

Personal Care Services

Provider Certification Application Content Guidance

Application Format and Tips

To facilitate the certification process, all documents and required attachments submitted for certification and certification renewal must be:

- Letter-size (8.5 x 11 inch paper)
- In the order listed on the application form using the titles provided (no tabs needed)
- Unbound (no staples, plastic page protectors, notebook binders, or plastic spiral binding)

Only send the documents that are required for Medicaid certification. Do not send documents that were used to obtain grant funding, licenses, or other items. This will greatly increase the speed at which the application is evaluated.

Attachments

In this section, Senior and Disabilities Services (SDS) lists minimum content requirements for each attachment listed on the application. Do not submit entire Employee Handbooks or Personnel Policies unless sections of those documents are required attachments and they are clearly labeled using the same titles listed on the application forms. SDS recommends that policies be submitted as separate, individual documents.

Policy and procedures

While no format is specified, your agency must address all items listed for each policy, incorporating any requirements specified in regulations.

- A policy is a statement of your agency position regarding a subject, summarizing what is to be done and why, without indicating how it is to be done.
- A procedure is a step in the process of implementation of your agency policy that addresses who does what, when it is done, and how it is done.

For examples of policies and procedures, you may review the [SDS Policy and Procedures Manual](#) see SDS policy number 1-2 on Policies and Procedures Development, Attachment A, for writing guidelines used by SDS.

Provider Core Requirements

1. [Business License](#)
2. [Certificate of Insurance](#)
3. [Organizational Chart/Personnel List](#)
4. [Program Administrator](#)
5. [Quality Improvement Report \(Renewal Applications Only\)](#)

Operations Manual

1. [Admissions to Provider Services Policy and Procedure:](#)

2. [Background Check Policy and Procedure:](#)
3. [Backup Plans for PCAs Policy and Procedure: consumer-directed certified agency requirement](#)
4. [Critical Incident Reporting Policy and Procedure](#)
5. [Financial Accountability Policy and Procedure](#)
6. [ASAM Policy and Procedure](#)
7. [Quality Improvement Policy and Procedure](#)
8. [Restrictive Intervention Policy and Procedure](#)
9. [Termination and Transfer of Provider Services Policy and Procedure](#)
10. [Training Policy and Procedure](#)

Policy Assurance Form

The **CERT-37** must be signed and submitted with initial and renewal applications attesting the following policies and procedures are developed and implemented at the certified agency. These policies are not required to be submitted and must be available to SDS upon request:

1. Complaint Management Policy and Procedure
2. Confidentiality Policy and Procedure
3. Notice of Privacy Practices
4. Conflict of Interest Policy and Procedure
5. Emergency Response Policy and Procedure
6. Evaluation of Employees Policy and Procedure

Provider Core Requirements Guidance

1. [Business license](#)

- Review requirements for business licensing at <https://www.commerce.alaska.gov/web/cbpl/BusinessLicensing.aspx>
- Submit a copy of the agency's current State of Alaska business license. The business license must show the name of provider agency applying for certification to provide services.

2. [Certificate of Insurance](#)

- Review the *Personal Care Services Conditions of Participation* section on financial accountability for insurance standards.
 - o All providers must obtain and maintain insurance that includes coverage for comprehensive general liability.
 - o Workers' Compensation insurance coverage is required with very rare exception. For information regarding Workers' Compensation, go to <http://labor.alaska.gov/wc/>.
- Submit a copy of the Certificate of Insurance naming Senior and Disabilities Services as the certificate holder with the following address:

**Senior and Disabilities Services
Provider Certification & Compliance
1835 Bragaw St. Suite 350
Anchorage, AK 99508**

3. [Critical Incident Reporting \(CIR\) Training](#)

- Review the *Personal Care Services Conditions of Participation* section on training regarding CIR training.
- Program Administrator, at minimum, is required to complete CIR training through SDS Training Unit webinar at minimum every two years.
- Submit with the certification application a copy of the certificate of completion of the CIR training. To obtain the CIR training certificate:
 - Review the [SDS Training Schedules and Registration](#) webpage to determine when the Critical Incident Reporting Policy and Centralized Reporting training course is offered.
 - Register for and complete the training course.

