



**Self Direct Option  
(also known as Consumer Directed Option or  
Participant Directed Option)**

**Skills Training Outline**

The materials in this packet will assist you in your employer/representative role and with understanding:

- The role and responsibilities of the employer/representative
- How to recruit, screen, hire, and train employees/attendants
- How to monitor and manage employees/attendants
- The role of the Fiscal Intermediary
- When to contact the Care Coordinator, the importance of giving notice, and obtaining prior approval for respite usage and out of state services
- Items required before being authorized as the employer/representative
- Adult Abuse, Neglect, and Exploitation resources and SeniorsPlus' role of being a mandated reporter
- Required and optional forms

If you or someone  
you know is being  
abused, neglected  
or exploited, or  
is unsafe, call

**Adult  
Protective  
Services**

for information  
or help.

**1-800-624-8404**

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# Adult Abuse, Neglect, and Exploitation



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**Aging  
and  
Disability  
Services**

**Abuse hurts at any age.**

**Department of  
Health and  
Human Services**

Janet T. Mills, Governor

## What is Adult Abuse, Neglect, Exploitation?

Abuse, neglect and exploitation of adults happens in Maine. Many people are uncomfortable talking about these problems, especially if the abuser is a family member or friend. Help is available if people are aware of the problem and take steps to report it.



**ABUSE** includes actions which result in bodily harm, pain or mental distress. Signs of abuse include:

- burns, welts, bruises, fractures
- severe anxiety, fearfulness, depression
- indications of sexual abuse
- over-medicated or under-medicated
- visitors not allowed to see the adult
- name calling, harassment or verbal threats.

**NEGLECT** is a failure to provide care and services when an adult is unable to care for him or herself. Neglect may be at the hands of someone else or it may be self-neglect. Neglect includes failure to provide:

- adequate shelter, clothes or food
- personal care
- medical attention or necessary medication
- necessities such as glasses, dentures, hearing aides, walkers.

**EXPLOITATION** is the illegal or improper use of an adult's money or property for another person's profit or advantage. Examples of exploitation include:

- forcing an adult to change a will or sign over control of assets
- forcing an adult to sell or give away property or possessions
- keeping the adult's pension or social security check
- unexplained disappearance of funds or valuables
- excessive payment for care or services.

## Abuse hurts at any age.

### Where to report to Adult Protective Services

To make a confidential report of abuse, neglect or exploitation of an incapacitated or dependent adult, call Adult Protective Services:

**Nationwide 24-hour, toll-free  
1-800-624-8404**

#### TTY users:

**Dial 711 (Maine Relay)**

**To report abuse, neglect or exploitation in a facility**

**licensed by the Department of Health and Human Services, call:**

**Statewide toll-free  
1-800-624-8404**

#### TTY users:

**Dial 711 (Maine Relay)**

### What Are Risk Factors For Abuse, Neglect or Exploitation?

- Social isolation
- History of domestic violence
- Alcohol or drug abuse
- Mental illness
- Lack of adequate support systems
- Mistreatment of pets
- Dependency of abuser on the adult

### What Are Adult Protective Services?

Adult Protective Services is a program within the Office of Aging and Disability Services. Its purpose is to provide and arrange for services to protect adults who are unable to protect themselves from abuse, neglect or exploitation.

### Who May Receive These Services?

Any dependent or incapacitated adult who may be in danger of abuse, neglect or exploitation may receive assistance from Adult Protective Services. A dependent adult is a person who has a physical or mental condition that substantially impairs the adult's ability to adequately provide for their daily needs. An incapacitated adult is a person who lacks sufficient understanding to make or communicate decisions about his or her own person or property. These adults may need someone else to make some or all of their decisions for them.

### Clients of Adult Protective Services may include:

- frail or vulnerable elders
- adults with mental illness
- those with alcohol or drug abuse problems
- those with medical problems or disabilities.

**Make a difference. Make a call.**



# **Self Direct Option Training Manual**

October 2023

*Our mission is to enrich the lives of seniors and adults with disabilities.  
SeniorsPlus believes in supporting the independence,  
dignity and quality of life of those we serve.*

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# **SECTION 1**

## **Definitions**

## **Definitions**

Activities of Daily Living (ADLs) include only the following activities: bed mobility, transfer, and locomotion, eating, toileting, bathing, and dressing.

Assessment refers to the medical eligibility determination completed by the Assessing Service Agency where a plan of care is developed to authorize in-home services for the client.

Care Coordination is to assist clients in receiving appropriate, effective and efficient services, which allow them to retain or achieve the maximum amount of independence possible. These services assist with locating service providers, overseeing the appropriateness of the plan of care, and monitoring the client's health status.

Employer (or Representative) refers to the person who manages the client's services.

Employee (or Attendant) refers to the person who is hired to provide services to the client.

Fiscal Intermediary (FI)/Financial Management Service (FMS) is the organization that provides administrative and payroll services on behalf of the employer. FI services include preparing payroll and withholding taxes, making payments to suppliers of goods and services, and ensuring compliance with State and Federal tax and labor regulations.

Health Maintenance Activities include tasks such as catheterization, ostomy care, preparation of food and tube feedings, bowel treatments, administration of medications, care of skin with damaged integrity, and occupational and physical therapy activities such as assistance with prescribed exercise regimes.

Initial Employer Referral is the document that the Care Coordinator and Skills Trainer Coordinator use to authorize services. The referral includes the amount of hours and tasks that are authorized and is provided to the employer prior to the start of services.

Instrumental Activities of Daily Living (IADLs) are tasks necessary for maintaining a person's immediate environment, such as preparing and serving meals, washing dishes, dusting, making bed, pick-up living space, sweeping, vacuuming and washing floors, cleaning toilet, tub and sink, appliance care, changing linens, refuse removal, shopping for groceries and prepared foods, storage of purchased groceries, and laundry either within the residence or at an outside laundry facility.

