# Employment Reference Guide for Individual Providers





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#### Introduction

# USING THE EMPLOYMENT REFERENCE GUIDE FOR INDIVIDUAL PROVIDERS (IPs)

Welcome to your new job as an individual provider (IP). Your job is important. The care you provide supports your employer's well-being and helps him or her live as independently as possible.

This guide has information about your employment as an IP. Review the table of contents to see a list of the other important topics covered. Keep this guide handy and use it as a resource for information and contacts.

#### SERVICE EMPLOYEES INTERNATIONAL UNION 775

All individual provider long-term care workers are in the bargaining unit represented by Service Employees International Union (SEIU) 775. This is a result of a majority vote by individual providers to form a union in 2002. Being represented by a union means that the union negotiates benefits and working conditions on behalf of IPs which results in the collective bargaining agreement (CBA). The CBA is negotiated every two years.

New IPs are offered the opportunity to meet with a union representative during the initial contracting process, when they attend basic training, and then again during some continuing education classes. Meeting with a representative from the union is voluntary and up to each IP.

You may review a current copy of the CBA online by going to the Office of Financial Management (OFM) at www.ofm.wa.gov and selecting collective bargaining agreements. You can find detailed information about your pay rate, when you can expect a raise, and general information about your employment benefits.

Call the Member Resource Center at 1-866-371-3200 if you have questions regarding the collective bargaining agreement, the union, union membership, union benefits, or voluntary union activities. For questions about the CBA or union membership, IPs may contact SEIU 775 toll-free at the Member Resource Center at 1-866-371-3200, Monday through Friday from 8AM-6PM.

#### **Hiring Process**

#### YOUR EMPLOYER

In this booklet, when we say "employer" we mean the person for whom you provide caregiving services. As your employer, the person you provide caregiving services for hires you, directs your work, supervises you, and makes decisions about how their paid services are provided including scheduling services within your allowed work week limit. He or she can also fire you.

Your employer is a client of the Department of Social and Health Services (DSHS). DSHS coordinates and pays for the services you will provide. Your employer is referred to as a DSHS client when we talk about his or her relationship with DSHS.

is the person whom you provide caregiving services.

#### BASICS OF EMPLOYMENT

There are instances when DSHS cannot pay you to be an individual provider.

For example, you cannot be paid as an individual provider if you:

- Want to be the paid caregiver for your spouse.
- Are the natural, step, or adoptive parent of the minor client aged seventeen or younger who is in need of paid support.
- Are the foster parent caring for a child residing in your licensed foster home who is in need of paid support.

If these instances don't apply to you, there are still several requirements you must meet before you can be an individual provider and DSHS can pay you.

You must be qualified. This means you must:

- Be 18 years of age or older.
- Complete the required background process and are not disqualified by the results.
- Not be found unable to have unsupervised access to minors or vulnerable adults based on a Character, Competence, and Suitability determination.
- Be eligible for and sign a Home and Community Services/Developmental Disability Administration individual provider services contract with DSHS, agree to the conditions listed in it, and comply with all the terms of the contract.
- Complete training and certification requirements.
- Not have a home care aide certification which is denied, suspended, or revoked.

This is not an inclusive list; there may be other qualifications that you must meet.

#### BACKGROUND CHECKS

#### Getting started

IPs are required to pass a Washington State background check before contracting and a FBI fingerprint background check within 120-days of hire. You must also complete the Washington State background check at least every two years as well as the state and fingerprint check at any other time the department requests.

To start the background check process you will access and complete an online Background Check Authorization form. You must answer all questions on the form truthfully. Once you have completed the online form, write down your Confirmation Code. This code is needed by DSHS to access and submit your completed background check form.

If you pass the Washington State background check, you will receive instructions on your Fingerprint Appointment form for scheduling your fingerprint appointment and information about what to bring with you.

It is important to schedule your fingerprint appointment right away. If your results are not received by DSHS within 120 days of hire, you will not be permitted to work until they are received.

Once the background check is completed, you should receive a copy of your results from the office that ran your background check. Save your background check results for your file! You may also request more information about your background check or request a copy of your results from the Background Check Central Unit at:

Phone (360) 902-0299 Fax (360) 902-0292 Email BCCUInquiry@dshs.wa.gov



Your contract is not in effect until it is signed by you and an authorized DSHS representative.

#### Background check results

State law does not allow you to be contracted or paid through state or federal funds if your background check shows convictions, pending charges, or negative actions that are disqualifying.

A few examples of disqualifying convictions or pending charges include Assault 1, 2, or 3; crimes against children; Theft 1; and Robbery. A complete list can be found in WAC 388-113-0020. Review this list if you have questions about whether a conviction or charge is disqualifying.

An example of a disqualifying negative action includes a final finding of abuse, neglect, financial exploitation or mistreatment of a minor or vulnerable adult by the department, court of law, Department of Health or other disciplining authority. Additional information about negative actions can be found in Chapter 388-71 and 388-825 WAC.

If you have other convictions or pending charges that are not automatically disqualifying, your payment or contract may also be denied or terminated if the department determines you may not have unsupervised access to minors or vulnerable adults.

#### Character, Competence and Suitability (CC&S)

A character, competence, and suitability determination is a review process the department uses to decide whether or not an IP is an appropriate person to have unsupervised access to minors or vulnerable adults.

If the department decides you cannot have unsupervised access to minors or vulnerable adults, your payment or contract may be denied or terminated.

Some reasons the department may determine you cannot have unsupervised access include misuse of alcohol or drugs; acts of domestic violence; convictions or pending charges for crimes which are not automatically disqualifying; being unable or unwilling to provide adequate care to meet the client's needs; or jeopardizing your client's health, safety, or wellbeing. Additional information can be found in Chapter 388-71, 388-825 and 388-113 WAC.

#### DSHS CONTRACT SIGNING

After passing your background check, to become a qualified IP, you must provide the department with a valid social security card, valid picture ID and pass the federal exclusion list screening in order to be contracted. This will be the process every four years when you must renew your contract.

You will review and sign a DSHS Client Service Contract for Individual Provider Services before you can work and be paid. Review this contract carefully! The contract outlines what you agree to do by accepting payment from DSHS for providing services to DSHS clients. You are responsible for following the terms of the signed contract and for providing services in compliance with this Employment Reference Guide.

Your contract and this reference guide contain many terms and conditions that you agree to once you have signed your contract. Here are just some of the important terms of the contract and this guide that you should remember:

- You agree to provide authorized services/tasks included in the client's Service Plan, at the direction of the client and in accordance with applicable rules including Chapters 388-71, 388-113, 388-114, and 388-825 WAC;
- You are not permitted to work for the client while the client is in the hospital, nursing home, ICF/IID, any other institutional setting, or when you are told not to work by your client or by the department case manager;
- It is your responsibility to ensure your IP contract, background check, training and certification (if required) are current and not expired;
- You must immediately disclose to the department any pending charges, convictions, findings or other negative actions that occur between background checks;
- You cannot claim hours worked for more than one client during the same time period;
- If you drive clients, you must have a valid/current state driver's license and car insurance as required under state law;
- You shall not allow another person to perform your duties under your contract; and
- To be eligible for payment, you must comply with all applicable laws and regulations.

If you do not follow the terms of the contract and this guide, you may be unable to be paid and may lose your contract.

# Training & Home Care Aide (HCA) Certification Requirements

This section will help you understand your training and certification requirements. For a quick guide to training and certification steps and deadlines, use the Home Care Aide Certification Checklist for IPs on pages 15-16.

