



Consumer Directed Employer (CDE) Services

Managing Employer Handbook

866.214.9899 | ConsumerDirectWA.com

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Introduction

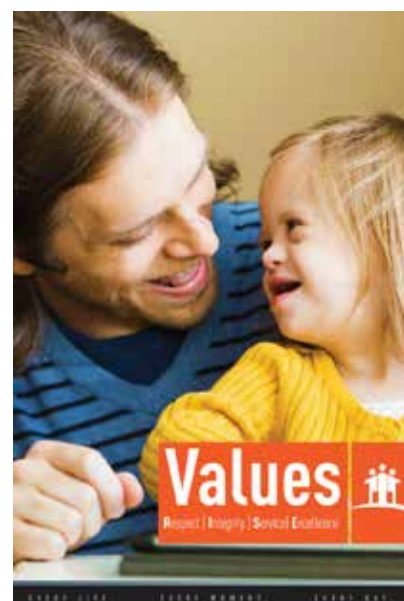
Welcome to Consumer Direct Care Network Washington (CDWA). We excited to support you in your role as a managing employer of Individual Providers (IP). Our foundation is our Mission, Vision and Values.



To provide care and support for people in their homes and communities.



To help people live the life they want.



Respect | Integrity | Service | Excellence

This handbook will assist you directing your services. You/your Authorized Representative are expected to read the handbook. Please ask us questions if you do not understand something.

This handbook replaces all earlier versions. CDWA has the right to revise or update any policy, procedure, or information in this handbook at any time. You will be notified of any changes. The most recent version of the handbook can always be found at www.ConsumerDirectWA.com

A printed copy of this handbook may be requested by contacting CDWA.

FREQUENTLY USED TERMS

Administrative hold:

Period of time that you are not able to provide paid support to your Client because you are out of compliance with one or more employment requirement.

Authorized Representative:

An individual designated to represent the client when they apply for or receive benefits with DSHS and to assist with the responsibilities and functions of the managing employer for Individual Providers.

Client:

An individual authorized to receive in home personal care or respite services from DSHS and is responsible for the functions of the managing employer for Individual Providers. For the purpose of this manual the use of Client includes an Authorized Representative.

Client Responsibility:

Some Clients are required by Medicaid rule to pay a monthly amount towards the cost of their Medicaid services depending on their income. The monthly amount is determined by DSHS.

Collective Bargaining Agreement (CBA):

The agreement entered into between the State (or any successor organization) and the Service Employees International Union 775 (SEIU 775) (or any successor organization) regarding IP wages, benefits, and working conditions.

Consumer Directed Employer (CDE):

The entity contracted to serve as the legal employer for Individual Providers of in-home personal care and respite in Washington state for the purposes of performing administrative and employer functions.

Consumer Direct Care Network Washington (CDWA):

The legal employer of Individual Providers for purposes of performing administrative and employer functions.

Electronic Visit Verification (EVV):

A method used to document and verify home care visits for submission of claims under the mandated enacted by the 21st Century Cures Act.

Individual Provider:

CDWA employees authorized to provide personal care or respite caregiving support for individuals authorized to receive in-home services from DSHS.

Public Benefits Specialist (also known as Financial Worker):

Individual who conducts interviews to determine and/or re-determine eligibility for public benefit programs. Processes changes in Client circumstances, implements Federal and State regulations and determines the effect on the continuing eligibility of Clients.

AN EXPLANATION OF CONSUMER DIRECTED SERVICES

The State of Washington Department of Social and Health Services (DSHS) established a contract with CDWA to become the Consumer Directed Employer (CDE).

WHAT IS CO-EMPLOYMENT

Co-employment is an arrangement under which CDWA and you share employment responsibilities.

We are the legal employer of IPs. You are the managing employer for any IP that works with you. The Roles and Responsibilities section of this handbook provides additional information on what you will do as the managing employer and our role as the legal employer.

OTHER KEY RESOURCES

This handbook and each of the following resources play a key role in your success as a managing employer. These resources will be referenced throughout the handbook.

- **Managing Employer Quick Start Guide** – The Quick Start Guide was in your CDWA welcome letter. It is a summary of CDE program rules and your responsibilities.
- **CDWA Website** – You can access resources and informational materials regarding CDWA and the CDE program www.ConsumerDirectWA.com
- **DirectMyCare portal** – The portal is:
 - Your notification hub for important reminders and notices
 - Where you will assign hours and tasks to IPs
 - Where you can monitor monthly hours

You can access the DirectMyCare portal through our website. Instructional videos on how to register and use the portal are on our website. www.ConsumerDirectWA.com

Communicating with CDWA



OUR CUSTOMER SERVICE HOURS

Monday – Friday - 7:00 AM to 7:00 PM Pacific Time

Saturday - 8:00 AM to 1:00 PM Pacific Time

FOR DEAF AND HEARING IMPAIRED

 **For deaf and hearing impaired:** 877.398.7969

OUR CONTACT INFORMATION



Email: InfoCDWA@ConsumerDirectCare.com



Toll-Free Phone Number: 866.214.9899

HELP IN OTHER LANGUAGES:

Arabic العربية	866.215.6909	Cantonese 粵語	866.216.3065	Khmer អង់គ្លេស	866.215.7610	Korean 한국어	866.215.6907
Lao ລາວ	866.215.8044	Mandarin 普通话	866.216.1752	Russian русский	866.215.4069	Somali Soomaali	866.215.5669
Spanish Español	866.215.0131	Tagalog Tagalog	866.215.3817	Ukrainian Українська	866.215.4674	Vietnamese tiếng Việt	866.215.2762

MAIL

If you have to mail something to CDWA, please only send mail to our Federal Way office. Our other office locations do not process mail.

