

# Enhanced HCW & CA/PS Copy & Create Netlink Training Q & A - (1/6/15 - 1/15/15)

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## 1. Homecare Commission/Training Related Questions –

- Q: Who is eligible to complete the certification training?
- A: Any approved Homecare Worker or Personal Support Worker.
  
- Q: The current Homecare Training Newsletter has many different training topics offered. Do they all add the enhanced certification to the HCW?
- A: No, not all of the trainings offered by the Homecare Commission add the enhanced certification.
  
- Q: Will HCW's have papers showing they have completed the enhanced training?
- A: Yes, once a HCW or PSW has successfully completed the enhanced certification training they will receive a certificate of completion.
  
- Q: Where should we direct HCWs to if they have questions about the registering with the HCC or training related questions?
- A: You should direct them to the Oregon Homecare Commission website – <http://www.oregon.gov/dhs/spd/Pages/worker-cert.aspx>
  
- Q: Is there any way to know if any HCW's have been certified yet?
- A: The Homecare Commission is updating the HCW's training profile on their website. The Homecare Commission is working on creating a report to include a list of EHCWs. You may visit the HCC website to learn more at – <http://www.oregon.gov/dhs/spd/Pages/worker-cert.aspx>
  
- Q: When will an updated training newsletter be available to HCWs?
- A: Newsletters are sent monthly. The majority of HCWs receive the Newsletter via e-mail but there are some that receive it via USP. Please encourage HCWs to keep their information updated with the HCC so they are sure to receive the Newsletter at their preferred address (e-mail, home, mailing

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addresses).

- Q: Are the EHCW trainings all online or at physical locations?
- A: At this time, the locations have not all been decided on. If enough HCWs show interest in online trainings or to have the trainings offered in certain areas then the HCC will try to accommodate the requests.
  
- Q: Will the HCC verify with the Case Manager that a provider is working for a consumer that receives enhanced treatments prior to having the HCW take the certification training?
- A: No, the HCC is offering the certification training to all enrolled HCWs and PSWs regardless of whether or not they are currently supporting enhanced treatments to a consumer.
  
- Q: Will EHCW's need to update/renew their certification periodically?
- A: Yes, the EHCW certification is good for two years.
  
- Q: Have the HCWs been notified about the enhanced training option?
- A: HCWs have been notified via the Homecare Commission Newsletter.
  
- Q: Would Oregon Certified CNAs meet the EHCW criteria, or do they still have to take the special classes / certification?
- A: No the Oregon Certified CNAs do not meet the EHCW criteria and workers do still need to complete the EHCW certification training.

### **2. Enhanced Homecare Worker (EHCW) Related Questions –**

- Q: How would we know if a HCW got certified as an EHCW?
- A: The EHCW certification will be designated on the HCW's training profile on the Homecare Commission website. Otherwise, it is up to the HCW to notify you as the Case Manager that they have successfully completed the EHCW certification.
  
- Q: If a live-in provider would like to get certified, are we allowed to pay for a respite provider to cover the hours spent on the training?
- A: Yes
  
- Q: What if there are multiple HCW's working for one consumer and only one is supporting the enhanced treatment(s)?
- A: Currently, there is no way in the system to differentiate which EHCW is supporting the enhanced treatments. Therefore, all certified EHCW's working for a single consumer will receive the enhanced rate of pay whether they support the enhanced treatment(s) or not.

### **3. Enhanced Treatment Policy Related Questions –**

- Q: Will In-Home Contract Agencies get paid more the enhanced treatments?

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- A: No, In-Home Contract Agencies will not get paid for supporting enhanced treatments. They are under contract and their rate of pay is included within their contract.
  
- Q: To get the enhanced rate will the consumer need to be full assist in that particular need?
- A: Treatments are not tied to need levels so a consumer may have an enhanced need and require full assist in any particular area.
  
- Q: If you have to do a new assessment due to a change in condition will the previous assessments treatments end automatically based on the new assessment effective date?
- A: No, treatment end dates must be manually updated and will not be automatically ended by the system so you will need to go to the previous assessment treatment(s), enter the end date for each treatment and sync to the mainframe.
  
