

# Pickaway County Board of Developmental Disabilities

## Booklet 3

### Independent Provider Documentation and Resources

Including:

Maintaining Documentation

Document set-up

Payment and Taxes

Medication Administration

DS Paths

Good Life

Welcome to being a provider! You are now a self-employed person and can build your own client base, set your schedules by working with what both you and they need, and are responsible for your own billing. This applies whether you are under the FCP program, or have finished the State Certification.

If you haven't already, get a binder from the Pickaway County Board of Developmental Disabilities. We created these binders with a flash/thumb drive with the documents you need, along with a copy of each document in a binder so that you can set up and maintain the required documentation for your work with clients. The instructions for how to set-up these documents is available on the flash drive, and I have copied them here. Feel free to contact Amanda Hall, Ruth Van Sandt, or anyone at the board with any questions. We are here to help!

[ahall@pickawaydd.org](mailto:ahall@pickawaydd.org)

[rvansandt@pickawaydd.org](mailto:rvansandt@pickawaydd.org)

You can also join the Pickaway County Providers for Developmental Disabilities Facebook page, where we can share thoughts, ideas and suggestions for various community outings.

This booklet contains more details on your documentation as well as information about continuing education in this field.

In order to get paid, you will need to submit an EFT authorization form to the Ohio Department of Developmental Disabilities. The email approving your certification includes a link to the form, which is also available on the flash drive provided. You can mail it back to them, or print, sign, scan, and email it back to [vendor@ohio.gov](mailto:vendor@ohio.gov)

## Maintaining Documentation

The first thing you need to know is what documentation is required and what you need to do with it. While it is required that you keep records, the particular format is not required. You'll notice if you came from an agency, that paperwork now offered looks very different. It contains the same information, but is in a different format. What is required that you keep records:

Name, medical number, ISP, exact hours worked, staff to individual ratio, miles travelled, medications administered, how you are following the ISP, incident reports, log of incident reports, etc... Your best bet is to use the paperwork we provide so that you don't have to reinvent the wheel. 😊 Again, you can get copies of all this on a flash drive and sample binder from the Pickaway County Board of Developmental Disabilities. (If you're not in Pickaway County, talk to board members and other independent providers. They'll be happy to help. And maybe recommend a starter kit in those counties like we've set up here!)

I also have notes in the next section for how I kept up with paperwork, even while working with multiple individuals. The flash drive also includes a check sheet you can use to make sure you have all the paperwork you need to work with your individuals, along with explanations of each piece.

Every year, bi-annually, you will be required to submit an MUI analysis. This is a record of what types of MUIs you have submitted during the year. Even if you have none (hopefully) you have to submit this form. The Board will send out an email reminder when it is due.

Also, every so often a compliance review will be requested. The DODD will let you know which individuals records they need to see, and will give you time to correct any questions that they find. (My last and only one was two years ago, so it is only a select few every so often.)

## Document set-up: Keeping Track

As mentioned, except for incident reports, none of these documents are required, perse; in other words, you need to have records of all this information, but don't necessarily need these formats. However, the forms have been developed to make sure that you do have all the records that you need and are used by most providers. You should keep everything in a three-ring binder in a safe place. Personally, I keep it in my car so that if I ever have questions while working with individuals in the community, I can refer back to it. If the individual rarely leaves their home or other residence and you work with them there, you might keep it there.

Essential documents for all cases: ISP, contact sheet, PAWS, HPC, Billing, MUI reports, incident log, incident monthly review

Other items you are likely to see: ISNA, Skills or outcomes, med log/MAR

This is how I keep track of my paperwork:

1. A week or so before the end of the current month, I create schedules for when I am going to work with each of my clients and our main scheduled activities for that day. Then I issue a calendar of those items to each person that I work with or their family. The format of this varies by the individual: some want a hard copy (calendar format or list format), some by email, other just to be notified a day or two before each outing.
2. I keep a small (dollar store) calendar in my car. This allows me to log the time started and ended and mileage start and end (I also log each stop, just in case) as I work during my shift.
3. When I am ready to submit billing (usually each week), I transfer the data from the mini-calendar into the HPC (based on what I know we did that day, because I had it written down in the monthly calendar and wrote down where we went in my small calendar), the transport log, and the billing sheet (and the skills log, if needed)

### **Document set-up: Keeping Track, Continued**

4. At the end of the month, I check to make sure I have all the paperwork I need and that it is up to date, and also mark my incident report log.