The law requires long-term care workers to complete 5 hours of orientation and safety training before providing paid personal care. In addition to this, most long-term care workers must complete 70 hours of Basic Training within 120 days of hire. Review the chart on pages 13-14 to find out if you must complete the 70 hour Basic Training.

All individual providers must complete the required training through the Training Partnership.

All training for individual providers is conducted by SEIU 775 Benefits Group.

#### HOME CARE AIDE (HCA) CERTIFICATION

Many long-term care workers are required to become a credentialed Home Care Aide (HCA). If you are required to obtain HCA credentialing, you must submit the HCA application to the Department of Health (DOH) within 14 days of hire. Review the Long-Term Care Worker Training Requirements chart on pages 13-14 for information about your specific training and credentialing requirements. You have 200 days to obtain your full HCA credential. You may obtain a paper application or use the online application by visiting www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/HomeCareAide



If you are required to obtain the HCA credential from the DOH, and you have a history of a drug or alcohol problem, the DOH may issue you a restricted HCA credential. A restricted HCA credential may affect your ability to work as an individual provider.

To learn more about the Home Care Aide certification process:

- Read the Home Care Aide Certification Checklist on pages 15-16.
- Call the Home Care
   Aide Coordinator at the
   Department of Health at
   360-236-2700.

To be credentialed as a HCA you must follow a number of steps and meet important deadlines. Review the form on pages 15-16 for information about how to complete your training requirements.

If you are Limited English Proficient (this means your ability to read, write, or speak English is limited), you will qualify for a Provisional HCA credential issued by the DOH. A provisional credential allows you an additional 60 days (for a total of 260 days) to obtain your full HCA credential. To continue working, you must become a fully credentialed HCA before the provisional certification expires.

To obtain a Provisional HCA credential, you must check the box on the DOH application indicating that you are "applying for a provisional certificate available for home care aides who are limited in their ability to read, write, or speak English."

#### ORIENTATION AND SAFETY TRAINING

You must complete Orientation and Safety Training before you provide care. During contracting, you will receive instructions on how to complete Orientation and Safety online from DSHS staff. If you are unable to take Orientation and Safety online English course, multiple options can be provided through the Benefits Group including offering Orientation and Safety in the following languages: Russian, Vietnamese, Spanish, Korean and Cantonese/Simplified Chinese.

After you complete online Orientation and Safety and are authorized to provide personal care, you will be able to register for classes required for your individual provider category.

If you have questions about this process, contact the Member Resource Center at 1-866-371-3200.

To learn more about the HCA credentialing process:

- Read the Home Care Aide Certification Checklist on pages 15-16.
- Call the HCA Coordinator at DOH at 360-236-2700.

#### 70 HOUR TRAINING REQUIREMENT

You must complete the 5 hour Orientation and Safety Training before you can be paid to provide care. In addition, many long-term care workers are required to complete 70 hours of Basic Training (for a total of 75 hours of training) within 120 days of hire. You complete this training through SEIU 775 Benefits Group.

Register for training within 14 days of hire. To find and
register for training in your area, visit SEIU 775 Benefits
Group at www.myseiubenefits.org/ or call the Member
Resource Center at 1-866-371-3200. You will need your first and last names, last four digits of your social security number and email address to log in.

• Once you complete 5 hours of Orientation and Safety Training and 70 hours of Basic Training, you have met the training requirements (75 total hours) to take the HCA certification examination. Unable to take Orientation and Safety online English course? Multiple options can be provided through the benefits group, including offering O&S in the following languages:

Russian, Vietnamese, Spanish, Korean and Cantonese/Simplified

Chinese.

 You must apply to DOH for your HCA Certification within 14 days of hire. Do not include the fee with your application; SEIU 775 Benefits Group will pay your application fee directly to the Department of Health. Please check 'state pay' on your application to ensure that SEIU 775 Benefits Group pays your application fee.

 If you do not submit your application or register for training within 14 days, it is likely that you will not be able to test or become certified by your deadline.

 When DOH receives a completed HCA application from you and you have completed the 75 hours of training, they will notify ProMetric that you are ready to take the examination. To learn more about
Home Care Aide certification
testing and the test
application process, visit the
Prometric website:
https://www.prometric.com/en-

To learn more about

HomeCareAide.aspx

applying for Home Care Aide

LicensesPermitsandCertificates/

ProfessionsNewReneworUpdate/

certification, visit the DOH

website: www.doh.wa.gov/

us/clients/wadoh/Pages/ landing.aspx



- Take the first exam time offered to you from ProMetric. Test as close to the end of training to increase your ability to pass the exam. As a reminder, SEIU 775 Benefits Group offers a refresher course that you can take to prep prior to your exam. Please call the Member Resource Center to schedule your refresher course at 1-877-371-3200. Additionally, you may ask for help from a Peer Mentor. Peer Mentors are HCAs who work for SEIU 775 Benefits Group. Peer Mentors can help you with the following:
  - Coach or tutor you throughout Basic Training
  - Navigate the certification process
  - Apply skills learned in training to the realities on-the-job
  - Be a resource to discuss professional growth opportunities and additional training
  - Provide general support or encouragement
  - Provide additional skills and knowledge support to prepare you for reexamination
    - Visit: www.myseiubenefits.org/peermentors/
    - Or call Peer Mentors at 1-855-803-2095
    - Or email Peer Mentors at Peer.Mentorship@myseiubenefits.org
- You will receive important information about your certification exam by email. You
  will need to respond to the Exam Email Acknowledgement sent from DOH to ensure
  that you know the date of your examination. After you submit your application, you
  should regularly check your email inbox, junk, and spam folders for emails about
  your exam. ProMetric will not schedule your certification exam if you did not provide
  an email address with your application.

# EXEMPTIONS TO 70 HOUR TRAINING AND HOME CARE AIDE (HCA) CERTIFICATION

If you are exempt, then you do not have to take the 70 hour training or become a certified HCA. Reasons you may be exempt may include but are not limited to:

- You are a Registered Nurse (RN), a Licensed Practical Nurse (LPN), Advanced Registered Nurse practitioner (ARNP), or a Nursing Assistant-Certified (NAC) with an active credential in good standing with the Department of Health.
- Have a teaching certificate with an endorsement in special education in good standing from the Office of Superintendent of Public Instruction (OSPI).
- Worked between 1/1/2011 and 1/6/2012 in a Washington state long-term care setting and completed all training required at that time.
  - Examples of work in a long-term care setting include providing paid, personal care services for elderly or persons with disabilities in a state licensed Assisted Living Facility (boarding home), Adult Family Home, Home Care Agency, or as an individual provider for a client of DSHS.

#### IF YOU ONLY PROVIDE CARE FOR YOUR PARENT OR CHILD

If you only provide long-term care for a biological, adoptive or step parent or child, you are an Adult Child Provider, Parent Provider, or Parent DD Provider. Adult Child Providers and Parent Providers do not have to complete the 70 hour Basic Training. Review the chart on pages 13-14 to see the training requirements for your specific individual provider category.

If you take on a client that is not your parent or child, then your training requirements will change. If you need help understanding your current training requirement, call the Member Resource Center at 1-866-371-3200.

# IF YOU PROVIDE CARE FOR ONE PERSON, 20 HOURS OR LESS A MONTH

If you provide 20 or less hours of care in a month for one person only, you are a Limited Service Provider. Limited Service Providers do not have to complete the 70 hour Basic Training. Review the chart on pages 13-14 to see the training requirements for Limited Service Providers.

If you take on another client or increase the number of hours you work, your training requirements will change. If you need help understanding your current training requirement, call the Member Resource Center at 1-866-371-3200.