4. [Organization Chart/Personnel list](#)

- For an example of the required format, see [Organization chart example](#) found on the approved forms page
- Submit a chart that shows, in a graphic format, how the agency is organized to provide services, specifying the following:
 - the title for each position or job and the name of the individual filling the position
 - if a position is not filled, indicate “vacant”
 - include all owners, employees, accounting and billing positions, volunteers, and contractors that provide or support services
 - lines of authority:
 - from owner or board of directors to management personnel
 - from management personnel to program administrator or individual responsible for the day-to-day management of each service for which you seek certification
 - from Program Administrator to direct care workers
- Submit a personnel list if the agency is too large to include all staff on the organization chart. Submit the list in alphabetical order by last name including job title next to personnel member name.

5. [Program Administrator](#)

- Review the *Conditions of Participation* for the services the agency plans to offer to determine the minimum work experience and educational requirements.
- Education
 - Review the *Personal Care Services Conditions of Participation* to determine the educational requirements for the Program Administrator.
 - Submit a completed CERT-04 and required documentation that shows the individual meets all of the educational requirements specified:
 - Acceptable documentation includes copies of transcripts (unofficial copies are acceptable), certification and licenses, or other evidence of required credentials.
- Work Experience
 - Documentation of relevant and qualifying work experience is preferred in resume format.
 - For an example of a resume format, see the [resume example](#). The following must be included:
 - list employer, positions, and dates of employment that will show the work experience

- required by the *Personal Care Service Conditions of Participation* for the service
- describe the duties of each position to highlight how those duties added to the knowledge base and skills necessary to manage the service
- list education and training
- Training Requirements
 - Critical Incident Reporting Training delivered by SDS
 - SDS PCS Program Administrator Training
 - PCS 40-Hour Training (Agency-based only if Program Administrator does not have qualifying credentials per [7 AAC 125.160](#))
- References
 - Program Administrators are required to provide contact information for three references as indicated on the [Notice of Appointment or Change Program Administrator](#) form. The references must:
 - include professional references from individuals who can verify the required work experience of the individual requesting to be Program Administrator. For example: former supervisor, previous clients or families, former co-workers, etc. Personal references from family members and friends are not acceptable.
 - be willing to be contacted via telephone during the hours of 8am-5pm Alaska time.

6. [Quality Improvement Report \(required at renewal only\)](#)

- Review the *Personal Care Services Conditions of Participation* section on quality management.
- Review and summarize all of the required quarterly and semiannual reports, quality management activities, assessments and corrective actions for each year of your certification period. The Quality Improvement Report must include the following minimum elements:
 - agency name, location, and dates covered by the report
 - A summary of the elements below must include the following areas:
 - written and oral complaints (data collection and analysis required quarterly)
 - critical incident reports, including reports of harm
 - analyses of medication errors
 - analyses of the use of restrictive interventions (data collection and analysis required quarterly)
 - consumer satisfaction
 - internal reviews of services rendered to determine that services were provided in accordance with recipient service level authorization and met recipient needs (data collection and analysis required semiannually)
 - an explanation if any topic above is not addressed in your report

Operations Manual Guidance

1. [Admissions to provider services](#)

- Submit policies and procedures that indicate:
 - how the agency will evaluate whether the services offered can meet the needs of the recipients.
 - how the agency will ensure that direct care workers have the capacity to provide services

and will follow the service plan

- how a service plan for each recipient will be developed and implemented
- how and when the agency will reevaluate the recipient to determine whether services delivered are meeting identified needs

2. **Background check policy and procedures**

- Review the Alaska Background Check Program information, including statutes and regulations at <http://dhss.alaska.gov/dhcs/Pages/cl/bgcheck/default.aspx>. It is the provider's responsibility to become familiar with all background check requirements and adhere to them.
- Submit policies and procedures that indicate:
 - which positions and roles at the agency are required to go through the background check process
 - the requirement for individuals to be associated to the agency in the background check program account and have at minimum a provisional clearance prior to working with clients and/or their PHI.
 - the procedures if an individual has a barring condition prior to employment or while employed with the agency.
 - how the agency will ensure that individuals who are not required to have background checks are supervised when they are present in the agency location
 - how the agency will monitor employees to ensure they continue to meet all requirements regarding background checks.
 - how the agency will ensure individuals requiring background checks are separated or terminated from the agency background check account when the individual is no longer employed or associated with the agency in accordance with [7 AAC 10.925](#).
 - that the agency will, in addition to ensuring valid criminal history checks, check the State of [Alaska Medicaid Exclusion](#) list and the [Federal exclusion](#) list.