Reassessment refers to the review of medical eligibility completed by the Assessing Service Agency on an annual or more frequent basis to authorize in-home services for the client. The reassessment may include changes to the client's care plan.

Skills Training is a service that provides employers with the information and skills necessary to carry out their responsibilities when choosing to participate in the Self Direct Option. Skills training services instruct the employer in recruiting, interviewing, selecting, training, scheduling, discharging, and directing a competent employee in the activities in the authorized plan of care.

Updated Employer Referral is issued to the employer upon reassessment. The referral may include changes in the amount of hours or tasks authorized.



# **SECTION 2**

## **Introduction**

- ❖ **Who is SeniorsPlus Care Coordination?**
- ❖ **Care Coordination Contacts**
- ❖ **Training Manual**

## **Who is SeniorsPlus Care Coordination?**

SeniorsPlus is one of the state's five Area Agencies on Aging. SeniorsPlus contracts with the Office of Aging & Disability Services (OADS) and the Office of MaineCare Services (OMS) to provide care coordination services for the following state and MaineCare funded home care programs.

- Home Based Supports and Services for Older and Disabled Adults (HBSS) – Section 63
- Home and Community Benefits for the Elderly and Adults with Disabilities (HCB) – Section 19
- Private Duty Nursing and Personal Care Services (PDN) – Section 96

## **Care Coordination Contacts**

In your role as the employer, you will work with a Skills Trainer Coordinator and Care Coordinator as related to the Self Direct Option.

### Role of the Skills Trainer Coordinator

- Determines employer eligibility for self direct
- Assists employers with getting started under self direct
- Initiates contact with the appropriate parties throughout the process
- Ensures program compliance
- Works with the Fiscal Intermediary (FI)
- Provides ongoing skills training and problem solving

Contact a Skills Trainer Coordinator when you have questions related to compliance with regulations, recordkeeping, hiring qualified employees, and other program related matters. Please keep the Skills Trainer Coordinator informed of changes in address, telephone numbers, and other contact information. You can reach a Skills Trainer Coordinator by telephone at 1-800-427-1241, by fax at 207-795-4009, and by e-mail to [skillstrainer@seniorsplus.org](mailto:skillstrainer@seniorsplus.org)

### Role of the Care Coordinator

- Reviews the Initial and Updated Employer Referral with the employer
- Authorizes tasks/services and hours
- Manages changes, reductions, and revisions to services
- Provides ongoing care coordination for the client
- Coordinates other services (RN, LPN, OT, PT)

Contact the assigned Care Coordinator if you have questions related to the care of the client, authorized hours and services, the Initial or Updated Employer Referral, or if the client's ability to receive care or the employee's ability to provide care changes.

The assigned Care Coordinator and their direct line is listed on the Initial Employer Referral (refer to Appendix A) that is included in your training packet. If the Care Coordinator has changed or you are unsure of whom to contact, you may call the main office and ask for the assigned Care Coordinator.

# **SECTION 3**

## **Overview of the Self Direct Option**

- ❖ **Program Benefits**
- ❖ **Family Provider Service Option**
  - **Employer Qualifications**
  - **Employee Qualifications**
- ❖ **Consumer Directed Option/Participant Directed Option**
  - **Representative Qualifications**
  - **Attendant Qualifications**
- ❖ **Skills Training**

## **Program Benefits**

Participation in the Self Direct Option allows clients to have more involvement in their services and workers. Employers are able to select and hire employees, train the employees to perform the tasks that are required, manage the employee's schedule, and terminate employees as needed. Self-directed services have been shown to increase satisfaction and promote quality of life.

There are guidelines and responsibilities that go with choosing to participate in the Self Direct Option. SeniorsPlus Care Coordination will provide you with the training and resources necessary to help you understand the program guidelines and your responsibilities.

## **Consumer Directed Option (CDO) – Section 63 (HBSS)**

The Consumer Directed Option (CDO) is a choice offered to clients to manage their attendant services.

### **Representative Qualifications**

- Must be at least 18 years of age
- Must pass a CNA Registry and Criminal Background Check
- Have the ability to understand and perform tasks required to manage an Attendant as determined by the Service Coordination Agency
- Have the ability to communicate effectively with the Service Coordination Agency, Fiscal Management Services and Attendant(s) in performing the tasks required to employ an attendant.
- Agree to visit the Member in person at least once monthly and contact the Member in person by phone or other means at least weekly.
- Not be an Attendant reimbursed for providing care to the Member
- The client who chooses to manage his or her own services must meet cognitive capacity as defined in program regulations
- Cannot manage more than two clients
- Failure to comply with the Memorandum of Agreement requirements shall result in a termination of the Agreement

### **Attendant Qualifications**

- Must be 17 years of age
- A client's POA, Guardian, conservator, or other legally responsible individual may not be paid to provide care to the client
- If the spouse is the attendant, the spouse cannot provide respite hours

- Must pass a CNA Registry and Criminal Background Check prior to the start of services
- No individual providing this service may be reimbursed for more than 40 hours of care per week for an individual client or for a household in which there is more than one client

### **Family Provider Service Option (FPSO) – Section 96 (PDN)**

The Family Provider Service Option is available to certain eligible Members that allows the Member to manage his or own personal care services. The management includes hiring, firing, training, maintaining records and scheduling the personal support specialist(s). If the MaineCare Member does not have the ability or does not desire to manage his or her own care, a family Member related by blood, marriage or adoption, or a significant other in a committed partnership, can manage the personal support services on the Member's behalf. To use the Family Provider Service Option, the MaineCare Member, or his or her family member, as applicable, must be a family provider agency.

