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Authorized Signature

Number: APD-PT-16-012
Issue date: 3/29/2016

Topic: Long Term Care

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other: _____

Applies to (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services(ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children’s Intensive In Home Services |
| <input type="checkbox"/> County DD Program Managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> ODDS Children’s Residential Services | <input type="checkbox"/> Other (<i>please specify</i>): |
| <input type="checkbox"/> Child Welfare Programs | |

Policy/rule title:	Vouchers not Properly Completed or Above Authorization		
Policy/rule number(s):		Release no:	
Effective date:	Immediately	Expiration:	

References:	SEIU / Oregon Homecare Commission Collective Bargaining agreement (CBA)
Web address:	

Discussion/interpretation:

Incomplete and incorrect vouchers:

Homecare workers (HCWs) who turn in vouchers that are **incomplete** must have the vouchers returned to them so that the voucher can be properly completed before it is processed. **Incorrect** vouchers should also be returned to the HCW when serious corrections are necessary. See [APD-PT15-041](#) for definitions of incomplete or incorrect (including what is considered a serious or minor correction) vouchers.

Hours claimed in excess of hours authorized on the pay voucher:

A HCW may be paid for no more than the “Total Hours Authorized” on a voucher unless the HCW has authorization from a case manager to do so.

Implementation/transition instructions: N/A

Training/communication plan:

Please refer to [APD-PT-15-041](#) for additional information on the policy topics described in this Policy Transmittal.

Local/branch action required:

Incomplete and incorrect vouchers:

APD and AAA staff that enter vouchers should not process any voucher that is not properly completed. Incorrect (that require serious corrections) and incomplete vouchers should be returned to the HCW. The next section addresses the issue of hours claimed in excess of hours authorized on the voucher.

When incomplete and incorrect vouchers are returned to HCWs, APD and AAA staff must use the letter that is attached at the end of this transmittal. The letter, titled “HCW Notice of Incorrectly Completed Voucher”, is also found in CM Tools, under the sections [Provider Time Capture \(PTC\) Information](#) and [In-Home](#). Local offices that prefer to use their own letter must have it reviewed and approved by one of the policy analysts listed at the end of this transmittal. Please consider keeping a copy of this notification in order to track HCWs that repeatedly need to have their vouchers returned.

Local office staff may determine if it is more appropriate to mail the voucher/notification to the homecare worker or have them pick it up at the office. In either case, all actions should be narrated in Oregon Access.

Hours claimed in excess of hours authorized on the voucher:

1. Do not send these vouchers back to the HCW unless it is determined that one or more time entries are incorrect.
2. Before paying the voucher, please verify with the appropriate case manager to make sure that additional hours were not previously authorized for this voucher.
3. To help decrease the possibility of this occurring again, staff are encouraged to speak with the individual and HCW about the issue and to encourage modifying future work schedules as needed in order to remain within the authorized hours.

When data entering a time-in/time-out voucher that results in the HCW going above the "Total Hours Authorized", staff should modify the HCW's start time and end time entries to bring the total hours down to the authorized amount. Use the last time entries on the pay period in order to make these changes.

When an entire shift needs to be deleted, type an "X" in the first digit of the "Day" field on any time-in/time-out entry on STIM, as shown below, and press Enter:

```

STIM Voucher: 15214345 ICN: 000000000000 Svc Period: 06/16/2015 06/30/2015
Recipient Name: [REDACTED] Recipient: [REDACTED] Page 001
STA: 36 Provider Name: [REDACTED] Provider#: [REDACTED] Wkr 999
Authorized: ADL: 50.00 IADL: 0.00 24HR SUPP: 0.00 MILEAGE: 30
Miles Driven: [REDACTED] BR: 2019

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Day	In	Time	AM	Time	AM	Work
Day	In	PM	Out	PM	Hrs	
16	0800	A	0200	P	06.00	
X0	0800	A	0200	P	DELT	
X4	0800	A	0200	P	DELT	
28	0800	A	0200	P	06.00	