#### **Respite Only Providers**

If you are providing only respite care and working up to 300 hours for each calendar year, you do not have to complete the 70 hours of basic training. Review the chart of pages 13-14 to see the training requirements for respite only providers. Once you exceed 300 hours of respite care in any calendar year, you must complete more training to meet the requirements of 70 hours of basic training and certification, regardless of the number of hours you provide respite in the future.

Although you may be exempt from the 70 hour basic training and continuing education courses, many caregivers still like to have additional training. Please contact the Member Resource Center at 1-877-371-3200 to find out what training opportunities may be available to you.

# IF YOU DO NOT MEET REQUIRED TRAINING AND/OR CERTIFICATION DEADLINES

Your payment will stop if you do not complete your training and certification requirements within the required timeframes. There are no extensions to these timeframes. The department will send you a notice instructing you to stop work and will take action to terminate your payment.

To be reinstated, or paid again as an individual provider, you must complete all of the training and certification requirements for your individual provider category on your own and at your own expense.

#### GETTING REINSTATED

If you missed your training deadlines, you must complete any remaining required training through a community instructor and pay for the training yourself. SEIU 775 Benefits Group on a case-by-case basis may offer training if you miss your deadline. You must go through an approval process with the SEIU 775 Benefits Group. DSHS cannot intervene between you and SEIU 775 Benefits Group if you miss training deadlines. It is likely that if you miss your training deadline, you will also miss your certification deadline. For more information, please contact the Member Resource Center at 1-866-371-3200.

To find a list of community instructors visit the DSHS Aging and Long-Term Support Administration website at www.dshs.wa.gov/altsa/home-and-community-services/individual-providers and click on "Find a Community Instructor".

If you missed your HCA certification deadline, you must take any actions required by DOH and Prometric and become a certified HCA.

Once you complete the reinstatement requirements (training and/or HCA certification), contact your employer's case manager and ask to be reinstated as an IP. The case manager will need copies of your training certificates for courses taken outside of SEUI 775 Benefits Group and/or documentation that you have become certified.

#### NURSE DELEGATION REQUIREMENTS

If any nursing tasks (including insulin injection) will be delegated to you through Nurse Delegation, you have additional training and certification requirements.

To perform delegated tasks you must have one of these certifications:

- Nursing Assistant Registered (NAR)
- Nursing Assistant Certified (NAC)
- Certified Home Care Aide (HCA)

#### **AND**

You must complete this training:

- Nurse Delegation for Nursing Assistants CORE.
- Nurse Delegation for Nursing Assistants: Special Focus on Diabetes (If performing insulin injection)

#### CONTINUING EDUCATION REQUIREMENTS

Most long-term care workers will need to complete 12 hours of Continuing Education (CE) each year before their birthday. Review the chart Individual Provider Categories and Training Requirements on page 13-14 for details about requirements for your specific situation.

To Find Continuing Education Classes in English and other languages:

- Visit the SEIU 775 Benefits Group at: www.myseiubenefits.org/
- Call the Members Resource Center at: 1-866-371-3200
- Visit the DSHS, Aging and Long-Term Support Administration website for information about training for long-term care workers https://fortress.wa.gov/dshs/ adsaapps/Professional/training/training.aspx

Individual Provider Categories and Training Requirements, June 2017

BASIC TR Basic Basic
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# Individual Provider Categories and Training Requirements, June, 2017

* If you change the type or number of clients you provide services for, or increase the number of hours you work, it may change your Individual Provider category. This could	*** Respite Care Only Provider: Providing care for individual(s) on DDA respite care only, working less than 300 hours in any calendar year	* Adult Child Provider: Adult child caring for his/her biological, step or adoptive parent	* Limited Service Provider: Provides 20 hours (or less) of care a month for one person	* Parent DD Provider: Individual caring for his/her developmentally disabled biological, step or adoptive child	* Parent Provider: Individual caring for his/her biological, step or adoptive child	PROVIDER CATEGORY	INDIVIDUAL PROVIDER/AGENCY EMPLOYED
number of clients	Complete prior to providing care	Complete prior to providing care	Complete prior to providing care	Complete prior to providing care	Complete prior to providing care	Orientation 2 Hours	ORIENTATION AND SAFETY
you provide s	Complete prior to providing care	Complete prior to providing care	Complete prior to providing care	Complete prior to providing care	Complete prior to providing care	Safety Training 3 Hours	ON AND TY
ervices for, or in	Complete within 120 days of starting to provide care	Not required	Not required	Not required	Not required	Basic Training 9 Hours	
crease the numbe	Not required	Complete within 120 days of starting to provide care	Complete within 120 days of starting to provide care	Not required	Complete within 120 days of starting to provide care	Basic Training 30 Hours	BASIC TRAINING
r of hours you	Not required	Not required	Not required	Not required	Not required	Basic Training 70 Hours	AINING
work, it may cha	Not required	Not required	Not required	Complete within 120 days of starting to provide care	Not required	Parent Provider Class 7 Hours (DDA Only)	
nge your Individual	***N <sub>0</sub>	No	N <sub>o</sub>	N <sub>o</sub>	N <sub>o</sub>	HCA Credential Required?	CREDENTIAL
Provider category.	****Not required	On or before your birthdate in next calendar year after completing Basic Training	Not required	Not required, unless you voluntarily obtain your HCA credential	Not required, unless you voluntarily obtain your HCA credential	Continuing Education (CE) 12 Hours	INITIAL CONTINUING EDUCATION (CE)
This could	Not required	On or before your birthday each year	Not required	Not required, unless you voluntarily obtain your HCA credential	Not required, unless you voluntarily obtain your HCA credential	Continuing Education (CE) 12 Hours	ONGOING CONTINUING EDUCATION (CE)

increase your training and certification requirements.

<sup>\*\*</sup> When a DDA respite care Individual Provider works more than 300 hours in one calendar year, they permanently revert to the Standard Individual Provider category

<sup>\*\*\*</sup> If a DDA respite care IP exceeds the 300 hour limit, they will have 30 days to renew an expired HCA credential.

<sup>\*\*\*\*</sup> If a DDA respite care IP exceeds the 300 hour limit and is an Exempt IP, they must complete the CE requirement.

# Welcome to Person Centered Home Care as an Individual Provider



#### Requirements under the law:

You must complete **75** hours of training (Includes 5 hours of orientation and safety) within **120** days of your hire date (service begin date on authorization) and become a Certified Home Care Aide (HCA) within **200** days of hire. If you do not meet these deadlines, you cannot continue to be paid and will be unable to work. Use the REQUIRED timelines and checklist to meet deadlines.