### **Employer Qualifications**

- Must be an adult 21 years or older and meet cognitive capacity
- Must pass a criminal background check and CNA registry check
- Cannot manage more than two clients
- Cannot be a paid attendant
- Must register under the Family Provider Service Option, pursuant to the Department's Rules and Regulations Governing In-Home Personal Care and Support Workers (PDN only)
- Must use a fiscal intermediary payroll agent that has been approved by the Department

### **Employee Qualifications**

- Must pass a criminal background check and CNA registry check prior to the start of services
- A Member's guardian cannot be paid to provide care to the Member
- A Member's spouse or legally responsible relative is not allowed to be the paid caregiver
- The adult who is registered under the Family Provider Service Option will not be paid to provide care to the Member
- PSS staff cannot work more than 40 hours per week per member

## **Participant Directed Option (PDO) – Section 19 (HCB)**

The Participant Directed Option is a service provision option that allows a Member or a Member's Representative to manage Attendant Services. Specifically, the Member or the Member's Representative hires, discharges, trains, schedules, and supervises the Attendant(s) providing services to the member and directs the provision of those Attendant Services. If the Member is directing his or her own services, the Member's ability to self direct must be documented on the MED Form (Assessing Services Agency Assessment Form).

A Representative may manage Attendant Services for a Member under the Participant Directed Option and shall not be compensated for the services provided under this section. The Representative must be able to manage and direct program Attendant Services for the Member in accordance with their preferences and meet all program requirements. The Representative may not actively manage the care for more than two Members participating in the Self Direct Option under this Section or another MaineCare or state funded long term care program.

### **Representative Qualifications**

- Must be at least 18 years of age
- Must pass a criminal background check, completed by the Fiscal Intermediary
- Have the ability to understand and perform tasks required to manage an Attendant as determined by the Service Coordination Agency
- Have the ability to communicate effectively with the Service Coordination Agency, Fiscal Management Services and Attendant(s) in performing the tasks required to employ an attendant.
- Agree to visit the Member in person at least once monthly and contact the Member in person by phone or other means at least weekly.
- Not be an Attendant reimbursed for providing care to the Member

### **Attendant Qualifications**

- Must be at least 17 years old
- Must pass a criminal background check and CNA registry check prior to the start of services
- Must not be the Member's guardian, conservator, or representative
- A Member who receives Attendant or PSS services as a Member under this section or other MaineCare or state program cannot be a paid Attendant or PSS, per regulation

- Attendants or PSS staff cannot provide more than 40 hours per week per Member or household, per regulation

## **Skills Training**

All employers are required to attend Skills Training related to managing the Self Direct Option. As the employer, you may request training in areas that relate to participation in self direct including completing timesheets, program regulations, quality assurance, record keeping, complying with the Memorandum of Agreement, and other related topics. Training will be provided by a Skills Trainer Coordinator. To schedule training, call or e-mail a Skills Trainer Coordinator.

At the discretion of SeniorsPlus Care Coordination, employers may be offered training related to their Memorandum of Agreement or changes in program regulations. These training sessions may be mandatory. If SeniorsPlus determines that additional training is necessary, the employer will be notified.



# **SECTION 4**

## **Responsibilities of the Employer**

- ❖ **Overview of Responsibilities**
- ❖ **FPSO Registration (PDN program only)**
- ❖ **Memorandum of Agreement**
- ❖ **Giving Notice**
- ❖ **Program Changes**
- ❖ **Universal Precautions**

## **Overview of Responsibilities**

There are many responsibilities that go along with functioning as the employer. Employers must adhere to requirements of the Memorandum of Agreement, as well as all other pertinent laws and program regulations. If you have questions about these responsibilities or feel that you are unable to comply with them for any reason, please contact the Skills Trainer Coordinator.

As the employer, you are responsible for:

- Recruiting and interviewing applicants
- Performing reference checks
- Selecting and hiring employee and determining wages
- Scheduling, training, and supervising employees
- Monitoring and evaluating work performance
- Discharging/terminating employees as necessary
- Following all applicable federal and state employment laws and program regulations
- Completing all required fiscal intermediary paperwork
- Meeting all deadlines
- Verifying time worked by employee and signing timesheets
- Arranging for backup support and handle emergencies when employee is late for fails to show up for work

## **Family Provider Service Option Registration**

Employers under PDN program are required to register as a Family Provider Service Option with the Department of Health and Human Services prior to being approved as an employer. The FPSO Registration must be renewed annually and **prior** to the expiration date. Proof may also be required at the time of a compliance review.

Employers will receive renewal notices from the State of Maine Division of Licensing and Certification (DLC) three months prior to the expiration date. The employer is responsible for contacting DLC if they have not received renewal letter within 45 days of the expiration date. SeniorsPlus recommends that employers submit their renewal application and payment to DCL at least 4-6 weeks prior to the expiration date. SeniorsPlus will not authorize payment for services provided under self direct if the FPSO Registration has expired.

## **Memorandum of Agreement**

By signing the Memorandum of Agreement, the employer agrees to comply with conditions of the Agreement, applicable program regulations, and other pertinent State or Federal Laws, including, but not limited to:

- Rules and Regulations Governing In-home Personal Care and Support Workers through the DHHS Division of Licensing and Regulatory Services
- MaineCare and/or OADS Policy regulations
- Workers' Compensation laws
- Unemployment laws
- Federal and State Tax laws
- Wage and Labor laws

## **Giving Notice**

Employers must notify the Care Coordinator of changes in the client's services or location within 24 hours. Examples of information that must be reported include:

- The health or welfare of a client or any individual in the home is at risk
- Changes occur in the client's needs or condition
- Employee's ability to meet the needs of the client changes
- Employee's ability to provide services changes
- Client is hospitalized, admitted to a facility, going on vacation, or moving
- Client requests discharge, suspension, or reduction in services
- Employer is unable to carry out authorized services for any reason (client refuses services, is unable to staff services, etc.)