3. **Backup Plans for PCAs (required for Consumer-Direct Agencies Only)**

- Review [7 AAC 125.130\(d\)\(2\)](#) and PCS Provider Conditions of Participation sections on backup plans for PCAs. Submit a written policy and procedure of the agency's plan when a consumer's chosen personal care assistant is unable to provide services. The plan must include at minimum the following elements:
 - how the agency will assist the consumer in identifying resources and allowing for choice of personal care assistants and backup personal care assistant(s)
 - where the agency documents each consumer's backup PCA to include the backup's personal contact information and agency they work for, if applicable
 - what the communication plan is between the agency and the consumer when the consumer is needing to use their documented backup PCA
 - how the agency monitors the health, safety and welfare of a consumer that is using a backup PCA that is an unpaid caregiver

4. **Critical Incident Reporting (CIR) policy and procedures**

- Review the *Personal Care Services Conditions of Participation* sections on critical incident reporting training and on quality management self-assessment, and [7 AAC 125.102](#) Critical

incident reporting. Submit policies and procedures that indicate:

- which agency employees are required to complete CIR training (must include, at minimum, all PCAs, supervisors and Program Administrators)
- how will the agency ensure that critical incident reports are correctly routed through Centralized Reporting within the required timeframe
- agency plan to ensure the Program Administrator and all agency supervisors of PCAs complete required SDS Critical Incident Reporting training every two years
- description of your agency's system that ensures all elements identified in [7 AAC 125.102](#) are addressed including:
 - identify which incidents are considered critical incidents according to SDS regulations
 - procedures for investigating, analyzing and tracking CIRs as a required element in your agency's Quality Improvement Report
 - Plan to ensure each personal care assistant is trained every two years in Critical Incident Reporting via completion of the SDS course or agency training

5. [Financial accountability policy and procedures](#)

- Review the *Personal Care Services Conditions of Participation* section on financial accountability for financial system standard and requirements for provider records. Submit policies and procedures that indicate:
 - how the agency will demonstrate the requirement to meet at least three months of operating expenses and sufficient funds to meet employee salaries and tax obligations timely, maintain current general liability and workers' compensation insurance, maintain physical office space and ensure service delivery to all recipients. The agency response must describe an easily accessible and legal source of funds.
 - how the agency's financial system will maintain, in accordance with 7 AAC 105.230 and [7 AAC 125.120](#), records that support claims for services;
 - how the agency will implement a financial system, based on generally accepted accounting principles, that ensures claims for payment are accurate;
 - how the agency will report to the Medicaid fiscal agent, and void or adjust, when identified, Medicaid monies that represent overpayments;
 - describe the agency monitoring process to ensure claims for reimbursement are for services rendered by a PCA that has a valid criminal history check or variance in place
 - how the agency will cooperate with all required audits, investigation and remediation activities
 - identify how the agency will report suspected Medicaid fraud, abuse, and waste

6. [Assistance with Self-Administration with Medication policy and procedures](#)

- Develop and submit to Senior and Disabilities Services a policy that includes
 - the methods the provider will use to teach personal care assistants that assistance with self-administration of medication includes only the activities described in [7 AAC 125.030 \(g\)](#);
 - training goals including the agency's policy on the frequency of training of personal care assistants;
 - plans and activities to enable trainees to achieve those goals;
 - methods of assessing trainee achievement of the training goals; and

- processes for evaluating the effectiveness of the training methods.
- how agency will manage medication errors including:
 - documenting and tracking medication errors
 - reporting any medication error that results in medical intervention as a critical incident
 - monitor medication errors and document appropriately for inclusion in the Quality Improvement Report
- To meet ASAM requirements, agencies can choose one of the following:
 - develop an ASAM training curriculum which includes all of the elements listed in [7 AAC 125.030 \(g\)](#), or
 - utilize the Alaska Training Cooperative (ATC) training to meet this requirement.