A - Get	ting Started		
	Action	Reminders	<b>✓</b>
Step 1	Prior to contracting, you should have completed the online WA State Background Check Authorization Form. If not, contact the office with whom you are contracting.	Keep a copy of your background check results! For more info on Background Checks visit the BCCU Website.	
Step 2	If you pass the WA State background check, the office with whom you are contracting will give you a fingerprint appointment form with a tracking number, called the Inquiry ID# or OCA#. Write your Inquiry ID#/OCA# here:	Your inquiry ID#/OCA# will be needed for your fingerprint appointment AND your Department of Health (DOH) Application.	
Step 3	Once you have your fingerprint appointment form with your Inquiry ID#/OCA#, get your fingerprints taken right away at the nearest fingerprint vendor. To schedule an appointment, visit Fingerprinting Locations. Write your appointment time and location here:	Mark your calendar and bring your fingerprint appointment form and picture ID to your appointment! If your fingerprint results are not received within 120-days, you will be unable to work.	
Step 4	Before you provide care: Take your Orientation & Safety Training course in English online at SEIU 775 Benefits Group.  You will need your first name, last name, last four digits of your social security number to log-in and a valid email address.	Unable to take the Orientation and Safety online English course? Multiple options can be provided at your contracting appointment. This includes offering Orientation and Safety in the following languages: Russian, Vietnamese, Spanish, Korean and Simplified Chinese.	
B - Con	plete & Submit DOH Application		
	Action	Reminders	✓
Step 1	* Complete and submit by 14 days of hire: DOH. HCA Application. You are required to provide at least one email address for communication about your exam and certification from DOH and Prometric. You will be notified of your HCA exam date after you have submitted your DOH application and complete your Basic Training 70 Hours. Do not pay fees, please mark 'state pay' on application and fees will be paid by SEIU 775 Benefits Group.  If you do not submit your application within 14 days, it is likely that you wnot be able to test or become certification by your deadline.  Once DOH receives your application, you are assigned a 10-digit DOH credential # (HM).  Use this number when contacting the HCA Credentialing Coordinator at (36 236-2700 or when finding information online at DOH.		*

Step 2	If you are limited English proficient (LEP), meaning your ability to read, write or speak English is limited, you may qualify for an additional 60 day provisional certification. Please note that by extending your certification deadline, this does not extend your training deadline.	LEP ONLY: Mark on your DOH application that you want the provisional certificate and this can allow you more time to complete these steps.	*
Step 3	To take the HCA exam in Spanish, Russian, Vietnamese, Korean, Chinese, Cambodian, Laotian, Samoan, Somali, Ukrainian, Tagalog, Amharic, or Arabic, check the language desired on HCA Exam Application.  If you need to take the exam in a language not listed, you may request an individual interpreter in your language by completing the testing accommodations request packet on the Prometric website and submit to the address on this form.  Please find that information here: Home Care Aide Test Accommodations Request Packet	It may take 30 days for interpreter /accommodation requests.  DOH will send an e-mail. You must respond for validation. If you do not respond to this email, your application will be marked as incomplete.  Check e-mail Inbox, Junk and Spam folders daily for an e-mail from DOH and Prometric after you complete your training!	*
C - Reg	gister For Training Through SEIU 775 Bei	nefits Group	
	Action	Reminders	✓
Step 1	* Register by 14 days of hire: Register for the 70 hour basic training through the NW Training Partnership (TP) website at <a href="https://www.myseiubenefits.org/">https://www.myseiubenefits.org/</a>	Unable to access the Internet? Call the Member Resource Center (MRC) at 1-866-371-3200.	*
Step 2	* Recommended by 60 days from hire: Complete your 70 hours of basic training immediately to ensure you get classes in the area where you live and in time to meet testing and certification deadlines.	Through the My Benefits portal you can access a Certificate of Completion after 75 hours of training is complete. The SEIU 775 Benefits Group will then forward to the Department of Health (DOH) on your behalf.	*
Step 3	Write training date and location here:	Mark your calendar!	*
D - Tes	t Through Prometric		
	Action	Reminders	✓
Step 1	Pass the written knowledge and skills exam: Write test date and location here:  Take the first exam time offered to you from Prometric.  Test as close to the end of training to increase your ability to pass the exam.  Look for an e-mail from Pbt-admit@Prometric.com with test information, your name, Prometric ID # in the subject line (Check Inbox, Junk and Spam folders).	Prometric will only communicate with you using the e-mail address you provide on your DOH application in the required email field.  If you do not receive an e-mailed test date from Prometric within 14-28 days of completing training, contact Prometric at 1-800-324-4689.  If you need a refresher on training or need support, please contact the MRC for help or visit: SEIU 775 DOH Steps to Get Certified	*

Step 2	If you fail the test, reschedule your exam immediately. Contact Prometric immediately to retest.  You can take the failed portion of the test two more times. You must pay a fee for each re-test.	Information about your credential # is on the DOH website: Provider Credential Search (HM or PV). When your credential indicates "Active", you are able to work. You are not able to work past 200 days without being Active on the DOH	*
		website.	

Agency	Telephone & Fax	Mailing Address	E-mail/Websites
DOH	HCA Credentialing	Mail application to: (Do not include fee)	DOH Website:
	Coordinator	DOH - Home Care Aide Credentialing	Home Care Aide
	(360) 236-2700	P.O. Box 1099	
		Olympia, WA 98507-1099	Download the Information
	DOH Customer Service	Mail other documents <b>NOT</b> sent with initial	Booklet (14 languages) to help
	(360) 236-4700	application to:	answer questions.
		DOH - Home Care Aide Credentialing	
		P.O. Box <b>47877</b>	
		Olympia, WA 98504-7877	
Prometric	Telephone:	Prometric Address:	Prometric E-mail:
	1-800-324-4689	Attention: Washington Home Care Aide Program	WAHCA@prometric.com
		7941 Corporate Dr.	
		Nottingham, MD 21236	Prometric Website:
			<u>Prometric</u>

HCA Quick Links: Find links in one location at <a href="Home Care Aide Training Quick Links">Home Care Aide Training Quick Links</a>



#### **GETTING PAID**

#### INTRODUCTION TO INDIVIDUAL PROVIDERONE (IPOne)

Individual ProviderOne (IPOne) is the system you will use to claim for individual provider services and receive a paycheck. IPOne is maintained by Public Partnerships LLC (PPL).

To get paid you must enter your hours worked, tasks completed, and mileage (if applicable) on a timesheet for each day you provide care and submit the timesheet to IPOne. You can submit your timesheet electronically in the IPOne portal here: https://ipone.publicpartnerships.com/login.aspx. You also have the option of submitting a paper timesheet by fax or mail. To sign-up to use

IPOne:

- Go to www.ipone.org
- Click on the BetterOnline<sup>™</sup> button
- Click on the 'Sign Up' button and answer the security questions

To get paid you must submit hours worked, tasks completed, and mileage to IPOne.

To get paid you must submit hours worked, tasks completed, and mileage to IPOne.

#### Resources to Help You Use IPOne

You will receive a welcome packet in the mail when you first start working as a new IP. The welcome packet will include a form that shows your personal information that IPOne has received from DSHS. You should review this information to make sure it is correct. If the information is not correct, update it by going online after you sign-up to use IPOne, or by calling the IPOne call center at 844-240-1526 for help making the changes.

You will also receive a training packet from IPOne when you first start working as a new individual provider. This packet contains information that will help you understand how to use IPOne.

For more information about how to use IPOne, visit the IPOne website at www. publicpartnerships.com/programs/washington/IPOne/index.html

You can download the complete IPOne Training Manual or view the section specific to your needs. The IPOne Online Training information topics covered in the IPOne written and online training information include:

- How to create a user account
- How to set up payment preference (setting up direct deposit)
- How to update and verify tax information
- How to change or update your IPOne password
- How to view authorization information
- How to submit timesheets (includes how to submit for mileage reimbursement, paid time off, and continuing education training)
- Timesheet submission Hints and Tips
- How to make changes to a past paid timesheet
- How to look up payment information
- Whom to contact with questions

#### Individual ProviderOne Authorization Letter

IPOne will mail an authorization letter to you when:

- Services for your employer are first authorized
- There are any changes that affect the authorization

You can also view the same authorization information online by going to your IPOne account. Read your IPOne training packet to learn how to do this.

#### **Reporting Changes**

If you have a change of name, address, or bank account you will need to contact IPOne. You can report changes to your phone number, address, or bank account online through the IPOne portal. To report changes to your name, date of birth, or social security number you must call the customer service call center.