5. Incident reports need to be filled out ASAP when/if something happens. They also need to be reported to the SSA, the family, and sometimes other authorities. Other training within the DODD certification process has probably covered this. You will need to keep a summary log of incidents whether or not you had any incident reports during the month. Incidents are unusual; in other words have behavior plans in their ISPs. Typically, if it is covered in the ISP, unless a behavior is unusually severe, it does not need an incident report. (Typical for the individual, not in general) when in doubt, write it up!

6. If you administer medications, this needs to be marked immediately on the med log or MAR sheet. You must also be certified to pass any medications, this includes any over-the-counter medications. You can only administer medications with a medication certification. (See later section in this booklet.)

I have tried to set up all the documents so that they can be printed double-sided (to save space and printing cost). As the documents are for your records (they are state required and will be reviewed annually, but otherwise don't have to be submitted directly) you should have no problems with double-sided printing EXCEPT if you have county individuals. Then your county time sheet must have one person per page and be singled sided.

I have six individuals, so I keep three triple-ring binders, two in each book, starting from each side of the book, and divided in the middle by a sheet protector with a few copies of incident reports in case of emergency. I keep my books in my car.

I also included the calendar I made in paint (I couldn't find one line that suited me.) I print these to work on who I can work with when, so I don't have any conflicts. It may or may not be useful to you, depending on how organized you are/want to be, how many individuals you work with, and how full your schedule is.

## Document set-up: ISP

- The Individual Service Plan, is very important to read and to have on hand. This is your instruction manual for working with this individual. The span is always for one year, and the start date will vary with each individual.

A few months before it is up, there will be a team meeting for everyone involved with the individual to assess their progress and update the ISP. (If you happen to be more familiar with the educational field, this is similar to the IEP (individual educational plan), but is for services provided through providers certified through the DODD.) You should attend this meeting, which is usually anywhere from one-half to one and a half hours, again, depending on the individual. Unless you are specifically responsible for the individual during this time, this is unpaid time (a part of the responsibility of being self-employed.)

- o Signed: the ISP needs to be signed by the SSA, yourself, and the individual or their representative; this ensures everyone has officially agreed to the plan. Make sure the copy you carry is at least signed by you, even if the SSA has the copy signed by everyone (preferably carry a copy of the ISP signed by everyone, but this isn't always easy)

## Document set-up: PAWS and ISNA

- PAWS: Payment Authorization Summary. It is good to have a copy of this with you. I have referred to it a number of times to make sure I know how much time I am scheduled to spend with each individual, or how many miles are available for that month. This document is dependent on the waiver type of each individual (covered in other training). Sometimes it can be hard to get a copy of, so you can also get the information on a Cost Projection Report (available on the eMBS system) or a current ISNA report (covered next). Keep in contact with the SSA for the case. The entire amount available can be reallocated between hours and miles, so if you are consistently not using or overusing miles, talk with them (the SSA) about adjusting it.

- o Signed: The PAWS report should also be signed by the SSA, yourself, and the individual or their representative, as well as the superintendent (at this time in Pickaway County, Marie Wilbanks) Again, make sure the copy you carry is signed.

- ISNA: Not every individual will have one, especially if it is the first arrangement between provider and individual. The ISNA is an “Individual Service Needs Agenda” and “Medicaid Service and Payment Agreement”. The initial ISNA is included as a part of the ISP, but any changes must be reissued as an addendum, and carried as an updated ISNA. These changes may include any behavior support additions, medical additions, other recommendations, etc, but most often are adjustments to funding caps and how they are distributed among hours and transportation.

- o Again, the ISNA should also be signed by the SSA, yourself, and the individual or their representative. It may include (or replace) the new PAWS report.

