not read it. Use a new timesheet.

Do not round time. Write the exact time.

Be sure their Time In & Time Out entry does not overlap with another worker's timesheet.

Be sure their Time In & Time Out entry does not overlap on any shift of a worked day on their timesheet.

Do not include a Cover Page with their timesheet. Fax only the timesheet.

Fax their timesheet only once to avoid duplicates that delay the processing of their timesheet.

Keep a copy of their faxed send receipt to confirm their timesheet was sent to Public Partnerships.

Paper Timesheets can be mailed or faxed. They only need to submit their timesheet one time.

By signing a timesheet understand that I am the employer for my Direct Care Workers. I am required to sign all timesheets (either manually or electronically). By my signature, I am stating that the time submitted by my worker is accurate. I understand that I will be responsible to pay for hours which exceed budgeted hours allowed in the Service Plan.

SUBMITTING TIMESHEETS INFORMATION

Timesheet Fax:
1-855-858-8162

Timesheet Mailing:
Public Partnerships
PO Box 1108
Wilkes-Barre, PA 18773-9905

OBTAINING TIMESHEETS

Participants/DCWs can download copies of the timesheets online at www.publicpartnerships.com.

- Go to the PA DHS OLTL program, click on “Program Login” in the upper-right corner, select “Pennsylvania” from the drop-down menu, click on the “OLTL Programs” link
- If they cannot access the website, please call customer service at 1-877-908-1750 to have timesheets mailed to them.

VERIFYING PUBLIC PARTNERSHIPS RECEIVED THEIR TIMESHEET

Timesheets are processed within three business days of receipt. They can verify that Public Partnerships received their timesheet by calling 1-877-908-1750 and following the automated prompts for “Checking on status of timesheet or upcoming payroll check” (Option 1). Please allow three (3) business days from the date they faxed their timesheet before calling. If they mailed their timesheet in, it might take up to five (5) business days from the date they mailed in their timesheet until it is processed.

COMPLETING TIMESHEETS - SPECIAL SITUATIONS

1. **Working overnight** - when the DCW works overnight, they must complete one line for work they did before midnight and another line for work they did after midnight
2. **Working multiple times in one day.** A DCW may work with someone several times in a day. They must enter each in and out time on a new line and utilize additional timesheets as necessary to record their shifts for each day

If they are a Direct Care Worker that frequently works more than three (3) shifts in the same day, Public Partnerships highly recommends submitting their time electronically.