Steps for Success

PCA Provider Agency Training

Day 1
This workbook is intended to be a companion guide to Day 1 of the DHS in-person Steps for Success training. There are fill-in-the-blank lines throughout the workbook for you to complete during the training. Your notes and workbook content will serve as a resource for you to keep and refer to after the training.

Use this workbook in conjunction with our online interactive training available at:
Course Topics

- Program introduction and overview
- PCA covered services
- Assessments
- Responsible party (RP)
- PCA service models
- Provider agency responsibilities
- Care plan
- Qualified professional (QP)
- Carrying out the care plan
- Resources
PCA introduction and overview

Notes:
Minnesota offers health care programs to residents to cover (pay for) medical services.

Personal care assistance (PCA) services are included in some of the programs.

To receive PCA services a person must be eligible for one of the Minnesota Health Care Programs (MCHP) that covers PCA services.
# Doorways to PCA services

<table>
<thead>
<tr>
<th>Managed Care Organizations (MCOs)</th>
<th>Fee-for-service</th>
<th>Alternative Care</th>
<th>Waivers</th>
</tr>
</thead>
</table>
| Minnesota is a mandated managed care state. Some recipients may be required to enroll in an MCO to receive PCA services. | The provider follows Department of Human Services procedures for direct billing and payment. | To qualify for Alternative Care you must:  
- Be 65 years old or older and not on Medical Assistance  
- Need nursing home level of care as determined by an assessment  
- Meet specific asset and income requirements | Waiver programs include the following:  
- Brain Injury  
- Community Alternative Care  
- Community Access for Disability Inclusion  
- Developmental Disability  
- Elderly Waiver |
How does someone receive PCA services?

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Details</th>
</tr>
</thead>
</table>
| Be enrolled in a Minnesota Health Care Program    | • Medical Assistance (MA)  
• MA Waiver  
• Alternative Care  
• MinnesotaCare |
| Live in own home, and **not** . . .               | • a hospital  
• a nursing facility  
• a foster care setting licensed for more than four people |
| Direct own care                                   | • Identify own needs  
• Direct and evaluate PCA tasks and accomplishments  
• Provide and arrange for own health and safety |
| Receive assessment                                | • Authorizes PCA services  
• Requests for assessment are made through the local county, tribe or MCO |

If the person is unable to direct his or her own care, the person can have a _______ act on their behalf.
PCA covered services

Notes:
### What are covered PCA services?

<table>
<thead>
<tr>
<th>Observation and redirection of behaviors</th>
<th>Activities of daily living (ADLs)</th>
<th>Health-related procedures and tasks</th>
<th>Instrumental activities of daily living (IADLs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Due to cognitive deficits</td>
<td>• Dressing</td>
<td>• Help with self-administered medications</td>
<td>• Help with participating in community-based activities</td>
</tr>
<tr>
<td>• Socially inappropriate behaviors</td>
<td>• Grooming</td>
<td>• Monitoring or observing for seizure disorders</td>
<td>• Paying bills</td>
</tr>
<tr>
<td>• Resistance to care including verbal aggression</td>
<td>• Bathing</td>
<td>• Assisting range of motion</td>
<td>• Communication</td>
</tr>
<tr>
<td>• Physical aggression towards self or others, or destruction of property that requires an immediate response</td>
<td>• Positioning</td>
<td>• Clean (not sterile) trach suctioning</td>
<td>• Meal planning and preparation</td>
</tr>
<tr>
<td></td>
<td>• Eating</td>
<td></td>
<td>• Household tasks</td>
</tr>
<tr>
<td></td>
<td>• Transfers</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Mobility</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Toileting</td>
<td></td>
<td></td>
</tr>
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<td></td>
</tr>
</tbody>
</table>

- Observation and redirection of behaviors
- Activities of daily living (ADLs)
- Health-related procedures and tasks
- Instrumental activities of daily living (IADLs)
Who plays a role in PCA?