IPOne Customer Service Call Center 844-240-1526

#### PAID TIME OFF (PTO) HOURS

You can earn paid time off to use in any way you choose. For detailed information about how much paid time off you can earn refer to the SEIU 775 collective bargaining union agreement located online at: www.ofm.wa.gov/labor/agreements.

#### Using your Paid Time Off hours

You can choose to use paid time off hours to take time off from work or cash out without taking time off. If you want to take time off using your paid time off hours, you must:

- Inform and get permission from your employer at least two weeks before you take the time off.
- Tell your employer's Case Manager/Social Worker so he or she can help ensure the Care Plan is followed in your absence.

#### When Paid Time Off hours can be lost

If you reach the maximum allowed accrual of paid time off hours, you will not earn or accumulate any more paid time off hours until the balance drops below the maximum allowed amount. Any hours that would have accumulated are lost. Please see the current collective bargaining agreement for the maximum allowed accrual of paid time off hours.



#### TRAINING HOURS

Training hours are time spent in a classroom completing the training required to work as an individual provider. Changes have been made to how IPs claim and get paid for completing required training hours.

How to claim payment for training

Payment for time spent in training is based on the date it occurred. You will be required to claim completed training hours per day in the workweek the training occurred, the same way you claim your service time. The workweek begins at 12:00 am on Sunday and ends the following Saturday at 11:59 pm.

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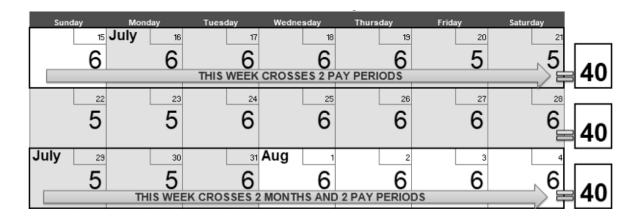
#### OVERTIME PAY AND THE WORK WEEK LIMIT

On April 3, 2016 DSHS began calculating overtime payment for individual providers when they work more than 40 hours in a work week. Overtime pay is 1.5 times your regular rate of pay.

Resources for IP Overtime www.dshs.wa.gov/altsa/IPOT

A work week begins at 12:00 am on Sunday and ends at 11:59 pm on Saturday.

A work week can cross pay periods and calendar months. See example/picture below.



#### Work Week Limit Facts

- A work week limit is the total number of service hours you can provide in a work week.
- Your work week limit is 40 service hours per week unless you have been assigned a higher work week limit or temporary approval has been given by DSHS.
- Unless approved by DSHS, you may not work more hours than your assigned work week limit.

Service hours count toward your work week limit. Service hours are time spent providing:

- personal care
- relief care
- skills acquisition training
- respite services

#### Coordinating Work Week Limit with Assigned Hours

IPs must not work more than their assigned work week limit and also must not work more client hours than are assigned to them in a month.

It is your responsibility to balance the number of hours assigned to you by each person you provide care for with the work week limit assigned to you by DSHS.

You cannot accept work assignments that would cause you to:

- Work more than your work week limit
- Travel more than 60 minutes between eligible work sites; or
- Claim more than 7 hours of qualifying travel time in a work week.

# Work week limit flexibility for IPs with a Work Week Limit of 40.25 Hours and Above

Unless approved by DSHS, you may not work more hours than your assigned work week limit.

Under specific circumstances, your client may be able to move your weekly work hours between weeks in a single month if all four of the following are true:

- 1) There is a specific need for more hours in a given week
- 2) You will not work more than the client's monthly hours
- 3) The use of more service hours in one week will not cause the client to go without essential care in the other weeks of the month
- 4) You will not work more overtime in the month than you would have if you had worked the hours evenly during the month.

If your client is a participant in New Freedom or Veteran Directed Home Services, they may be eligible to purchase hours in excess of the work week limit. For further information, your client will need to contact their care consultant.

#### Going over your work week limit to prevent health and safety risks to client

If you have worked all the hours in your work week and need to stay with the client because of a risk to the client's health or safety, take these steps:

- a. Stay with the client until the situation is safe and stable.
- b. If there is an emergency that requires emergency medical services, contact 9-1-1.
- c. Assist your client to arrange for back up assistance.
- d. End your work day as soon as it is safe to do so.
- e. Contact the client's case manager the next business day to explain.

It is your responsibility to plan your work schedule with the people you work for and make sure that you do not go over your work week limit or allowed travel time.

#### TRAVEL TIME

Since April 1, 2016, IPs have been paid for travel time. Travel time is when you go from one worksite to another on the same day. Travel time is not counted in your weekly service hour limit.

#### Travel time includes:

- Direct one-way travel time, from one worksite to another, when neither worksite is the same as your residence.
- Direct travel time between a worksite and an instructor-led training site to attend required training when the worksite is not your residence.

#### A worksite is:

- The place you provide authorized care to a DSHS client.
- The place where you attend required training

#### Travel time is not:

- Travel from your home to a worksite or training site.
- Travel from a worksite or training site to your home.
- Travel from a personal activity to a worksite or training site.

Travel between your home and a worksite, even if you live with a person you provide care for, is considered commute time and cannot be paid as travel time.

Travel request forms can be obtained from your employer's case manager.

Approved travel time,

#### How to claim travel time

To claim travel time, submit a completed travel time request form to your employer's case manager. If possible, submit this form before the travel time has occurred. If you have any unplanned travel time, you must contact your employer's case manager immediately and submit a travel time request form right away.

The client's case manager will authorize payment for travel time. Approval for qualified travel time will not be more than:

- 60 minutes between eligible work sites; or
- 7 hours in a work week.

You must claim your travel time in the IPOne system based on the date the travel occurred. You can claim it by entering the time in the IPOne portal or by paper timesheet.

#### Excess claiming and contract actions

If you accept assignments and work hours in a way that causes...

- · excess overtime
- working more than the client's monthly hours
- going over your travel limit authorization without approval by the department (see page 22)

...you may receive a contract action. After three contract actions related to overtime utilization, your contract may be terminated. If this occurs, you must wait 90-days to reapply for a new contract. If you significantly or repeatedly exceed your work week or travel time limits, you may be unable to re-contract as an IP.

You will not receive contract actions for working more than your work week limit for:

- Required DSHS training
- Approved Travel Time
- Administrative time
- Paid Time Off (PTO)

#### How can I avoid contract actions?

- Always plan your work schedule in advance and write it down.
- If your client's needs change and you have to work a different schedule that affects your work week limit, contact the client's case manager immediately.
- Record your work time on your timesheet after each day you work, it may help to also record it on a paper calendar. Check often to make sure you are staying within your work week limit.
- DSHS has resources available to help you and your employer/client learn more about managing your schedule to stay within your work week limit. These resources are available at www.dshs.wa.gov/altsa/IPOT.

#### How long will contract actions stay on my contract file?

Each contract action will stay open for 12 months from the date on the top of the contract action notice. After 12 months, the contract action is closed.

#### The month identified in the contract action or letter received, is the month you were paid for hours claimed:

- For example, if the letter states, "This contract action is for hours paid in the month of April," this means you were paid in April for claimed hours that you may have worked in the month before (March).
- Contact the case manager if you have questions about the month you excess claimed in.



#### MILEAGE REIMBURSEMENT

Mileage reimbursement is different from travel time. Mileage reimbursement means being paid for the miles you drove your personal vehicle to do essential shopping for your employer or to take your employer to medical services.

- To receive mileage reimbursement, essential shopping or transportation to medical services must be part of your employer's Care Plan.
- Mileage reimbursement rates can be made for up to 100 miles in one month for each employer.
- If you choose to drive clients in your vehicle, you must have a valid/current state driver's license and car insurance as required under state law.