- Q: Will the enhanced rate apply to SPPC?
- A: No, as the system does not capture treatments on SPPC assessments.
  
- Q: If a consumer has no treatments, do we have to enter anything in the Treatment Managements screen or can we skip the treatment section?
- A: If the consumer receives no treatments you do not have to enter anything in that screen.
  
- Q: If a treatment is not expected to last a full year will the HCW only get the enhanced rate while the treatment is in place and then revert back to the lower rate when the treatment ends?
- A: Yes as long as you have entered and sync'd the treatment end date the enhanced rate of pay will be reduced after the end date. The system will catch the treatment end date and will pay accordingly.
  
- Q: Who is responsible for creating the documented behavioral support plan?
- A: A Behavior Support Service Consultant or a Mental Health Professional may create a documented behavioral support plan.
  
- Q: Behavior Support Service Consultants don't always accept in-home clients. Who is responsible then for writing the behavioral support plan?
- A: When a Behavior Support Service Consultant is not available, a Mental Health Professional may also complete a documented behavioral support plan.
  
- Q: Do all enhanced treatments need to be delegated.
- A: Enhanced treatments do not affect the rules related to RN delegation requirements.
  
- Q: What is considered 'verified'? MD order? Observing the equipment? Client's word?
- A: You do not have to verify the administration of treatments including enhanced treatments. You may take a verbal statement from the consumer, their representative, provider, or a medical professional as a way of verifying the administration of a treatment.

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- Q: Does a documented Behavior Support Plan have to be completed by a Behavior Support Specialist to get an add-on or enhanced treatment?
- A: Not always. A Behavior Support Plan can also be completed by a mental health professional. An add-on requires Full Assist in a behavior and requires a behavior care plan.
  
- Q: Does EHCW certification bypass LTCCN (CRN) delegations?
- A: No, there are no changes in the requirements for LTCCN (CRN) delegations.
  
- Q: During our monthly direct and indirect will we need to be monitoring and updating the treatments or is the once a year reassessment sufficient? (i.e. if a consumer has a wound in May and you contact them in July and find out the consumer's wound is healed, then there is no more enhanced care) Must we recreate the entire assessment and also send a Buckley Bill notice to the consumer in order to do so?
- A: During your monthly direct and indirect services if you learn about a new or ended treatment you should go ahead and make that change on the Treatment Management screen. You don't necessarily need to ask about treatments each month unless it is brought up during your conversation with the consumer, their representative, or provider. You do not need to recreate a new assessment when updating the Treatment Management screen. It can be modified at any time.

### **4. Payment Related Questions –**

- Q: If an EHCW receives the enhanced rate of pay for bowel care, would they receive the enhanced rate for all hours of care?
- A: Yes, if an EHCW is providing paid care to a consumer that receives an enhanced treatment they will receive the enhanced rate of pay for all hours worked for this consumer.
  
- Q: If you have a treatment start date that is retroactive and the HCW has already been paid the non-enhanced rate, but would have been eligible for the enhanced rate would this be an underpayment?
- A: Yes, you should send a request to the Provider Adjustment unit to request the underpayment be resolved. Reminder – the enhanced rate began 1/1/2015 so payments cannot be made any earlier than that date.
  
- Q: Will it be an overpayment if we learn later that a treatment ended and they failed to inform us?
- A: Yes you will be required to do an overpayment referral when this situation occurs.

### **5. Facility Related Questions –**

- Q: Do we enter treatments for consumers in nursing facilities?
- A: Yes, treatments supported by a paid provider included in the consumer's service plan should be entered in the Treatment Management screen.
  
- Q: What if the consumer lives in a community based facility?