## Document set-up: HPC

- HPC: Homemaker Personal Care Documentation. This is how you make sure you are doing what you are certified for and what the individual needs. Once you have it set up, print a few copies (I have it set up for double sided, so make sure to edit both pages) and fill in the dates (over the day of the week) and sign for each week. If you only work with an individual a few times a month, you don't need one for each week, just the relevant weeks you worked with them. All of the information on this document is important. At the annual review, they will check that you have logged time in and out each time, ratio of staff(s) to individual(s), location of services, and that all other information is correct.

Here's how you set up: edit the HPC template document with your name, the individual's name, Medicaid number (available on the ISP, but must be kept confidential, this is how you get paid), your DODD contract number (will be issued to you upon certification). Fill out and save separately for each individual that you work with. Note: if you cannot find a Medicaid number, or if it is listed as unknown or N/A, most likely the funding for this individual is directly through the county. (See county time sheet)

The ISP has a column for Provider. Wherever your name is listed, copy the instructions in the first column, along with the frequency and duration of that goal. (If you start working with them in the middle of the ISP span, find out who was the last provider to work with them, and copy information from their name where relevant. Ask Amanda Hall, or any current providers that you may know, if you have any questions, we are all glad to help.)

Each entry will look like this: "I will need someone to take me to fun places and/or appointments in the community. Up to 5 hours. Weekly." Each day you work with that individual, INITIAL in the boxes corresponding to what you worked on. Some might not be every time you meet, but sign as many as are relevant.

## Document set-up: Transportation Log

- Transport log: This one is pretty straight forward. Again, I recommend setting up the document with the individual-specific information on the computer so that you can easily print it again, and saving as a separate document for each individual that you work with. I set it up to print double-sided. When you get to the end of the month, make a clear distinction (ie. Draw through one line) so that you can easily distinguish the next month, but I have found no need to keep a separate sheet for a new month. Do make sure to keep exact track of your miles, starting, ending, and where you went in between. (But don't freak out if you forget every once in a while. Use your best judgment, maybe estimate start or end from other days you logged and then use a GPS to find out how many miles you used based on where you went.)

## Document set-up: Billing

- **Billing Sheet:** This is where you summarize what you did in order to get paid. Look at the HPC (and/or your small calendar) to find your hours worked. On the billing sheet you will enter in UNITS, not hours. A unit is 15 minutes. So multiply your hours by 4. For example, if you work from 4:30-6:30, that is 2 hours, or 8 units. Your HPC sheet will list 4:30-6:30 and your billing sheet 8 units. Miles should already be on your transport log and just transfer directly to the billing sheet.

This is the only sheet you will use to enter your billing online. Of course, it's easiest just to bring your binder to a computer and enter info, but if you need to you can just bring the billing sheet. Just make sure to put it back in the book, as it will also be checked at paperwork audit time.

As of now, the rate is 17.32/hour. In the eMBS system, you enter in units. So the above example in the eMBS would be APC (for IO waivers) or FPC (for level 1 waivers) 8 units at a rate of 4.33. You need the individuals Medicaid #, your provider #, the date worked, units/miles, code (APC, FPC, ATN, FTN, or otherwise as relevant for the specific waiver or service, *check with your Amanda Hall or your individual's SSA* if you are not sure.), and ratio (usually 1:1, but sometimes you might opt to have two at once).

For example I have two that like to hang out together, so we worked out some 2:1 time. The rate for that is a little higher than 1:1 time, but recorded at half the unit rate, as each waiver pays half. For example, the usual miles rate is .45, but it is .23 for 2:1 miles. I think it is 2.31 for 2:1 time (times 4 for hourly, times 2 for two individuals is 18.48/hour).

It isn't particularly crucial to get the rate correct when entering in eMBS; it will pay you whatever it is actually supposed to. You can check the reports after the payment comes in to find out if you entered correctly. The eMBS also has a section with user guides that can be helpful.

## Document set-up: Billing, Continued

To get to the eMBS, after you login at [dodd.ohio.gov](http://dodd.ohio.gov), click on “applications” then select eMBS from the drop-down list. Now on the left you will see the user guides. The third section is where you actually submit your billing.