Depending on the program funding the DSHS client's care, some IPs may be reimbursed for additional miles for providing other transportation. Additional transportation needs, such as driving an employer to work, must be clearly identified in the Care Plan and assigned to the IP. In this case only, an IP may be reimbursed for additional mileage up to the amount authorized by the case manager in the Care Plan.

#### WAGES AND PAY INCREASES

The base hourly rate for IPs is in accordance with the collective bargaining agreement negotiated between DSHS and SEIU 775. As of January 1, 2019, the hourly rate begins at \$15.00 with increases tied to your cumulative career hours. Hourly rates for the final six month segment of the 2017-19 bargaining period are shown in the wage table, for January 1 2019 – June 30, 2019. These tables are published in Appendix A of the collective bargaining agreement posted on the Office of Financial Management web page located at: www.ofm.wa.gov/state-human-resources/labor-relations/collective-bargaining-agreements. Future wages will be published as part of future agreements.

Certain IPs may qualify for certification and/or advanced training differential payment as stipulated in the Collective Bargaining Agreement when they meet certain certification or exemption criteria.

#### **Taxes and Paycheck Deductions**

#### FEDERAL INCOME TAX

Complete and submit a W-4 tax form so that the correct federal income taxes will be withheld from your paycheck. If you choose not to submit a W-4 tax form, your tax filing status will be defaulted to "Single" with "0" allowances. This is the highest level of tax withholding and you will have the maximum amount of taxes deducted from your pay.

If you want an additional amount of Federal Income Tax to be withheld from your paychecks, you must complete, sign and submit a W-4 form indicating what additional Federal Income Tax amount should be withheld from your paycheck.

If you claim exemption from withholding ("Exempt"), your exemption for the current year expires on February 15 of the next year. You must submit a new form each year to remain "Exempt". If you do not submit a new W-4 Form, your tax filing status will be defaulted to "Single" with "0" allowances.

You can return the completed and signed form to:

- Email it to IPOne at pplwaipone-cs@pcgus.com
- Fax it to IPOne at 1-855-901-6904

#### Filling in the W-4

You can get an IRS W-4 form by:

- Downloading a form from the IRS at www.irs.gov/pub/irs-pdf/fw4.pdf
- Calling the IRS at 1-800-829-3676 and requesting a form to be sent to you.

Boxes 1, 2, 3, and 5 are required fields. Boxes 4, 6, and 7 are optional. Leave boxes 8, 9, and 10 blank. Make sure to sign and date the form at the bottom of the page where it says "Employee's Signature" and "Date".

#### Mail or fax the completed IRS W-4 form to:

Toll-free FAX #1-855-901-6904

Public Partnerships, LLC: WA IPOne 7776 S Pointe Pkwy W Suite 150 Phoenix, AZ 85044

<sup>\*\*</sup>Note: Please retain a copy of the W-4 form you submit for your records\*\*

	Separate here and give Form W-4 to your employer. Keep the worksheet(s) for your records.					
Fa	Employee's Withholding Allowance Certificate OMB No. 1545-0074					
Departm	Form UP—T Department of the Treasury Internal Revenue Service Whether you're entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.					2019
1	Your first name and middle initial	Last name		1	2 Your social s	ecurity number
	Home address (number and street or rural route)		3 Single Ma	rried Marri	ed, but withhold	at higher Single rate.
			Note: If married filing sep	arately, check "Man	ried, but withhold	at higher Single rate."
City or town, state, and ZIP code 4 If your last name differs from that shown on				own on your so	cial security card,	
	check here. You must call 800-772-1213 for a replacement card. ▶					acement card. 🕨 🗌
5	5 Total number of allowances you're claiming (from the applicable worksheet on the following pages) 5					5
6	6 Additional amount, if any, you want withheld from each paycheck					6 \$
7	7 I claim exemption from withholding for 2019, and I certify that I meet both of the following conditions for exemption.				on.	
	Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and					
	This year I expect a refund of all federal income tax withheld because I expect to have no tax liability.					
If you meet both conditions, write "Exempt" here ▶ 7						
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.						
Employee's signature						
(This form is not valid unless you sign it.) ► Date ►						
8 E	mployer's name and address ( <b>Employer:</b> Complet oxes 8, 9, and 10 if sending to State Directory of N	e boxes 8 and 10 if sending to lew Hires.)	IRS and complete	9 First date of employment		ployer identification nber (EIN)

If you significantly under-withheld federal income taxes in the past, the IRS may notify you and PPL by letter (called a "Lock-in Letter") that a specified amount of federal income tax must be withheld. If this is the case, DSHS and PPL must comply until further notice from the IRS. If you receive an IRS Lock-in Letter, it will have a toll-free number for you to call if you want to dispute it.

If you have questions, please call the IPOne call center at 844-240-1526. Please note that neither IPOne staff nor DSHS staff are tax professionals, and cannot provide tax advice. Do not ask DSHS or PPL workers for help in making tax decisions. If the answer to your question might constitute tax advice, you will be referred to seek advice from a tax advisor, accountant, or the IRS. SEIU 775 and some community organizations may have free tax help available.

#### Income Exclusion under Difficulty of Care

If you are an IP who lives with your client, the income you earn for providing care services can be excluded from your federal income taxes (FIT).

Individual Providers are eligible for the Difficulty of Care income exclusion if the IP lives with the DSHS client in the same household. This means that the wages that IPs earn for providing personal care to a DSHS client whom they live with are excluded from the IP's income for income tax purposes.

The Difficulty of Care income exclusion applies only to personal care services and relief care, which are listed separately on year-end Earnings Statements. The exclusion does not apply to payments made for respite care, skills acquisition training, travel time, required trainings, or paid time off. The income exclusion does not apply to payments you receive directly from your clients, which are known as "participation" or "client responsibility" payments.

It is your responsibility to determine if this income exclusion applies to you. Also, you are responsible for identifying which payments are for personal care services or relief care and then excluding only those amounts from your gross wages on your tax returns. If you need assistance, or have questions about your eligibility, or how to file your yearend tax return, please contact a tax professional or the IRS.

If you have questions, please see www.dshs.wa.gov/altsa/irs-notice-2014-7-difficulty-care-payments-excludable-income or you may contact the DSHS tax desk at:

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(866) 563-8155 (Toll free)
(360) 664-5830 (Lacey/Olympia)
taxinfo@dshs.wa.gov
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#### W-2 WAGE STATEMENT

A Form W-2 is a wage statement that reports the taxable portion of your earnings to the federal and state government. You will receive a W-2 wage statement for each employer for whom you received earnings for that year, and a W-2 for your vacation pay. Some IPs may receive a W-2 for vacation pay that was earned prior to 2016, which will say "Pseudo Client".

PPL will mail W-2 wage statements to you no later than January 31 (or the next business day if January 31 falls on a weekend/holiday) in the year after you were paid. For example, if you were paid income in 2018, your Form W-2 for those earnings will be mailed by January 31, 2019. An electronic copy of the W2 is posted to each provider's profile on IPOne.

The W-2 wage statements will include the payments you received through the IPOne payment system. The wages you receive directly from your employer will not be included on the W-2 wage statement you receive. The amount deducted for Federal Income Tax in accordance with your W-4 form on file will be reflected on your W-2 form. If you have questions about the W-2 you receive from PPL, call the IPOne Call Center at 844-240-1526. IPOne call center staff are not able to give tax advice and may direct you to contact a tax advisor or other tax professional, an accountant, or the IRS.