7. [Quality improvement policy and procedures](#)

- Review the *Personal Care Services Conditions of Participation* section on quality management. Submit policies and procedures that indicate:
 - what position(s) at the agency will be responsible for:
 - developing the quality improvement report
 - maintaining records to support the data in the report
 - how the agency will perform a self-assessment to include data collection and analysis of the minimum required elements to be included in Quality Improvement Report
 - the agency's procedure to support the service monitoring requirements as described in [7 AAC 125.130](#) and/or [7 AAC 125.170](#) required, at minimum, at least once every six months:
 - interviewing the recipient at their residence to evaluate whether services are sufficient to meet the recipient's needs
 - interviewing the recipient's PCA to evaluate the service records and timesheets prepared by the PCA
 - documentation in the recipient's record if the review concludes that the services provided are consistent with the recipient's service level authorization under [7 AAC 125.024](#)
 - submit amendments to SDS when the recipient's needs change sufficiently to warrant an amendment.
 - how the agency will:
 - analyze all collected data and information to identify problems and opportunities for improvement
 - remedy problems and act to improve services

8. [Restrictive interventions policy and procedures](#)

- Review [7 AAC 125.104](#) Use of restrictive interventions for intervention standards and definitions. Submit policies and procedures that indicate:
 - the circumstances under which the agency will allow use of restrictive intervention
 - the agency clearly prohibits the use of chemical restraints, seclusion and prone restraints
 - how the agency determines appropriate types of restrictive intervention for the population served
 - training in the use of restrictive intervention to include:
 - type of training
 - how and when training is conducted

- the requirements for documenting each intervention
- how the agency will manage and report the use of restrictive interventions including:
 - documenting and tracking the use of restrictive interventions by the agency in accordance with [7 AAC 125.104](#)
 - reporting any misuse of restrictive intervention, and any use that results in medical intervention, as a critical incident
 - monitoring and evaluating of the use of restrictive interventions for inclusion in the Quality Improvement Report

9. Termination of provider services policy and procedures

- Review the *Personal Care Services Conditions of Participation* section on termination of recipient services and 7 AAC 125.110. Submit policies and procedures that indicate:
 - how the agency will retain records that document recipient behavior and the steps taken to address the behavior to support a decision to terminate services
 - what the agency’s procedure is to support terminating a consumer-directed recipient because of lack of cognitive capacity to self-direct personal care services or a documented history of self-neglect as prescribed in [7 AAC 125.110\(c\)](#)
 - how the agency will ensure supervisory review before termination
 - how the agency will provide written notice of termination that:
 - is within the required timeframes
 - designates the reasons for the decision
 - specifies the process for recipients to appeal the decision
 - suggests other sources for the services being terminated
 - how the agency will provide written notice to:
 - the recipient and Senior and Disabilities Services
 - to the care coordinator, if applicable
 - the appropriate adult or child protection agency if termination will create a risk of harm to the recipient
 - if termination of services is due to agency closure, sale, or change or ownership, how the agency will manage termination of services with proper notification to recipients and SDS within the required timeframes

10. Training policy and procedures

- Review the *Personal Care Services Conditions of Participation Section B* and [7 AAC 125.090](#) for training standards;
- Review the following regulations and statutes regarding training requirements:
 - [7 AAC 125.102](#), Critical incident reporting,
 - [7 AAC 125.090](#), CPR and First Aid Training
 - [7 AAC 125.030](#), Assistance with self- administration of medication
 - [7 AAC 125.104](#), Use of restrictive intervention, for training standards;
 - [AS 47.17.020](#), Child protection
 - [AS 47.24.010](#), Protection of vulnerable adults reporting requirements.
- Submit policies and procedures that indicate:
 - at what point in time and how frequently the agency will train employees in compliance

with the training standards established in the *'Personal Care Services Conditions of Participation*

- how the agency will ensure that employees have documented training in their employee file in the following required areas to be in compliance:
 - First Aid/CPR
 - Critical Incident Reporting
 - Mandatory Reporting
 - Orientation and training
 - Restrictive Interventions
 - Assistance with self-administration of medication (ASAM) for all individuals who provide services to recipients
- how the agency will monitor training to ensure that
 - staff are informed of the agency's emergency response plan
 - staff skills necessary to work with recipients are upgraded as needed