- PCA Worker
- Lead Agency Assessor
- Responsible Party (RP)
- Qualified Professional (QP)
- Provider Agency

Participant
PCA services that are not covered

Services **without** _________________

Services **not included** in the _________________

Child _________________

IADLS for a person under 18 years old (with exceptions)

Services that are the responsibility of a residential or program license holder

Services in housing owned by the same _________________

Home _________________

Use of restraints

_______________ procedures

Injections

_______________ not integral to assessed PCA needs
The process for receiving PCA services begins with an ________________ evaluating the person’s needs in order to arrive at the amount of time the person is eligible to receive. An ________________ is then created and the provider uses the assessment paperwork to develop the ________________ with the person.
Community participation

A person can receive PCA services where

______________________________.
1. Person requests assessment
2. Lead agency conducts assessment
3. Lead agency IDs needs, type and amount of services
4. Person chooses PCA service option and provider agency
5. Qualified Professional (QP) & Person/RP develop care plan
6. Lead agency issues service authorization
7. QP works with person to train PCA workers
8. PCA provides services per care plan
9. QP & person oversee and evaluate care
10. Person has annual assessment
Notes:
A lead agency is a __________________, __________________, or
__________________________.

Lead agencies do the following in regard to assessments:

1. Complete ________________________________.

2. Enter assessment into an authorization system.

3. Complete the annual ____________________________.

4. Reassess when there is a change in condition.
The components of an assessment are:

1. Determines need for ________________
2. Document ________________
3. Determine need for services
4. Identify options for services
5. Authorize service units (1 unit = ________________)
6. Refer to other resources
7. Educate about service options
PCA assessments

There are two types of assessments in Minnesota:

- **MnCHOICES**
  - Web-based tool
  - Includes all PCA components

- **Legacy**
  - Paper-based (form) available on eDocs [DHS-3244](#)
  - Will eventually be replaced by MnCHOICES

The information delivered by both assessments is the same, but it will look different depending on which system you are using.

MnCHOICES is a broader assessment tool, while the legacy assessment (named the Personal Care Assistance Assessment and Service Plan) specifically assesses for PCA service needs only.

MnCHOICES is a comprehensive, person-centered assessment and support planning tool.

Numerous documents are produced out of MnCHOICES, including a provider report – and it summarizes the person’s strengths, preferences and needs.

All of these documents will help you develop your care plan for PCA.
In unique situations, DHS will authorize a _____ day temporary start for immediate service or a 45-day temporary ___________ for a change in condition. Both can be done over the ______________. A face-to-face assessment will be needed to continue services beyond 45 days.
Responsible parties

Notes:
Who must have a responsible party (RP) and what do they do?

The following must have an RP

1. A ______________________

2. An adult with a court appointed ____________________________

3. A person who is unable to _________________________________

What do RPs do?

- Make choices regarding service options
- Plan and direct services
- Monitor services
- Assure person’s health and safety
- Sign forms, agreements and timesheets

Basically, RPs assume all the responsibilities as if they were the person receiving services.
Who can and cannot be an RP?

Someone can be an RP if they are . . .

• _____ years of age or older
• ____________ of a person needing care
• A licensed ________________
• Listed on the person’s service plan, service agreement, and PCA care plan

The need is identified at time of assessment.

Two people (for example, two parents) can be RPs for one person.

Someone cannot be an RP if they are . . .