#### SOCIAL SECURITY AND MEDICARE TAXES

Although PPL is not your employer, PPL is responsible for the withholding and payment of Social Security and Medicare taxes (FICA) from the earnings paid to you by PPL on behalf of your employer.

You may be exempt from social security and unemployment taxes because of your age, student status, or family relationship to your employer. To find out if you are exempt, call the IPOne Call Center or download the Application for Employment Tax Exemptions Based on Age, Student Status, and Family Relationship at: www.publicpartnerships.com/programs/washington/ipone/index.html

Under federal law, this exemption is not optional. If you meet the tax exemption requirements you must complete a form for each person that you provide care for and send the form to IPOne.

- If you have questions or concerns, you can contact the IRS at www.irs.gov or visit your local office.
- PPL is also responsible for the payment of Federal and State Unemployment Taxes (FUTA/SUTA).
- Your employer may also be responsible for withholding Social Security and Medicare taxes from the amounts your employer pays you directly.



# **General Employment Information**

## **HEALTH INSURANCE OPTIONS**

You have two health insurance options: SEIU 775 Benefits Group or health insurance options available through the Washington Health Benefit Exchange. You can only sign up for one of these health plans.

# **SEIU 775 Benefits Group**

The SEIU 775 Benefits Group offers worker-only medical, dental, prescription drug, vision, hearing, employee assistance program (EAP), and behavioral health benefits to eligible IPs. SEIU 775 Benefits Group does not provide coverage for spouses or dependents. Coverage for Medicare eligible IPs may also be obtained through SEIU 775 Benefits Group as primary coverage.

Enrollment and eligibility requirements for healthcare benefits are determined by the SEIU 775 Benefits Group. The current minimum requirements are that you:

- Will not be receiving health care benefits through other family coverage or other employment-based coverage.
- Work at least two consecutive months at a minimum of 80 hours per month. This includes all hours worked and claimed; e.g., training hours, vacation hours, and hours worked as an Agency Provider.
- Pay the \$25.00 monthly co-premium for the healthcare coverage, which will be deducted from your regular paychecks after you enroll.
- You must complete the enrollment application and return it to SEIU 775 Benefits
  Group. You may obtain an enrollment application by calling the Member Resource
  Center (MRC) at 1-866-371-3200 or online at www.myseiubenefits.org/. SEIU 775
  Benefits Group will send you an application for health coverage once you have
  qualified for healthcare coverage. The application will be sent to the address on file
  with IPOne.
- After you have worked two consecutive months at 80 hours, allow for a one month
  administrative period, coverage will then begin on the first day of your 4th month.
  Additionally, for continuous coverage, you must continue working 80 hours per
  month.

It is very important that you claim your working hours on time every month through IPOne to avoid interruption of your healthcare insurance coverage. Please record your hours as early as possible. To get more information about eligibility requirements and benefits, or request an enrollment application, please call the Member Resource Center (MRC) at 1-(866) 371-3200.

# Washington Health Benefit Exchange

Health insurance coverage is also available through the Washington Health Benefit Exchange. Depending on where you live and your individual circumstances, a number of affordable health plan options may be available to you. For more information about Washington Health Benefit Exchange options or to apply for coverage, visit the Health Plan Finder website at www.wahealthplanfinder.org.

If you have questions, call the Customer Support Center, Monday-Friday 7:30 a.m. - 8:00 p.m. at 1-855 923-4633. Help is available in a number of languages.

If you need help with your application or understanding your health plan options, registered brokers and certified navigators are available to assist you in a number of languages.

- To find a registered broker, visit the broker search webpage at: www.wahealthplanfinder.org/HBEWeb/Annon\_DisplayBrokerNavigatorSearch. action?brokerNavigator=BRK
- To find a certified navigator, visit the navigator search webpage at: www.wahealthplanfinder.org/HBEWeb/Annon\_DisplayBrokerNavigatorSearch. action?brokerNavigator=NAV



#### RETIREMENT

Some IPs may qualify for a retirement benefit offered through the Retirement Trust. For more information on this and other benefits contact the Member Resource Center (MRC) at 1-866-371-3200.

## **GETTING ADDITIONAL CLIENTS**



The Home Care Referral Registry uses web-based and online tools to match qualified individual providers with people who need long-term care services. Enrolling in the Referral Registry is easy. Call or visit a local Registry office to get the process started. You can find your local Referral Registry office by calling 1-800-970-5456 or visit www. hcrr.wa.gov and click on "Registry Offices" to see if the Referral Registry is available in your area.

Staff at the Referral Registry Center can also help people get started working as an individual provider.



**Carina** is a free self-service website created to help verified Individual Providers and Medicaid in-home care clients find each other. Carina works in partnership with SEIU 775 Benefits Group and DSHS to provide this service. Just take the following steps when you visit www.carinacare.com

- Step 1: Register- Activate your Carina account by clicking the "register" button and answering a few questions.
- Step 2: Match- Explore job posts and profiles. Connect with a provider or client who
  meets your needs.
- Step 3: Authorize- Call your case manager to finalize your provider's authorization and get started.

#### **Resources for Providers**

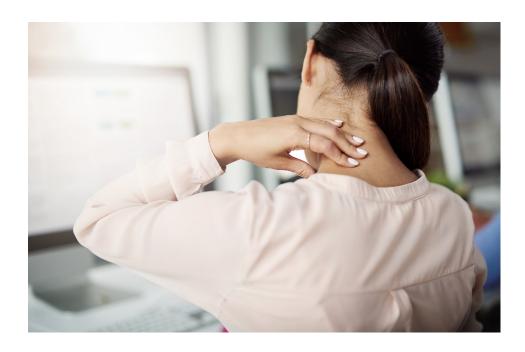
Information and support for IPs is also available online through the Home Care Referral Registry website. Click on Provider Resources for up-to-date information on diseases and conditions, caregiving tips, current news and topics for providers.

## WORKERS' COMPENSATION

IPs are covered by workers' compensation insurance through the Washington State Department of Labor and Industries. This means you may file a benefits claim for any work-related illness or injury.

If you are injured while providing services for your employer and need immediate medical care, go to the nearest hospital or see your regular doctor. Tell the doctor your injury or illness is work-related and make sure to ask for and fill out a "Report of Injury or Occupational Disease" form. List your employer on the form as HCQA Negotiated Contract, 601 Union St., Suite 3500, Seattle, WA 98101.

A company called Sedgwick CMS manages all workers' compensation claims for IPs. Contact them toll-free at 1-866-897-0386 if you are injured on the job.



# REFERENCES, EMPLOYMENT VERIFICATION, EVIDENCE OF INCOME

## Job Reference

It is up to your employer to provide a job reference for you. It is best to get a written job reference from your employer. It is encouraged that you receive a written job reference while it is possible for your employer to provide it. Let your employer know you are not thinking of leaving now but thinking ahead for the future.

# **Employment Verification**

People needing to verify your employment should be directed to your employer. The Social Worker, Case Manager or any representative from the State of Washington cannot do this for you.

## **Evidence of Income**

If a person or company wants evidence of your income, contact IPOne for help. You cannot get evidence of income from your employer's Social Worker or Case Manager.

Send a written request for wage verification by either fax or US mail to PPL for processing.

- Fax your request by fax to: 1-855-901-6904. This is the fastest way to receive your wage verification response.
- Mail your wage verification request to:

Public Partnerships, LLC WA IPOne 7776 S Pointe Pkwy W, Suite150 Phoenix, AZ 85044

Your request must include your name and a return address for where you want your wage verification sent. You should also specify the time periods in which you need income evidence. Please allow 2-5 business days for your request to be processed and the verification provided to the requesting party. Requests for a same day response cannot be guaranteed, due to processing and workload factors.