## **Program Changes**

Reassessments by the Assessing Services Agency that result in a new program could mean that the employer has to meet new requirements in order to continue with self direct. Under the new program, the employer may be required to:

- Pass a criminal background check and CNA registry check
- Register under the Family Provider Service Option, pursuant to the Department's Rules and Regulations Governing In-Home Personal Care and Support Workers

Your Skills Trainer will contact you as soon as the program change is identified. Your Skills Trainer will explain the new requirements and provide you with all of the

necessary paperwork, along with the timeframes for completing the paperwork. It is important to note that there may be times when SeniorsPlus has to place self direct services on hold until the employer is in compliance with the new program requirements. During this time, employee(s) may not receive payment for services provided. It will be up to you as the employer to pay your employee(s) should you decide to have them continue providing services until all requirements have been met.

### **Universal Precautions**

Universal precautions refers to the practice of avoiding contact with a person's bodily fluids, by means of wearing non-porous articles such a medical gloves, goggles, face shields, or barrier gowns. The employer is responsible for providing universal precaution materials for employees, as necessary.

# **SECTION 5**

## **Fiscal Intermediary (FI)**

- ❖ **Role of the Fiscal Intermediary (FI)**
- ❖ **Employee Safety**
- ❖ **Workers' Compensation Insurance**
- ❖ **Range of Pay**
- ❖ **Timesheets**

## **Fiscal Intermediary (FI)**

The role of the Fiscal Intermediary (FI) is to:

- Enroll the employer
- Provide employers with employee packets for new hires
- Complete required background checks on the employer (if applicable) and employees prior to the start of services
- Maintain workers' compensation insurance for employees
- Process timesheets and complete payroll for the employer and issue paychecks to employees
- Assist employers with questions related to the fiscal part of the option
- Send quarterly reports to the IRS

The FI will issue paychecks directly to the employees and withhold taxes based on information provided by the employer and their employees. Employers must work with the FI and provide all required paperwork within the required timeframes. Failure to comply may result in delay or denial of payment to employees. Employers are responsible for notifying the FI of any changes related to employees including, changes in name or address, tax information, criminal record status, and status on the CNA Registry.

## **Employee Safety**

Employers are responsible for educating employees on workplace safety. Contact your FI to request a copy of their safety manual.

## **Workers' Compensation Insurance**

State law requires employers to provide workers' compensation insurance for its employees. Workers' compensation insurance provides benefits to employees who are injured at work. The FI will maintain workers' compensation insurance on behalf of employers. The insurance premium is paid with program funds. Premiums are based on estimated payroll amounts, subject to minimum premium levels. The FI will notify the insurance carrier when a policy is cancelled.

Process for reporting when employee is injured at work or claims he/she has been injured at work.

- In case of a life threatening emergency, call 911 first
- Contact your FI for information on the reporting process

- Employer's First Report of Occupational Injury or Disease must be completed by the employer. The FI cannot complete the First Report on behalf of the employer. The FI is able to provide the Employer Identification Number (FEIN), policy number, and other demographic information as needed.

### **Range of Pay**

The range of pay for your employees will depend on the program funding source and the contracted FI that you choose to enroll with. Your Fiscal Intermediary can provide you with the pay range information that you need in order to make a decision about how much you are able to pay your employees.

### **Timesheets**

Employees are expected to accurately document their time worked and tasks performed on the timesheets provided by the FI. The appearance of the timesheet may vary depending on the FI that you are enrolled with but they all require the same basic information such as date worked, hours worked, tasks provided, and signatures.

Employers should carefully review timesheets prior to signing and submitting to the FI. Your signature indicates that you have reviewed the timesheets and are in agreement with the information that has been documented.

Employers are responsible for submitting timesheets according to the payroll schedule provided by the FI. Late timesheets may result in delayed or non-payment to your employee.

### **When to Contact your FI**

- If your employee quit working or provides you notice that they are quitting
- Your employee was injured while completing work duties
- If you have terminated your employee or provided notice of termination
- To request employee packets if you need to hire another employee
- If you receive any notices regarding taxes

# **SECTION 6**

## **Recruiting, Interviewing, and Hiring Employees**

- ❖ **Advertising**
- ❖ **Phone Screening**
- ❖ **Face-to-Face Interviewing**
- ❖ **Reference Checks**
- ❖ **Background Checks**
- ❖ **Required Forms**



The information in this section is to assist employers with locating and selecting the appropriate employees to provide services to the client.

Employers are expected to exercise due diligence in selecting employees. Employees paid under the program must meet all applicable regulatory and legal requirements.

## **Advertising**

Before you can advertise, you must first determine how many employees you need to hire. Keep in mind the number of hours that are authorized in the plan of care to make sure there is adequate coverage according to what is allowed under program regulations. For example, if the plan of care is for more than 40 hours per week then you will need to hire at least two employees. If the client requires morning and evening shifts, you may need to hire more than one employee. If the plan of care is for 20 hours per week, then one employee may be sufficient. You may also want to consider hiring a backup employee in the event that your primary worker becomes ill or needs time off.

When advertising for employees, consider the resources that are available in your area. Advertisements can be simple and inexpensive using paper or index cards and posting throughout your community. Some ideas of where to post advertisements include:

- Career Centers or employment offices
- Grocery stores, laundromats, or convenience stores with community bulletins
- Local churches or libraries
- Colleges or universities
- Social services agencies
- Community or local newspapers
- Local Area Agency on Aging
- Elder Attorney Offices
- Word of mouth and personal recommendations
- Websites like Care.com

Employers should contact the location first to determine what policies or rules they have in place for postings. Remember to also ask for pricing information if you decide you would like to run an ad in a newspaper as this could be the most costly.

## Creating Your Ad

As you think about the ad you plan to use for recruiting, it is important to keep in mind that the more detail you provide, the better suited the applicants will be. Be sure to include information about the care you are seeking, approximate schedule, and hourly wage. You may also want to include information about personal interests or preferences.