• Person’s ______
• ____________________ for person
• Lead agency staff or contractors
• PCA provider ____________, ____________, or ____________.
PCA service models

Notes:
### PCA service models: Responsibilities

<table>
<thead>
<tr>
<th>Traditional PCA</th>
<th>PCA Choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________ is responsible for staffing and employment-related activities</td>
<td>__________ is responsible for all staffing and employment-related activities, including a backup plan if staff do not show up for work</td>
</tr>
<tr>
<td>Person* verifies and signs the timecard</td>
<td>Person* verifies and signs the timecard</td>
</tr>
<tr>
<td>Person* develops care plan</td>
<td>Person* develops care plan</td>
</tr>
<tr>
<td>Person* directs care</td>
<td>Person* directs care</td>
</tr>
<tr>
<td>Person* evaluates staff</td>
<td>Person* evaluates staff</td>
</tr>
<tr>
<td>n/a</td>
<td>Workers are part of __________ bargaining unit</td>
</tr>
</tbody>
</table>

*with help from the RP, if applicable

In both models, the person directs how he or she wants the services delivered.

In PCA Choice, the agency acts as a fiscal intermediary (FI).

Note: Just because the person brings a known worker to the agency, that doesn’t necessarily mean he or she is using PCA Choice.
Agencies must submit information to DHS every pay period on:

1.

2.

3.

4.

5.

6.

Agencies are responsible to remain ______________ with regard to SEIU, the contract and employees who are or are not union members.
Who makes the choice?

Assessor advises the person and RP (if applicable) of the options.

_______________ chooses his or her service option.

_______________ does not choose the option for the person.
## PCA service options

<table>
<thead>
<tr>
<th>Shared services</th>
<th>Flexible use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person agrees to share services from the same PCA with others</td>
<td>Person receives service hours which are flexibly divided into two ____ month periods</td>
</tr>
<tr>
<td>Must have the same ____________, time, ____________, and agency</td>
<td>Hours are used flexibly within each period to meet needs</td>
</tr>
<tr>
<td>Reimbursed at a different rate</td>
<td>No more than ____ percent of hours can be used in one period</td>
</tr>
</tbody>
</table>

A person cannot use the flexible use option if DHS or the lead agency denies or revokes it or if the person is on the Minnesota Restricted Recipient Program (MMRP). Agencies do not receive notifications from MMRP and must check eligibility monthly on MN–ITS. When you check monthly eligibility, if you find anyone on MRRP, fax the Technical Change Request (DHS 4074A) (PDF) (https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4074A-ENG) to the DHS Resource Center according to the number on the form.
Provider responsibility

Notes:
Determining home care ratings

Total service units = base units + extra time for:

1. Critical ADLs
2. Behaviors needing additional time
3. Complex health needs identified
As providers, you have many rules and laws to follow, such as federal and state labor and tax laws. These rules and laws are in addition to our program rules and requirements as an MHCP enrolled provider. All of those agencies have websites where you can find the answers to your questions.

Here is the link to the Minnesota Department of Labor & Industry where you can find information about Minnesota labor laws.

Agency responsibilities: enrollment

- Maintain MHCP provider enrollment
- Complete background studies
Agency responsibilities: financial

- Payroll functions for worker and QP
- MCHP billing and referral
- Pay PCAs 72.5% of MA revenue in wages and benefits
- Document marketing costs

Paying PCAs 72.5 percent of MA revenue means PCA worker revenue. It does not include the agency’s QP revenue.

Enrolled provider agencies are listed on mnhelp.info. Other than that, your agency is responsible for marketing. DHS does not refer MHCP recipients to agencies or provide lists of MHCP recipients to agencies.
Agency responsibilities: program integrity

Comply with DHS program integrity activities

Conduct and document service verifications

Notes:
Agency responsibilities: training

- Ensure completion of required training
- Train workers on data privacy, mandated reporting and agency policies
- Document QP and PCAs continue to meet requirements

Notes:
Provider responsibilities: recipients

Follow PCA policies and procedures

Maintain written agreements

Request timely reassessments

Written agreements must specify roles and responsibilities, including whether the provider agency is acting as the fiscal intermediary (FI) for participants in the Choice option.
<table>
<thead>
<tr>
<th>Traditional PCA</th>
<th>PCA Choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________ is responsible to find, hire, train, schedule and discharge staff</td>
<td>Be sole providing ___________________________ (FI) services to the person</td>
</tr>
<tr>
<td>Find all emergency and back-up ________</td>
<td>Comply with terms and conditions of __________ union contract</td>
</tr>
<tr>
<td>Monitor and evaluate staff</td>
<td>Person* evaluates staff</td>
</tr>
<tr>
<td>Assist person with care plan</td>
<td>Person* manages the care plan</td>
</tr>
<tr>
<td>Maintain written _______________ with the person</td>
<td>Obtain and maintain written _______________ with the person</td>
</tr>
</tbody>
</table>