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- A: In order to trigger an add-on for consumers living in an AFH or a RCF the treatments must be added or removed from a pending assessment. To do this you will need to either put the assessment back into pending status or create a new assessment. ALFs and NFs don't get add-ons or enhanced rates so you can modify the Treatment Management screen at any time.
- Q: So when a consumer is in a CBF, do we still need to enter treatments that are provided by the paid provider?
- A: Yes, any treatments that are supported by a paid provider (including AFHs, NFs, ALFs, RCFs as well as in-home) listed in the service plan should be added in the Treatment Management screen regardless of whether or not they are paid an enhanced rate or not.

### **6. System Related Questions (Re. Enhanced Treatments/EHCWs) –**

- Q: Who codes the HCW as an EHCW? Do the HCW clerks do that when a HCW gets the enhanced certification, or is that something that someone else does?
- A: Once a worker completes the enhanced certification the Oregon HCC updates that information in the system and that information is sent electronically to the mainframe.
- Q: If an EHCW is working for a consumer that does not receive enhanced treatments, will the system know this & pay accordingly?
- A: Yes, in order for an EHCW to receive the enhanced rate of pay the system will check to make sure the consumer has a qualifying treatment.
- Q: Will we continue to note all treatments in the comments section just not in the actual treatment tab in Oregon ACCESS?
- A: Treatments that are supported by a paid provider included in the consumer's service plan should be entered in the Treatment Management screen. Treatments that are supported by a provider that is not included in the consumer's service plan should only be included in the comments section in the Treatment Management screen.
- Q: Are we supposed to clear all treatments on our current CA/PS?
- A: No, update the Treatment Management screen when completing a CA/PS re-assessment or after learning that existing treatments have ended or new treatments have begun.
- Q: Do we need to create a new service plan after learning that a HCW has completed their certification?
- A: No, the enhanced certification is tied to their provider number and if they are working for a consumer that receives an enhanced treatment, their rate of pay will be automatically adjusted in the system.
- Q: Can you copy an existing Title XIX assessment but create an OPI assessment or must it be the same kind of assessment?

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- A: In order for a worker to accomplish this, the worker must have the rights to create both Title XIX and OPI assessments. If the worker security profile allows creation of both types of assessments, the worker will be able to copy the Title XIX assessment and then change the assessment type to OPI on the Assessment Summary screen.
  
- Q: Why are we syncing to the Mainframe?
- A: The treatment information is sent to the Mainframe for provider rate determination, voucher issuance and provider payments.
  
- Q: If we don't know if a HCW is enhanced certified should we still sync to the Mainframe?
- A: Yes, syncing to the Mainframe is necessary regardless if there are any enhanced treatments or an EHCW.
  
- Q: How will the enhanced rate affect exceptions? Will there be an auto update of the exception?
- A: If the consumer or provider already has an exception the system will automatically choose the exception rate and not the enhanced rate. If incorrect rates are noted due to an exception please contact the service desk to have it corrected.
  
- Q: If someone moves from an AFH to an in-home setting where their HCW is not supporting their ongoing treatments will a new CA/PS assessment need to be created?
- A: A new assessment is not required in this situation. You should however, update the Treatment Management screen to include only the treatments that the new HCW will be supporting.
  
- Q: Are the treatments going to show on the mainframe SELG screen?
- A: No. Treatments will only be listed in OA on the Treatment Management screen.
  
- Q: Is the date that is tied to the treatment(s) effective date the date that is entered for the 'Assessment Date'?
- A: The treatment dates must be within the assessment time period. Treatment dates can be modified as long as they still fall within the assessment time period.
  
- Q: What screens in the mainframe will show the enhanced rate of pay?
- A: SRDM, HATH, HADJ, HPAY, OATH, OADJ, and OPAY (Due to security some users may not be able to view all screens listed).
  
- Q: Where in OA will the enhanced rate of pay be displayed?
- A: You will see the enhanced rate of pay in the 546 Details-Service Rates screen.
  
- Q: If a consumer received enhanced treatments how should we set up their service plan when they choose not to have an EHCW?
- A: There is no change in service planning. A consumer may choose to have a non-enhanced HCW if they have an enhanced treatment and the HCW may support the enhanced treatment, but they

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will not be paid the enhanced rate.