Items to include in your advertisement:

- Number of hours and approximate schedule
- Hourly wage
- General location (do not include your home address)
- Contact number (provide yours, a friend's, or family member's)

Sample Ad

**Personal Assistant Needed** 20 hours/week to help older adult with personal care, laundry, housekeeping, and grocery shopping. Must love pets and be a non-smoker. Experience preferred but not required. \$14.15/hour. Call Renee at xxx-xxx-xxxx.

## Phone Screening

Employers are encouraged to complete an initial screening with the applicant over the phone. This is a great way to learn basic information about the applicant and helps the applicant decide if the job would be a good fit for them. It may be helpful to keep a notebook handy to document people who express interest and to make notes as you screen applicants.

Employers should inquire about the applicant's interest in this kind of work and the type of training that they have received. Provide the applicant with an overview of the daily care requirements, including any higher level tasks. Be sure to discuss the amount of hours that are needed, preferred schedule, and when you are looking to have someone start. It is also helpful to make applicants aware of any pets that are in the home or other environmental factors that may not work for the applicant (smoking in the home, allergies, etc.)

When screening applicants, be sure to keep in mind that it is illegal to ask people certain questions that may be discriminatory. Limit your questions to the applicant's

ability to complete the tasks that would be required. Avoid questions that are related to age, sex, religion, health, etc.

Once the phone screening is completed, the employer should have collected enough information about the applicant to determine if they would like to move forward with scheduling a face-to-face interview. The employer should discuss scheduling a face-to-face interview with the applicant at the end of the call.

### **Face-to-Face Interviewing**

The purpose of a face-to-face interview is to learn as much as you can about the applicant so the employer can determine if the applicant is able to meet the needs of the client. Included below are some basic guidelines for face-to-face interviewing.

- If you do not want to interview the applicant in your home, find an alternate location that is safe such as a church, community space, library, or other public space.
- Invite a friend or family member to the interview if that makes you more comfortable
- Sit facing the applicant so you can observe eye contact and body language
- Eliminate distractions such as TV, radio, cell phones, etc.
- Avoid spaces where interruptions may occur from pets or children
- Be prepared with a list of questions that you want to ask the applicant
- Review the client's needs and care plan to make sure the applicant is comfortable and capable of carrying out the required tasks
- Discuss hours, the schedule, and rate of pay
- Take notes so that you can compare applicants and determine who would be the best fit

Be aware of red flags during the interview such as late arrival, confidentiality issues/discussing former employers or clients, poor grooming, little eye contact, lack of references, emphasis on needing a job or paycheck rather than being committed to doing a good job.

It is important that the employer allow the applicant to talk and provide adequate answers to questions. If the applicant fails to provide enough information, the employer should ask follow up questions.

At the end of the interview, the applicant should have a clear understanding of what would be required of them should they be offered the job. The employer should make

sure the applicant understands that there is a hiring process and that work cannot begin immediately.

Once all applicant interviews are completed, the employer should have the information necessary to determine the top candidates for the job. The employer should review notes and the applicant's answers to the interview questions to narrow down the pool of candidates.

## **Reference Checks**

The next step would be for the employer to complete reference checks on the top applicants. Hiring someone before or without completing reference checks is not recommended, even if you think you know the person well.

## **Employer References**

As you complete reference checks, keep in mind that past employers can only provide certain information and some may require a release from the former employee. Below are some examples of information you could verify during a reference check.

- Dates of employment
- Reliability
- Salary

## **Personal References**

In addition to employment references, applicants should provide personal references as well. You may be able to gather more detailed information about the applicant through the personal reference, including how they know the person and if they would recommend them to provide personal care services.

## **Background Checks**

Your FI will complete the necessary background checks on all potential employees and determine eligibility for hire.

The employer cannot have the employee begin providing services until they have been approved. Once the employee has been approved for hire, the FI will send the employer a copy of the background check, which must be retained in the personnel file.

If the employee is eligible for hire, the Skills Trainer Coordinator will issue a date that they can start providing services. The employer is responsible for contacting the employee to discuss the start date. Once you have received approval from the Skills Trainer Coordinator, you and the employee will work with the FI to complete all necessary paperwork.

**Reminder!**

\*Your employee cannot begin providing services or submitting timesheets until the hiring and FI enrollment process has been completed and you have received a start date from the Skills Trainer Coordinator.

If timesheets are submitted prior to the start date, the FI will deny payment to your employee. You as the employer then become liable for providing payment for any services provided to the client.

# **SECTION 7**

## **Training and Managing Employees**

## **Training**

Upon hiring an employee, the employer should provide the necessary training in order for the employee to provide the services that are authorized. The employer should also establish guidelines and expectations around communication, dependability, consistency of care, personal appearance, confidentiality, and recordkeeping.

It is important for the employer provide specific training on the care plan tasks that are authorized in the Initial or Updated Employer Referral from SeniorsPlus. It may be helpful to outline a training list for the employee to be sure that all of the necessary information is reviewed. The Plan of Care Employee Assignment form provided in your training packet can also be used as a training guide.

## **Managing Employees**

Employers should provide employees with feedback regarding their performance and the client's satisfaction with services. It is important for the employer to be clear about the job duties and performance. The employee should feel supported and comfortable having open conversations with the employer. Creating a positive relationship with your employee will be beneficial for all that are involved in the care of the client.

Employers are expected to take appropriate action when a staff person engages in unethical behavior such as:

- Documenting time that was not worked
- Documenting shifts that are not accurate
- Completing tasks that are not authorized in the plan of care
- Forging signatures on timesheets or other documents
- Altering timesheets after the employer has signed
- Violating privacy rights
- Engaging in personal or non-client related activities during scheduled shifts (talking on the phone, browsing the internet, watching TV, etc.)

If an employer is concerned about their employee's behavior, they should contact the Care Coordinator or Skills Trainer Coordinator.