*and RP where applicable
Care plan

Notes:
A care plan is a written description that identifies the PCA services that a person will receive based on the _____________. The person and RP (if applicable) develops the care plan with assistance from the _______________. The care plan should be developed within ___ days of the start of services and ________ at reassessment. It can be updated if there is a change in need or condition. Only _____________ services are included in the care plan. Agencies should use their own template for creating the care plan according to the required components. We will look at those components next.
Care plan components

<table>
<thead>
<tr>
<th>Basic information</th>
<th>Emergency procedures</th>
<th>Detailed descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Person’s contact information</td>
<td>• Emergency telephone numbers</td>
<td>• Person’s needs</td>
</tr>
<tr>
<td>• RP’s contact information</td>
<td>• Procedures for unexpected situations that require immediate action</td>
<td>• Services the worker will provide</td>
</tr>
<tr>
<td>• Start and end dates</td>
<td>• Procedures to identify and manage safety and vulnerability issues</td>
<td>• Special instructions or procedures</td>
</tr>
<tr>
<td>• Dated signatures of Person, RP and QP</td>
<td>• Individual abuse prevention plan*</td>
<td>• Monthly planned use of units</td>
</tr>
<tr>
<td></td>
<td>• Back-up staffing plan</td>
<td></td>
</tr>
</tbody>
</table>

Copies of the care plan must be kept at:

1.
2.
3.

The person and the PCA must know where the care plan is located.

For more information, see Minnesota Statutes 626.557, subd. 14, Abuse prevention plans (https://www.revisor.mn.gov/statutes/?id=626.557)
Notes:
1. Assist person with developing his or her _________.
2. Ensure ______ competency to provide PCA services needed.
3. Monitor and ___________ effectiveness of PCA services and staff.
4. Ensure person’s _______________ and safety needs are met.
5. Documents:
   a. PCA care plan and training
   b. Monthly use of PCA units
   c. Changes in condition
   d. Evaluations
   e. Reassessments
   f. All PCA communications
Who can be a QP?

A person who . . .

Clears a ____________________________

Works for a _________________________

Only delivers services within scope of practices

Completes required training

Is one of the following:

1. Registered nurse
2. Licensed social worker
3. Mental health professional
4. Qualified designated coordinator
Who cannot be a QP?

Someone who is the person’s . . .

1. Family foster care provider
2. PCA worker
3. Paid legal guardian
4. Parent or stepparent of minors
5. Responsible party
6. Spouse
What does a QP visit consist of?

During the QP visit, the QP will:

1. Help develop the ________________.
2. Orient, train and evaluate the ____________.
3. Oversee the delivery of PCA services.

QPs receive billable units just like PCAs. One unit consists of ____ minutes.

QP visits can also be combined with service verifications.
# QP visits

<table>
<thead>
<tr>
<th>Frequency or period</th>
<th>Visit type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial visit within 14 days</td>
<td>Evaluate the competency of the PCAs</td>
</tr>
<tr>
<td>Every 90 days for first year of traditional service</td>
<td>Evaluate the competency of the PCAs, provide additional training if needed and evaluate services</td>
</tr>
<tr>
<td>Every 120 days after first year of traditional service</td>
<td>Evaluate the competency of the PCAs, provide additional training if needed and evaluate services</td>
</tr>
<tr>
<td>Every 180 days for PCA Choice*</td>
<td>Evaluate service delivery</td>
</tr>
<tr>
<td>Every 60 days for 16-17 year old PCAs</td>
<td>Evaluate the competency of the PCAs, provide additional training if needed and evaluate services</td>
</tr>
<tr>
<td>Every 180 days at shared service location</td>
<td>Evaluate service delivery</td>
</tr>
</tbody>
</table>

*An initial visit is required for a QP to perform his or her duties, and for traditional PCA the required timeline is 14 days.