- Q: Can a Tier 2 user un-invalidate a treatment or does it have to be re-entered if it was invalidated in error?
- A: No, once a treatment has been invalidated it cannot be un-invalidated and should be re-entered.
  
- Q: Can a treatment be ended mid cert period?
- A: Yes, treatments can be ended at any time during a cert period.
  
- Q: Do you have to sync to the mainframe when a treatment list is complete or will the CA/PS auto sync when the assessment has been completed?
- A: The system does not 'auto sync' treatments, so yes anytime you modify (add, end, or invalidate) a treatment you have to sync to the mainframe.
  
- Q: When a client passes away and you enter a date of death, does this put an end date on all of the treatments?
- A: No, you must go into the Treatment Management screen and enter the end date effective the date of death and sync to the mainframe.
  
- Q: Are we able to sync treatments to the mainframe when we have a case checked out in remote?
- A: No. You must check the case back in when you return to the office and will only be able to sync treatments to the mainframe then.
  
- Q: Are we able to sync several treatments to the mainframe at once or do we have to do them one at a time?
- A: You are able to sync several treatments at once and do not have to do that one at a time.
  
- Q: Is the Diagnosis section connected to the Treatment?
- A: No, they are not connected.
  
- Q: If we experience issues with the ability to end treatments or with treatments copying do we need to contact the service desk?
- A: If it appears to be a system issue then yes you should contact the service desk. If however, you are not sure if it's a security (Tier level) issue or a policy issue you may send an e-mail to [OregonAccess.Release@state.or.us](mailto:OregonAccess.Release@state.or.us) to have it looked at. If it is an issue that should be sent to the service desk staff at Central Office will forward your e-mail directly to the service desk.
  
- Q: How far back are Tier 1 and Tier 2 users able to begin enhanced treatments?
- A: No treatment start date can be before 1/1/15 - unless of course it is an old treatment. Max start for Tier 1 & 2 is 31 days prior to assessment date. Once verified, users aren't able to modify a start date earlier than originally entered and would need to add a new line. Tier 3 users (Central Office) can start as far back as needed but no earlier than 1/1/15.

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- Q: Are we able to change start and end dates on treatments with the 01/01/1900 start and end dates?
- A: No the treatments with the 01/01/1900 dates are not modifiable.
  
- Q: On the Treatment Management screen, will the system designate between enhanced and non-enhanced treatments?
- A: Yes, the system does differentiate between enhanced and non-enhanced treatments. This is not indicated on the screen anywhere, but is something that is done on the back end. All treatments being supported by the paid care giver should be entered on the Treatment Management screen regardless if they are enhanced or not.
  
- Q: Can we enter treatments when in remote?
- A: Yes, new treatments can be added when in remote. You may also modify the existing treatments when in remote, but will not be able to sync when in remote. You must remember to do that once you're back in the office and have checked the case back in.
  
- Q: Are the enhanced rates only reflected in those tasks?
- A: No, if a consumer is receiving an enhanced treatment and an EHCW is supporting the enhanced treatment they will receive the enhanced rates of pay for all hours paid.

### **7. Copy & Create Policy Related Questions –**

- Q: Are we required to use the copy and create feature when creating a new assessment?
- A: No, the copy and create feature is for you to use only when you choose and it not required.

### **8. System Related Questions (Copy & Create) –**

- Q: For the copy and create functionality, is that only for in-home cases?
- A: No, the copy and create functionality is for all types of care settings.
  
- Q: Can an assessment in Administrative status be copied?
- A: Yes. The only assessment status that cannot be copied is 'pending'.
  
- Q: Would we need to do copy and create before we take the laptop out in the field using OA remotely?
- A: No, you may choose to copy and create any assessments you have checked out in the check-out process while you have the case out in remote. However, if you find that you would like to copy and create from an assessment that you did not check-out you will be unable to copy it in remote.

### **9. Form/Notice Related Questions –**

- Q: Will the worker get notice that the rate is changing?