```

Msg 63 Press F9 to save / ENTER to edit
ADL=030.00(030.00) IADL=000.00(000.00) 24HR=000.00(000.00) MILE=0025
F3=Exit F5=Refresh F7=Prev F8=Next F9=Save F10=PAY F11=HINQ F12=STIQ
1 Sess-1 127.0.0.1 HTCPWFAM § 11/43

```

When modifying the time-in/time-out entries, please allow the system to calculate the hours.

Example 1

```

STIM Voucher: 15360470 ICN: 000000000000 Svc Period: 10/01/2015 10/15/2015
Recipient Name: [REDACTED] Recipient: [REDACTED] Page 001
STA: 36 Provider Name: [REDACTED] Provider#: [REDACTED] Wkr SO
Authorized: ADL: 83.50 IADL: 0.00 24HR SUPP: 0.00 MILEAGE: 30
Miles Driven: 0030 Void PM: N ADJ Time: N BR: 0311

```

Example 2

```

15 1000 A 0100 P 03.00 | 15 0300 P 0330 P 02.30
A A
Msg NO MORE
ADL=083.30(083.50) IADL=000.00(000.00) 24HR=000.00(000.00) MILE=0030
F3=Exit F5=Refresh F7=Prev F8=Next F11=HINQ F12=STIQ

```

For example, if the HCW is authorized 83 and a half hours on the voucher (Example 1), but has reported 90 hours, modify the time entries until it equals 83 and a half hours (Example 2). The number in parentheses must match the authorization.

Please note that there are two sets of numbers next to the calculated hours.

1. The numbers not in parentheses is the amount of time worked in hours and minutes format. For example, 83.30 means 83 hours and 30 minutes.
2. The numbers in parentheses is the amount of time worked in a decimal format. For example, 83.50 also means 83 hours and 30 minutes.

Central office action required: N/A

Field/stakeholder review: Yes No

If yes, reviewed by: APD Operations and APD Policy

Filing instructions:

<i>If you have any questions about this policy, contact:</i>	
Contact(s):	Chris Ellis – Homecare Worker Policy Analyst Mat Rapoza – In-Home Policy Analyst
Phone:	503-945-7035 – Chris 503-945-6985 - Mat
Email:	Christopher.M.Ellis@state.or.us Mathew.G.Rapoza@state.or.us

**Homecare Worker Notice
Incorrectly Completed Voucher**

Date: _____

Voucher #: _____

Dear Homecare Worker,

As part of the Collective Bargaining Agreement between the Home Care Commission and Service Employees International Union, Local 503 OPEU, we are not able to accept vouchers that do not meet the definition of a 'properly completed voucher.' Your voucher is being returned to you for the following reason(s):

- Voucher was completed in pencil. Vouchers must be completed in ink.
- Changes to hours or dates worked were not initialed by the consumer-employer. Consumer-employers must approve and initial any changes to the voucher.
- Voucher was not signed by you as the HCW and/or by the consumer-employer, or voucher is missing the signature page.
- Voucher was submitted for payment before last day worked. Payment cannot be claimed for hours not yet worked.
- Voucher was submitted for payment before signature dates of the HCW and consumer-employer. Properly completed vouchers cannot be signed with future dates.
- Voucher was submitted with illegible or missing information.
- The voucher date range was changed. Vouchers with changed date ranges cannot be accepted.
- You submitted a voucher with time entries that overlapped with another voucher you submitted. Time entries cannot overlap between multiple vouchers.
- Other:

PLEASE CORRECT THE ERROR(S) AND RESUBMIT THE VOUCHER FOR PROCESSING. THE CONSUMER MUST INITIAL ALL CHANGES TO THE VOUCHER. IF THE VOUCHER IS NOT CORRECTED AND TURNED IN BY THE SUBMISSION DEADLINE, YOUR PAYMENT MAY BE DELAYED.