QP visits should be where ________________________________.

After ____ days, QPs may alternate in-person visits with _________ or _________ visits.

Lead agencies authorize 96 units per person per year for flexible use.
Carrying out the care plan

Notes:
Who can be a PCA?

A person who . . .

- Is employed by or affiliated with a PCA ______________.
- Has passed a ____________________.
- Has completed and passed required DHS online training.
- Is _____ years of age or older or;
- Is 16 or 17 years old and:
  - is employed by ____ agency only
  - complies with current _________________ laws
  - has his or her services supervised by QP every ____ days

Has enrolled with DHS as an MA provider. Workers will receive a Unique Minnesota Provider Identification (UMPI) number.
Who cannot be a PCA?

A person who is the . . .

- Recipient’s ______
- Parent or stepparent of recipient under age ____
- Legal ____________ of a minor recipient
- Paid legal guardian of an adult recipient
- Licensed foster provider
- Recipient of _____ services
- _____ of the same person
PCA responsibilities

- Complete training and orientation on person’s needs
- Provide services according to care plan
- Respond appropriately to person’s needs
- Receive feedback from person*, QP and PCA agency
- Maintain daily written record of time and activities
- Work no more than 275 hours per month

*With assistance from the RP if applicable
By law, all individual PCA workers are mandated reporters of maltreatment.

In addition to reporting child neglect or abuse, PCAs must report abuse and neglect of vulnerable adults. This includes all adult recipients of PCA services.

Vulnerable adult abuse includes:

1. Abuse
2. Neglect
3. Financial exploitation

**Call 911 if the person is in immediate danger.** Otherwise contact the Minnesota Adult Abuse Reporting Center at 844-880-1574.

Child abuse includes:

1. Physical or sexual abuse
2. Neglect
3. Mental injury
4. Maltreatment occurring currently or within the past three years
5. Prenatal exposure to controlled substances

**Call 911 if the child is in immediate danger.** Otherwise contact the local social service agency and follow the agency’s procedures for notification.

For more information, see the [Minnesota Adult Abuse Reporting Center (PDF)](http://edocs.dhs.state.mn.us/lfserver/Public/DHS-6303-ENG).
It is a worker’s responsibility to protect a person’s private data.

The worker should not share any information with anyone without the person’s ___________ consent.

Agencies must have policies and procedures about a worker’s access to a person’s private information.

Both the ________________ and the ________________ can be penalized or prosecuted for violations of a person’s privacy.

For more information, visit the Health Information Privacy webpage (http://www.hhs.gov/hipaa/index.html).
QPs must routinely visit recipients and help evaluate PCA services. Although in-person visits are required at certain intervals, some of these questions can be asked using the phone. Any changes or action needed can be followed up with an in-person visit. Some changes may require contact with the lead agency to request reassessment.
The provider agency makes a referral to the lead agency ____ days before the expiration of the current care plan to initiate the annual reassessment. This is included in the statute about PCA services. The lead agency completes the assessment and updates the care plan if necessary.