On single claim entry page, enter the information as described above. Submit before noon on Wednesday. On Friday morning, you can log back in and check under the reports. Provider weekly reports are issued once per week. Click view under the week you are looking for (listed as A, B, C, D, and sometimes E for how many weeks in the month)

The first report at the bottom is usually “billed”. At the bottom right of this report is the amount you will get paid (two weeks from that Friday). Glance through the rest of it to be sure all the shifts you worked are listed. The second report lists errors. Sometimes my internet cuts out and I’m not sure if I entered something, so I enter it again. A duplicate would register as already paid and show up here. Keep an eye out for other sorts of errors though too. For example, a first initial that doesn’t match the file (ie. an individual that goes by a middle name and the file matches the first name, and you entered the middle initial). Call the SSA if you have any questions.

The cut-off for submissions is Wednesday at noon each week. Usually it is processed the following Friday and paid in two weeks. (15-16 days after submission ends on that Wednesday). If you keep up with it, you will be paid weekly. The same is true for county billing, although it is usually paid about 10 days after submission (cut-off also Wednesday at noon.)

## Document set-up: Incident Reports and Log

### UI reports (IncidentReport2013)

- These are critical. Keep a collection of them in your book and with you when working with individuals. If anything happens (injury, emergency, hospitalization, fight, etc.) you must fill one of these out as soon as possible and inform the proper agencies. (The SSA, the family when relevant, any relevant authorities...) Usually your CEU training includes some information on UIs and MUIs.

### UI Log (UNUSUAL INCIDENT REPORT LOG pdf 8 29 13)

- You also need to keep a log of any incident reports, even if you didn't actually have any...

### UI monthly review (UNUSUAL INCIDENT REPORT LOG pdf 8 29 13)

- ...And then review that log monthly. I just use the same sheet, and sign at the bottom and indicate "monthly review".
- There is a copy of the annual review on the flash drive. This shows the categories of Major Unusual Incident. Any injury that needs reported should be filled out on an Unusual Incident report, but anything major such as on this list must be classified as a MUI. The UI and the MUI are processed on the same form, but you will notice at the end of the UI report that there are more people to contact if it is an MUI.

## **Document set-up:**

### **Other documents: Contact Info Sheet**

#### Contact Info sheet

- Not everybody has one, but they are very useful. Most of the information is usually now on the first page of the ISP, but I encourage making a contact info sheet with emergency information. Name, birthdate, address, legal guardian and other important contacts, doctor/dentist/hospital information, diagnosis, allergies, immunizations, medications... If you don't see it early in the ISP, ask the SSA if they have a contact info or emergency information sheet.

## **Document set-up:**

### **Other documents: Skills/Outcomes**

#### SKILLS

- Not everyone has one, and the state keeps changing the name (outcomes, skills, etc.) It's all about the same – specific goals of an individual that they want to accomplish during this year/ISP span. Usually listed towards the end of the ISP, they look similar to what you will list on the HPC but may be specified by “outcome,” “skill” or “action.” These should also be on the HPC, but are usually greyed out and kept track of on the skill/outcomes sheet. (I think this is to provide a better look at how often during the month they are provided, as they are slightly more important than the rest of the HPC items.) As mentioned, not all individuals have these type of specific goals. Ask the SSA if you have any questions about your individual or setting up the sheet.

## **Document set-up:**

### **Other documents: Med Log / MAR**

#### Med Log / MAR

- I haven't seen one of these since I worked with an agency, but they are very important. You CANNOT administer meds without a medication certification, so make sure to check with the SSA beforehand. If you need it, you must initial each med, each time it is administered, sign each sheet monthly, and make notes of any changes.

## **Document set-up:**

### **Other documents: County Time Sheet**

#### County Time Sheet

- A lot of young or new individuals don't yet receive funding through the state. As a new provider, you may encounter even more of these than Medicaid funded waivers. If your individual does not have a Medicaid number listed anywhere, more than likely their services are funded through the county. Double check with the SSA, but I have included a county time sheet for this purpose. These are dropped off in person at the DODD office (you've probably been there a few times by now for interviews, signing paperwork, etc... On the corner of High St. and Pickaway St. in Circleville) Weekly cut-off time is Wednesday before noon (as in Ms. Dona has to have it in by then, so make sure yours is in advance of that in order to be paid.) Payment is a week from that Friday by check in the mail (usually the first one has to be picked up at the office, and is then mailed to your address.)