# SECTION 8

## Recordkeeping

- ❖ Personnel Records
- ❖ Client Records
- ❖ Confidentiality



Program regulations require that you maintain certain client and personnel documentation. The forms provided to you and reviewed during training meet minimum standards outlined in the program regulations.

## **Personnel Records**

Personnel records must be maintained on each employee hired by the employer. Applicable forms and details are listed below. Your training packet also includes copies of all required forms that must be completed. These forms can be copied as necessary or you can request additional copies by contacting your Skills Trainer Coordinator.

The following documentation must be included in each personnel record. Please note that the requirements vary by program.

- Name of employee and date of hire
- Demonstration of Competency (PDN only)  
This form is used to verify that employees have the competency skills to complete the tasks that are authorized by SeniorsPlus. A separate form must be completed for each employee before the employee begins working. Use the information provided on the Initial or Updated Employer Referral to complete the form.
- Orientation Statement (PDN only)  
This form is used to verify that employers have provided orientation on topics that are required to meet the needs of the client. Employers should identify orientation topics and list them on the form. Topics may include what to do in an emergency, infection control, special needs, health maintenance tasks, completing timecards, etc. This form must be completed before the employee starts providing services and each time a new employee is hired.
- Background Check  
Must include evidence of a Certified Nursing Assistant Registry check and criminal history background check. This information will be provided by your FI.
- Confidentiality Policy (PDN only)  
Program rules require that employers have a confidentiality policy. Review this form with your employees before they start working. If you hire new employees in the future, review and complete this form with them before they start working.

- Drug, Alcohol, and Tobacco Free Policy (PDN only)  
Program rules require the employer to have a drug, tobacco, and alcohol-free workplace policy. Review and complete this form with your employee before they start working. If you hire new employees in the future, review and complete this form with them before they begin working.
- Statement of Competency Certification (HBSS and HCB only)  
Must be completed within 21 days of hire and a copy submitted to SeniorsPlus.

If you have questions about maintaining personnel records, please contact a Skills Trainer Coordinator for assistance. Failure to maintain and document required personnel information may result in termination of your Memorandum of Agreement and could require you to reimburse the program funding source for money paid to your employees and other program costs. If an employer submits timesheets for an employee who is not properly screened, the employee will not be paid. If payment has already been made on behalf of the employer, the employer will be required to reimburse the appropriate program funding services for any funds paid on their behalf.

Copies of records must be made available to SeniorsPlus upon request at no cost within the timeframe specified. Employers are responsible for any costs associated with copying and mailing requested documents. All documentation submitted must be legible and include the client and employer name.

### **Client Records**

The employer must also maintain a client record. The record must include, at a minimum, all elements required by the applicable program rules and regulations. This includes, but is not limited to:

- Client Information Form  
This form documents basic information about the client and should be completed before you become the employer. Update the form any time the information changes and be sure to leave a copy in the client's home so employees can use as a reference.
- Initial or Updated Employer Referral
- Plan of Care Employee Assignment  
This form serves as a work order for your employees. Complete this form before self direct services start and update whenever authorized hours or services

change. Refer to the Initial or Updated Employer Referral when completing and to determine the daily schedule.

- Copies of timesheets submitted to the fiscal intermediary

Client records shall be retained for the minimum period required by program rules or applicable laws. The MaineCare Benefits Manual requires record retention for a minimum of five years from the last date of service.

Copies of records must be made available to SeniorsPlus upon request within the timeframe specified. . Employers are responsible for any costs associated with copying and mailing records requested. . All documentation submitted must be legible and include the client and employer name.

### **Protecting Confidential Information**

Employers will safeguard the confidentiality of the client's information and medical record. Please refer to the applicable program regulations and page 34 for additional information regarding confidentiality.

# **SECTION 9**

## **Care Coordination and Implementing Authorized Services**

- ❖ **Authorized Services**
- ❖ **Initial and Updated Employer Referral**
- ❖ **Changes to Authorized Services**
- ❖ **Reducing, Suspending, Termination, and Reinstating Services**
- ❖ **Duplication of Services and Third Party Liability**
- ❖ **Home Visits**

## **Authorized Services**

A Care Coordinator will explain the services that can be provided by your employee and how many hours of care the client is eligible to receive each week. You are responsible for ensuring that services are provided to the client as authorized.

- The Assessing Services Agency authorizes a specific care plan based on the medical needs of the client
- The pattern of services will be determined by the client, the Care Coordinator, and employer
- Personal care service hours may not be carried over from one week to the next without prior approval from the Care Coordinator
- Personal care services delivered by a provider in the community can be exchanged with self direct services and vice versa when there is lack of in-home personal care services and coverage is needed. Employers must communicate coverage needs to the Care Coordinator.
- Respite services require prior approval from the Care Coordinator
  - Respite care is provided to a client who is unable to care for him or herself and who requires care on a short-term basis due to temporary absence of, or to provide relief for, the caregiver who normally provides care
- The Initial/Updated Employer Referral shows the maximum hours of service authorized each week based on the pattern of service. Any changes to the pattern of service could affect the number of hours on the referral and may cause billing to be rejected, which may result in the employee not being paid for services delivered.

Employers and their employees can only bill for services authorized on the Initial or Updated Employer Referral. Services will only be reimbursed if they are prior authorized and part of the authorized care plan. Submitting timesheets for unauthorized, non-covered, or disqualified services is not allowed and may be reported to the State Fraud Crimes Unit. Services must be provided in the client's home with the exception of errands authorized by the Care Coordinator (grocery shopping, transporting, laundry, etc.).

Examples of unauthorized services include attending social outings, spring cleaning, shoveling snow, mowing lawn, etc. Failure to perform authorized tasks may result in termination of the Memorandum of Agreement and recoupment of funds paid to your employees.