If needs change during the year it is possible to request a reassessment to address the changing needs. Again, the ______________ makes the referral if that is necessary.
Online resources

- **PCA Program Manual** ([http://www.dhs.state.mn.us/pca_home](http://www.dhs.state.mn.us/pca_home))
- **PCA Choice**
- **Shared Services** ([http://www.dhs.state.mn.us/dhs16_146085](http://www.dhs.state.mn.us/dhs16_146085))
- **PCA qualified professional requirements** ([http://www.dhs.state.mn.us/PCA_07](http://www.dhs.state.mn.us/PCA_07))
- **PCA care plans** ([http://www.dhs.state.mn.us/DHS16_160116](http://www.dhs.state.mn.us/DHS16_160116))
Online resources: PCA statutes

- Personal Care Assistance Program: [Minnesota Statutes, section 256B.0659](#)
- Authorization and Review of Home Care Services (criteria for retro authorization, temporary authorizations, PCA in foster care settings, PCA in combination with nursing, ventilator dependency): [Minnesota Statutes, section 256B.0652](#)
- Home Care Services (ventilator dependency, noncovered services, PCA Quality Assurance; recipient protections): [Minnesota Statutes, section 256B.0651](#)
- Subdivisions 19a and 19c (covered services, PCA services used outside the home, definition of QP): [Minnesota Statutes, section 256B.0625](#)
- PCA service verification requirement: [Minnesota Statutes, section 256B.0705](#)
Online resources: provider services

- [PCA provider agency enrolled provider page](https://mn.gov/dhs/partners-and-providers/policies-procedures/minnesota-health-care-programs/provider/types/hcbs/)
- MHCP Provider Call Center: 651-431-2700 or 800-366-5411 or [https://mn.gov/dhs/partners-and-providers/contact-us/minnesota-health-care-programs/providers/](https://mn.gov/dhs/partners-and-providers/contact-us/minnesota-health-care-programs/providers/)
Online Resources: MN Health Care Programs

- Alternative Care (http://mn.gov/dhs/people-we-serve/seniors/services/home-community/programs-and-services/alternative-care.jsp)
Online resources: Other

- **Vulnerable adult protection and elder abuse** ([http://mn.gov/dhs/people-we-serve/seniors/services/adult-protection/](http://mn.gov/dhs/people-we-serve/seniors/services/adult-protection/))
- **Vulnerable Adults Training** ([http://registrations.dhs.state.mn.us/WebManRpt/](http://registrations.dhs.state.mn.us/WebManRpt/))
Further learning resources

College of Direct Supports delivers competency-based online training designed to prepare direct support staff to best support those living with a disability.

Website:  http://directcourseonline.com/direct-support/

Examples of available courses include:

- Personal Care
- Disability Rights and Independent Living
- Being Prepared for an Emergency
- Roles and Responsibilities of the Home Care Provider
- Specific Condition Care such as Dementia, Diabetes, Cerebral Palsy

Course accessibility may be free for your agency, depending on a variety of factors. Call 866-416-6697 or email directcourse@elsevier.com to discuss costs.
Answer key

Page 7: Responsible party

Page 11: Authorization, care plan, care, agency, maintenance, sterile, homemaker services

Page 12: Assessment, authorization, care plan

Page 13: Wherever their normal life activities occur

Page 16: County, tribe, managed care organization (MCO), the initial assessment, reassessment

Page 17: Services, health status, 15 minutes

Page 19: 45, increase, phone

Page 21: Minor, guardian, direct their own care

Page 22: 18, parents, family foster parent, PCA, qualified professional (QP), owner, manager, staff

Page 24: Agency, person, SEIU

Page 25: Worker info, employment details, orientation packet, pay information, paid time off, union dues, neutral

Page 26: Person and RP (if applicable), agency

Page 27: 6, setting, PCA, 75

Page 36: Agency, fiscal intermediary, staff, SEIU, agreement, agreement

Page 38: Assessment, qualified professional (QP), 7, annually, covered or billable

Page 39: Person's home, provider agency, share service location

Page 41: Care plan, PCA, evaluate, health

Page 42: Background study, PCA provider agency

Page 43: Care plan, PCA, 15

Page 47: Provider agency, background study, DHS, 18, 1, child labor, 60
Page 48: Spouse, 18, guardian, PCA, responsible party (RP)
Page 51: Written, PCA, provider agency
Page 53: 60, provider agency