## **Taxes**

You are responsible for maintaining your taxes. If you expect to owe at least \$1,000 in taxes (probably making \$6,000 or more / year, or an average of at least 5 hours / week) you must pay quarterly estimates. The website for this is [www.eftps.gov](http://www.eftps.gov)

Recommended by my accounting professor, who is also a CPA: save 25% of your income for year-end taxes. Remember if you've set aside too much, you've got a tax return to yourself! (Which has been earning dividends at least in your savings account, rather than paying it to the government and then eventually getting it back after weeks of waiting...) But if you set aside too little, you'll have to pay interest on what you can't pay with your tax return...

Remember, in order to get paid, you will need to submit an EFT authorization form to the Ohio Department of Developmental Disabilities. The email approving your certification includes a link to the form, which is also available on the flash drive provided. You can mail it back to them, or print, sign, scan, and email it back to [vendor@ohio.gov](mailto:vendor@ohio.gov)

## **Medication Administration**

You cannot administer medications without the medication certification! While not required to be kept on file with the State and your independent provider certification, you do need to keep this certification on file with your local county board of developmental disabilities. You can work with other individuals who do not need medications while under your supervision, so go ahead and interview with clients. Just remember to mention it if medications come up, and make sure that they do not need your assistance.

When you are ready or need to get this certification, it is easy to do. The best local resource for this training is Dynamic Pathways.

<https://dynamicpathwaysinc.com/>

They offer medication administration training and the yearly recertification. The first class is a two day training, usually two consecutive days 8 am – 4 pm. Their office is on the north side of Columbus. The yearly renewal is only two hours long. Insulin and G-tube trainings are extra, check with the individual's SSA to see if you need that. The certificate is emailed to you within a few days of completed training.

Cost is \$125 for the initial training, \$75 for each additional (insulin or G tube) training, and renewal classes in consecutive years are \$40.

## **DS Paths**

DS Paths is a continuing education program for advanced training in human services. The program was created by the OADSP: Ohio Alliance of Direct Support Professionals. A basic course is offered by the local Pickaway County Board of Developmental Disabilities on a periodic basis. The advanced course is also available, when there are sufficient participants.

DSPaths goes into greater detail on subjects that concern the care and understanding of people with disabilities. Some topics may have already been covered in the CEU 8 hour training certificate, but the DSPaths goes deeper into those subject, and adds a few more. The Basic certificate contents include ten modules, usually taught in a 2-3 hour course each. (Either 10 mornings or afternoons, or 5 weeks with a full day dedicated to two modules.)

Topics include:

- Overview of Intellectual and Developmental Disabilities
- History of Services to People with Disabilities
- Ethics on the Frontline
- Supporting Health and Safety
- Providing Personal Care with Dignity
- The Direct Support Professional as Teacher
- Individual Service Planning (ISP) and Self-Determination
- Fundamentals of Effective Communication
- Providing Behavioral Supports and Principles of Positive Intervention
- Unusual Incidents, Major Unusual Incidents, and Incident Report Writing

Check with the Pickaway County Board of Developmental Disabilities or the OADSP website for the next time this training is offered.

## **Good Life**

Another training often offered by the Pickaway County Board of Developmental Disabilities is Good Life training. This is a program for either providers, or providers together with individuals to help a better outlook on life and inspire ways to live a 'good life,' especially for individuals with disabilities.

From their Facebook page:

“The Good Life Network (GLN) is a training and professional development program conceptualized and founded by Willie Jones and Pete Moore in 2011.

“The goal of the program is to combine many various philosophies and disciplines (i.e., gentle teaching, positive culture, person-centered planning, etc.) into a cohesive and organized effort to help people with developmental disabilities live a good life.

“The program is a service of the Ohio Association of County Boards of DD ([www.facebook.com/oacbdd](http://www.facebook.com/oacbdd)).”