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- A: No, HCWs are not notified of a rate change. However, if the consumer's services have changed (a treatment has ended or a new treatment has begun) which results in a change in the number of hours the HCW is being paid for, then you do need to send the HCW a 4105 to notify them of the increase or decrease of hours. The HCW will also see the rate change on their vouchers.
  
- Q: How will this affect the worker's vouchers if they become an EHCW within a pay period? Do we need to issue a new 546?
- A: Once the Homecare Commission updates their system and the information is sent electronically to the DHS Mainframe the information will be updated. The system will automatically update and pay the provider the enhanced rate of pay. There is no need to re-print a new 546. However you should print an updated Pay-In Calculation Worksheet to verify whether or not the consumer's pay-in has been affected. In which case you should take the appropriate actions (send notices and update pay-in in system).
  
- Q: If we remove a treatment from an assessment do we need to send the provider a 4105?
- A: You only need to send a HCW a 4105 when adding or removing a treatment if the treatment affects the number of hours on the consumer's service plan.
  
- Q: Would a new Task List (598) be required?
- A: You will only need to send an updated Task List when there are paid services that have ended or will begin.
  
- Q: Are the treatments on the Task List (598)?
- A: No, treatments are not included on the Task List.
  
- Q: What is the 546 going to look like?
- A: It will look exactly the same. However, you will see the service periods broken out on the 546 when a treatment is added and an EHCW is supporting the treatment to indicate the different rates of pay.
  
- Q: Will the enhanced rate of pay show on the Liability Worksheet (450N) and the HCW vouchers?
- A: Once all the criteria are met in the system (EHCW listed as a paid provider in Service Planning and an enhanced treatment is listed on the Treatment Management screen) the enhanced rate of pay should be listed on all forms that include the rate of pay including the Liability Worksheet 450N and the HCW vouchers.
  
- Q: Would we need to send a 10 day notice of the reduction if the reduction is only affecting the EHCW?
- A: No, you only need to send a 10 day timely notice to the consumer when the hours in their service plan have been reduced. We are not required to send HCWs timely notice, but you will want to send them a 4105 to let them know what service will no longer be provided. However, if a consumer's pay-in increases you will need to send the appropriate timely notice for that.

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- Q: How will the HCW clerk know to apply the enhanced rate, if it is not on the 546 or on the service plan?
- A: The HCW clerk does not need to do anything different. The system will apply the appropriate rate of pay regardless of what is listed on the 546 or the voucher.

### **10. Other Program Related Questions-**

- Q: Since Behavior Support Specialists can only be for up to 80 hours, is it okay to keep the EHCW after the BSS hours are used up?
- A: Yes, as long as the EHCW continues to support the treatment. Once there is a documented Behavior Support Plan it is effective even after the BSS is no longer visiting the consumer.
  
- Q: Can Spousal Pay HCWs be EHCWs?
- A: Yes, as long as they have completed the enhanced certification training, they are supporting the enhanced treatment for their spouse and the enhanced treatment is listed in the Treatment Management screen.
  
- Q: Will workers providing care to ICP consumers receive the enhanced rate of pay?
- A: No, as there is no way to indicate in the system which provider is providing the care to the consumer.
  
- Q: Will OPI be using the treatments, or does this mainly pertain to SPPC and Medicaid?
- A: Yes, OPI HCWs are eligible for the enhanced rate of pay (if they have completed the enhanced certification training) therefore, treatments that the HCW is supporting should be listed in the Treatment Management screen.

### **11. Miscellaneous Questions –**

- Q: Are Case Managers responsible for informing HCWs that they may be able to get paid the enhanced rate if they complete the enhanced certification training?
- A: No, Case Managers are not responsible for that. HCWs are provided the information by the HCC.
  
- Q: If we have a pending assessment, will it disappear if they are not in complete status before the release?
- A: No, the release will not delete your pending assessments and you will not lose any information in your pending assessments.
  
- Q: What is the OR release e-mail box address again?
- A: [OregonAccess.Release@state.or.us](mailto:OregonAccess.Release@state.or.us)
  
- Q: What do you mean by 'supporting' a treatment?

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- A: A provider is supporting a treatment when they are providing care related to that treatment.