# IF YOU LEAVE YOUR JOB

You must give at least two weeks' written notice before you quit working for your employer. You must work your assigned schedule until the end of that notice period. Leaving your employer alone without needed assistance may be considered abandonment, which is against the law.

You must give notice of quitting to:

- Your employer and/or his or her legal representative. This must be in writing.
- Your employer's Case Manager or Social Worker.
- Any other persons or organizations that your employer requests or is required to notify.

## **UNEMPLOYMENT BENEFITS**

If your job as an IP ends or your employment is interrupted for a period of time, you can apply to the Employment Security Department for unemployment benefits (also called unemployment insurance). You must meet any Employment Security Department rules for claiming unemployment benefits. When completing the application, identify yourself as a State of Washington Individual Provider. Your client is your employer, but your work history and wages that will be used to determine your eligibility for unemployment will come from IPOne.



# **Mandatory Reporting of Abuse**

By law, you are required to report immediately if you suspect that a vulnerable adult or child is being harmed.

#### WHO IS A VULNERABLE ADULT?

Any adult age 60 or older who cannot take care of him or herself is considered a vulnerable adult. Other adults considered vulnerable include:

- Adults who have a legal guardian
- Adults who have a developmental disability
- Adults living in a long-term care facility or adult family home
- Adults receiving in-home care or personal care services

## WHAT IS ABUSE?

- Intentionally causing pain, suffering and/or injury to a vulnerable adult
- Can be physical, mental, sexual, or the improper use of restraints
- Can be abandonment, neglect, personal exploitation, or financial exploitation of a vulnerable adult
- Can be self-neglect on the part of a vulnerable adult

Call Adult Protective Services (APS) if you have reason to believe or you suspect any type of abuse of a vulnerable adult.

#### REPORTING SUSPECTED ABUSE

# To report suspected abuse of an adult:

**Make your report online:** www.dshs.wa.gov/altsa/home-and-community-services/report-concerns-involving-vulnerable-adults

#### **REGION 1**

**APS Contact Numbers:** 1-800-459-0421 (TTY) 509-568-3086

Spokane, Grant, Okanogan, Adams, Chelan, Douglas, Lincoln, Ferry, Stevens, Whitman, Pend Oreille, Yakima, Kittitas, Benton, Franklin, Walla Walla, Columbia, Garfield, Asotin, Klickitat

#### **RFGION 2**

APS Contact Numbers: 1-866-221-4909 (TTY) 1-800-977-5456

Snohomish, Skagit, Island, San Juan, Whatcom, King

#### **REGION 3**

**APS Contact Numbers:** 1-877-734-6277 (TTY) 1-844-433-5367

Bremerton, Pierce, Thurston, Mason, Lewis, Clallam, Jefferson, Grays Harbor, Pacific, Wahkiakum, Cowlitz, Skamania, Clark

# To report suspected abuse of a child:

#### **REGION 1**

1-800-557-9671

Asotin, Garfield, Whitman, Adams, Grant, Douglas, Chelan, Okanagan, Ferry, Stevens, Pend Oreille, Spokane, Lincoln counties

#### **REGION 2**

1-855-420-5888

Kittitas, Yakima, Klickitat, Benton, Franklin, Walla Walla, Columbia counties

#### **REGION 3**

1-866-829-2153

Whatcom, Skagit, Snohomish, Island, San Juan counties

#### **REGION 4**

1-800-609-8764

King county

#### **REGION 5**

1-888-713-6115

Pierce and Kitsap counties

#### **REGION 6**

1-888-713-6115

Clallam, Jefferson, Mason, Grays Harbor, Thurston, Lewis, Pacific, Cowlitz, Clark, Skamania, Wahkiakum counties

#### REPORTING CONCERNS ABOUT A CARE FACILITY

Report concerns about an adult family home, assisted living facility, or nursing home to the Complaint Resolution Unit (CRU). Reports can be made online or by phone.

# Make your report online

www.dshs.wa.gov/altsa/home-and-community-services/report-concerns-involving-vulnerable-adults

# Complaint Resolution Unit Statewide Contact Number

1-800-562-6078 (TTY) 1-800-737-7931

# **Quick Guide to Resources**

#### TRAINING AND HCA CREDENTIAL

- DSHS: www.dshs.wa.gov/altsa/long-term-care-professionals-providers
- Department of Health: www.doh.wa.gov/LicensesPermitsandCertificates/ ProfessionsNewReneworUpdate/HomeCareAide
- Prometric: www.prometric.com/en-us/clients/wadoh/Pages/landing.aspx

#### INDIVIDUAL PROVIDERONE

- Washington Call Center: 1-844-240-1526
- Email: pplwaipone-cs@pcgus.com
- Public Partnership LLC Washington IPOne resources, training info and more: www.publicpartnerships.com/programs/washington/ipone/
- General information: www.ipone.org
- Individual ProviderOne Portal: https://ipone.publicpartnerships.com/login.aspx

## **SEIU 775**

• Union benefits: www.seiu775.org

• Member Resource Center email: mrc@seiu775.org

• Member Resource Center phone number: 1-866-371-3200

To speak with someone in a different language, dial one of the following extensions in the chart below.

## **SEIU 775 BENEFITS GROUP**

• Training requirements and options: www.myseiubenefits.org

Health Benefits overview and options: www.myseiubenefits.org

Secure Retirement overview and FAQ: www.myseiubenefits.org

Member Resource Center email: mrc@seiu775.org

• Member Resource Center phone number: 1-866-371-3200

To speak with someone in a different language, dial one of the following extensions:

Language	Extension	Language	Extension
Russian	411	Somali	431
Ukrainian	412	Arabic	432
Spanish	413	Mandarin	423
Korean	421	Vietnamese	422
Cantonese	424	Swahili	433
Tagalog	442	Cambodian	441

## PEER MENTOR

SEIU 775 BENEFITS GROUP certified HCA Peer Mentors can help you to gain confidence in the knowledge and skills learned from Basic Training.

• Peer Mentor: www.myseiubenefits.org/peermentors/

• Peer Mentor phone number: 1-855-803-2095

• Peer Mentor email: Peer.Mentorship@myseiubenefits.org

Peer Mentor positions might be open from time to time. To apply as a peer mentor, please visit: www.myseiubenefits.org/work-with-us/. Time worked as a mentor will not count toward cumulative career hours. If you are interested to be considered for future mentor opportunity, please email Peer.Mentorship@myseiubenefits.org

## SIGN UP FOR GOVDELIVERY:

https://public.govdelivery.com/accounts/WADSHSALTSA/subscriber/new

Select Consumer Directed Employer under "News and Resources"

To receive updates and information from the Developmental Disabilities Administration: https://public.govdelivery.com/accounts/WADSHSDDA/subscribers/new

## **VISIT THE CDE WEBSITE:**

www.dshs.wa.gov/altsa/cde



Any information contained within the Reference Guide does not constitute or imply an employment contract or form the basis for continued employment as an IP. If a conflict exists between the information contained in this Reference Guide and your contract, then what is written in your contract prevails.

DSHS does not discriminate in serving or contracting with people because of race, color, national origin, gender, gender identity, gender expression, sexual orientation, age, religion, creed, marital status, disability, or Vietnam Era Veteran status, or the presence of any sensory, mental, or physical disability.

This document will be replaced by the Consumer Directed Employer once the CDE begins IP employment and operations.

Please visit www.dshs.wa.gov/altsa/cde for more information.