## **Initial and Updated Employer Referral**

Authorization for services will be made in the form of an Initial or Updated Employer Referral (Appendix A). The Initial/Updated Employer Referral provides the number of hours of service authorized per week, the specific tasks to be provided to the client, and the pattern for service delivery. An Initial Employer Referral is provided to the employer at the Skills Training prior to the start of service. An Updated Employer Referral is provided to the employer when the client is reassessed by the Assessing Service Agency or when the number of hours under self direct change or tasks change.

Employers are required to implement the Initial or Updated Employer Referral as it is written. If an employer disagrees with the Initial or Updated Employer Referral, or does not understand how to carry out the authorized services, they must contact the EIM Care Coordinator.

## **Changes to Authorized Services**

A Care Coordinator must authorize any changes in the amount of services, tasks delivered, the delivery pattern, and the location of services. To request a change in the plan of care, contact the Care Coordinator.

## **Reducing, Suspending, Terminating, and Reinstating Services**

If the client is admitted to a facility including a hospital, nursing facility, rehabilitation or other facility, or goes away on vacation, the employer must notify the Care Coordinator. Self direct services will be cancelled upon admission to a facility and no in-home services are allowed.

If the client is away from home for more than 60 days, the client will be discharged from SeniorsPlus Care Coordination and require a new assessment by the Assessing Services Agency. If the client is away from home for less than 60 days, services can be reinstated without a reassessment; however, prior approval from the Care Coordinator is required. The employer must contact the Care Coordinator before reinstating services after a member is discharged from a facility. Services cannot be provided out of state without prior approval from the Care Coordinator.

## **Duplication of Services and Third Party Liability**

Employers are responsible for notifying EIM if personal care services are being provided by another person or agency or if another source of payment is discovered.

Some examples include personal care funded by Medicare or Hospice or the presence of long term care insurance that can pay for personal care services. If duplicate services are being provided, or if you know of third party funding sources for personal care services, please contact the Care Coordinator immediately.

### **Home Visits**

SeniorsPlus Care Coordination is required by program regulations to conduct home visits with all clients receiving services through the Self Direct Option. A Care Coordinator will evaluate the condition of the client, implementation of the care plan, and satisfaction with the services. These home visits will be conducted every six months for HBSS and HCB members and annually for PDN clients.

# **SECTION 10**

## **Program Compliance**

- ❖ **Compliance Reviews**
- ❖ **Risk, Liabilities, and Sanctions**



## **Compliance Reviews**

At some point, SeniorsPlus will review your compliance with rules and program regulations. These compliance reviews may be done on-site in the client's home or by mail. Compliance reviews may also be done on a rotating basis when a complaint is received, or if there are compliance concerns. SeniorsPlus reserves the right to conduct compliance reviews at its discretion.

Compliance with regulatory requirements and the terms of the Memorandum of Agreement will be verified during the review. SeniorsPlus may also review the Family Provider Service Option Registration (for PDN only), client records, visitation/contact logs (HCB only), personnel records, implementation of Initial/Updated Employer Referral, and any other information which is pertinent to the program regulations.

SeniorsPlus will attempt to provide two weeks advance notice for a routine compliance review. In situations where the review is triggered by a complaint, employers may not be given the customary advance notice.

SeniorsPlus will notify the employer if the review will be done on-site or by mail. If the compliance review is conducted through the mail, documentation must be submitted by the deadline provided.

The outcome of the compliance review will be provided in writing within (30) days of receipt of materials requested. If there is a delay, the employer will be notified. The written report will identify any deficiencies found and the corrective action that is required. SeniorsPlus reserves the right to make corrections or revisions to the outcome. Employers may be required to submit a Plan of Correction. If a Plan of Correction is required, the employer will need to document a plan to correct deficiencies and submit within specified timeframe. The Plan of Correction is subject to the approval of SeniorsPlus.

In some cases, deficiencies found in a compliance review may be cause for termination the Memorandum of Agreement and end the employer's participation in the Self Direct Option. If this occurs, the client may be able to receive personal care services through a provider agency.

## **Risks and Liabilities of the Employer and Sanctions**

Employers who sign a Memorandum of Agreement have agreed to carry out certain responsibilities. Failure to carry out these responsibilities can result in termination of

the Memorandum of Agreement and reimbursement of payments made on behalf of the employer.

The following list contains a summary of some of the responsibilities that are part of being an employer. If any of these requirements are not met, sanctions may occur. An employer's responsibilities include, but are not limited to, the following.

- Providing accurate and true information in all dealings with SeniorsPlus Care Coordination and the Fiscal Intermediary
- Working with Fiscal Intermediary to complete paperwork accurately and timely
- Using employees who are qualified, have completed orientation, and demonstration of competency prior to provision of services
- Maintaining accurate, honest, and complete personnel records
- Complying with HIPAA
- Providing services as authorized
- Reporting inability to provide services to the Care Coordinator
- Maintaining satisfactory level of quality in provision and documentation of services
- Cooperating in compliance reviews by providing requested documentation
- Submitting a Plan of Correction within specified timeframe, if requested
- Taking appropriate action if employees engage in dishonest or unethical behavior

If SeniorsPlus determines that the employer is required to reimburse the appropriate funding source, reimbursements may not be limited to the wages paid to the employees. Payments including associated taxes, workers' compensation expenses, and other fees may be recouped if an employer is not in compliance with program rules, applicable laws, and the Memorandum of Agreement. Any reimbursed funds will be returned to the program funding source.

# **SECTION 11**

## **Program Regulations and Resources**

## **Program Regulations**

### **Home Based Supports and Services (HBSS)**

<http://www.maine.gov/sos/cec/rules/10/chaps10.htm#149>

### **Private Duty Nursing and Personal Care Services (PDN)**

<http://www.maine.gov/sos/cec/rules/10/ch101.htm>

### **Home and Community Benefits for the Elderly and Adults with Disabilities (HCB)**

<http://www.maine.gov/sos/cec/rules/10/ch101.htm>

### **Access to copies of State of Maine Rules and Regulations**

It is the responsibility of the employer to stay informed of regulatory changes. Notice of rulemaking may be found in local newspapers in the Public Notices section, on the Office of Aging and Disability Services (OADS) and/or Office of MaineCare Services (OMS) websites, and through the “Interested Parties” lists maintained by OADS and OMS. Employers are also encouraged to review the OMS rulemaking website for notice of proposed MaineCare rules changes.

## **Other Laws and Regulations**

### **Health Insurance Portability and Accountability Act (HIPAA) Compliance**

Employers are responsible for maintaining compliance with the federal laws relating to HIPAA. These laws are designed to protect client information and govern the release and handling of information. Employers can access HIPAA information from the Department of Health and Human Services at <http://www.hhs.gov/ocr/hipaa>.

### **Employment Laws**

Employers are responsible for complying with minimum wage laws, regulations of employment, Family Provider Service Option registration regulations, tax laws, and any other laws or regulations that pertain to participating in the program. Resources on these laws are included in the Appendices section of this manual.

# Appendices



## SeniorsPlus Care Coordination Self Direct Initial Employer Referral

Client Name: \_\_\_\_\_

Client Address: \_\_\_\_\_ Maine \_\_\_\_\_

Client Telephone Number: (207) X

**Care Coordinator:** assigned care coordinator name

Employer Name: Self Direct Employer

**Services You Provide:** Self Direct Employees: PSS : Xhrs/Xdays per week

**Special Instructions or Health Maintenance:** HM: defined

**ADLs/IADLs:** XADL and XIADL

**Reason Codes:** Numbered task codes listed here

Referral created at the Direction of the CC by: seniorsplus employee+

## Timesheet Task Codes & Descriptions

The tasks you are authorized to provide are listed on the Initial or Updated Employer Referral.

<b>Task Number</b>	<b>Description</b>
9	Skin Care (wash skin, feet, hair, back, nail & oral care)
28	Accompany to Care Plan Activities
32	Bathing
33	Dressing
34	Transferring
35	Eating/Feeding
36	Toileting
37	Bed Mobility
38	Locomotion
39	Meal Preparation
40	Daily Housekeeping
41	Laundry
42	Grocery Shopping
44	Routine Housework
63	Caregiver Respite
65	Health Maintenance- Ventilator
66	Health Maintenance – Tracheostomy
67	Health Maintenance – Suctioning
68	Health Maintenance – Catheter/Ostomy
69	Health Maintenance – Feeding Tube
70	Health Maintenance – Treatment/Dressing/Wounds
71	Health Maintenance – Care of Skin
72	Health Maintenance – Bowel Regime
73	Health Maintenance – General (specific task(s) defined on referral)

If you have any questions on the tasks you are authorized to provide please contact your Care Coordinator by calling 1-800-427-1241.

**Quick Reference  
Personnel Record Contents**

<b>Form</b>	<b>HBSS</b>	<b>PDN</b>	<b>HCB</b>
Demonstration of Competency	N/A	Required	N/A
Orientation Statement	Optional	Required	Optional
Background Check	Required	Required	Required
Confidentiality Policy	Optional	Required	Optional
Drug, Tobacco, and Alcohol Free Policy	Optional	Required	Optional
Statement of Competency Certification	Required	N/A	Required

**\*If you would like to hire a new employee, please contact your FI to request a new hire packet**



**Quick Reference  
Client Record Contents**

<b>Form</b>	<b>HBSS</b>	<b>PDN</b>	<b>HCB</b>
Client Information Form	Required	Required	Optional but recommended
Initial or Updated Employer Referral	Required	Required	Required
Plan of Care Employee Assignment	Required	Required	Required
Timesheets	Required	Required	Required
FPSO Approval Letter	N/A	Required	N/A

## Appendix E

### Employer Guide for Who to Contact

<u>CARE COORDINATOR (CC)</u>	<u>SKILLS TRAINER (STC)</u>	<u>FISCAL INTERMEDIARY (FI)</u>
<ul style="list-style-type: none"> <li>❖ Employer referrals</li> <li>❖ Information on personal care services related to the self direct option</li> <li>❖ Authorization of self direct respite services</li> <li>❖ Notify the CC when the client is hospitalized or away from home</li> <li>❖ Timesheet questions pertaining to services or hours allowed</li> <li>❖ Other in-home care services, questions, or issues</li> <li>❖ Connect the client with resources and support systems</li> <li>❖ Assessment and program regulation questions</li> <li>❖ Complaints or concerns related to in-home services or Fiscal Intermediary services</li> <li>❖ Requests for employee training forms for new hires</li> <li>❖ Program regulation questions</li> <li>❖ Explore/offer resources for recruiting new employees. Refer employers to their Training Manual.</li> </ul>	<ul style="list-style-type: none"> <li>❖ Family Provider Service Option registrations</li> <li>❖ Questions related to employer responsibilities</li> <li>❖ Questions about employer criminal background checks</li> <li>❖ Employer trainings</li> <li>❖ Questions about maintaining personnel and client records</li> <li>❖ Program compliance information</li> </ul>	<p style="text-align: center;"><u>Employer</u></p> <ul style="list-style-type: none"> <li>❖ Paycheck questions or issues</li> <li>❖ New hire packets</li> <li>❖ W-2s</li> <li>❖ Request for more timesheets</li> <li>❖ Workers' compensation questions</li> <li>❖ Tax questions</li> <li>❖ Questions about hourly wages</li> <li>❖ Employee safety information</li> <li>❖ Questions about employee background checks</li> </ul> <p style="text-align: center;"><u>Employee only can call FI for:</u></p> <ul style="list-style-type: none"> <li>❖ Employee's own paycheck questions or issues</li> <li>❖ W-2s</li> </ul>