Our office locations are open:

Monday – Friday 8am – 5pm. Visitors are welcome by appointment only.

OFFICE LOCATIONS



Federal Way

3450 S. 344th Way, Suite 200
Federal Way, WA 98001



Lacey

612 Woodland Square Loop SE, Suite 202
Olympia, WA 98503



Spokane

Rock Pointe III
1330 N. Washington Street, Suite 5200
Spokane WA 99201

EMAIL

CDWA may send you email reminders and other important information.

- The emails will never include your confidential information.
 - For example:
 - ♦ Name
 - ♦ Date of birth
 - ♦ ProviderOne ID
- We use ZixCorp secure email to communicate sensitive information. Refer to the Zix mail user guide for more information. www.ConsumerDirectWA.com/Secure-Email-Instructions
- A genuine email from CDWA will have our company name in the domain name, **@ConsumerDirectCare.com**.
- All CDWA staff are required to use the same format for email signatures. An example of the CDWA signature will be in the following format:

Name | Job Title

Consumer Direct Care Network | Department, State, or Line of Service (as appropriate)

Office Address

City, State Zip

P: xxx.xxx.xxxx or Ext. xxx

www.consumerdirectcare.com or your state's Consumer Direct website

EVERY LIFE. EVERY MOMENT. EVERY DAY.

- An email is not from CDWA if it doesn't end with a CDWA signature as indicated above.
- If you have a concern or are unsure CDWA sent the email, please contact us.
- You may contact us by phone or by emailing InfoCDWA@ConsumerDirectCare.com
- Do not use the contact information provided in an email if you suspect it is not actually from CDWA.

WHO TO CONTACT WITH QUESTIONS

CDWA has created a Who to Call resource with common topics you or your IPs may have questions about. The Who to Call resource is also located on our website. www.ConsumerDirectWA.com/Who-to-Call



Roles and Responsibilities of CDWA

CDWA follows all applicable federal, state, and local laws. This includes state Medicaid regulations, policies, and procedures.

We are responsible for the Employer of Record functions for federal and state hiring requirements, payroll and tax withholdings. We will:

- Perform state and Federal background checks for all potential IPs
- Perform renewal background checks on all active IPs every 2 years
- Keep an electronic IP personnel file with employment documents and employment information
- Provide IPs employment specific orientation training
- Provide IPs reminders of training and background check renewal dates
- Process time submitted by IPs
- Withhold and deposit Federal income tax, if applicable
- Withhold and deposit Social Security and Medicare tax (FICA) and Federal and state unemployment tax (FUTA/SUTA) payments, if applicable
- Provide Workers' Compensation coverage
- Make sure all Federal and State Department of Labor laws are followed
- Maintain compliance with the collective bargaining agreement
- Direct deposit pay into IP's bank account or onto a pay card
- Educate the Clients in the skills needed to act as managing employer and to self-direct their care (e.g., how to recruit, interview, direct, manage and dismiss IPs)
- Support Clients in finding available IPs to work
- Accept responsibility for billing Medicaid for services provided to the Client
- Collect Client Responsibility directly from the Client
- Provide information to Case Managers that impact Client care
- File reports as required by contract, state and federal laws

BACKGROUND CHECKS

CDWA is responsible for completing background checks on IPs.

Washington State Background Check and Fingerprint Check

IPs are required to pass:

- Washington State background check, also known as a name and date of birth check
- FBI fingerprint background check
- Mandatory State/Federal Exclusion checks

IPs can't move forward in the hiring process until their fingerprint background check appointment has been scheduled.

CDWA MUST receive an IP's fingerprint results within 120-days of the day they scheduled their fingerprints. If not received in that timeframe, IPs will be placed on administrative hold and will not be able to work for you past that 120-day deadline.

Background Check Results

Washington State law does not allow CDWA to hire or pay IPs if they have convictions, pending charges or negative actions that are disqualifying.

- A list of disqualifying convictions and pending charges can be found in WAC-388-113-0020. Examples of possible disqualifying convictions or pending charges include:
 - Crimes against a child or vulnerable adult
 - Assault 1, 2, 3 or 4
 - Theft 1 or Robbery
- Disqualifying negative actions may include:
 - A final finding of abuse, neglect, financial exploitation, or mistreatment of a minor or vulnerable adult by the department, court of law, Department of Health or other disciplining authority. Additional information about negative actions can be found in Chapter 388-71 and 388-825 WAC.
- If an IP has other convictions or pending charges that are not automatically disqualifying, CDWA may determine the IP cannot have unsupervised access to minors or vulnerable adults. If this occurs CDWA can choose not to hire an IP or can terminate their employment. We will notify you if this occurs.

Background Check Renewal

IPs are required to:

- Complete the Washington State name and date of birth background check at least every two years as a condition of their continued employment.
 - The department may request the state and fingerprint check at any other time.
 - CDWA will notify an IP prior to their renewal date.
 - An IP will be placed on administrative hold if they don't renew their background prior to the expiration date.
 - An IP can't work if they are on administrative hold.
 - ◆ CDWA will notify you if this occurs.

Exclusion Checks

CDWA is required to run these checks:

- Office of Inspector General (OIG)
- System for Award Management (SAM)
- Social Security Death Master File (SSDMF)
- The exclusion checks are run as part of the hiring process.
- If an IP appears on one of the checks, CDWA may not be able to hire the IP.
- The checks are also run regularly by DSHS.
- If DSHS informs CDWA that an IP appears on one of the checks, CDWA may be required to terminate their employment.
- We will notify you if this occurs.

Character, Competency and Suitability (CC&S)

CDWA may use a CC&S process to determine if an IP can have unsupervised access to minors or vulnerable adults.

The CC&S process can be initiated because of a review required background check result or a reported concern of their ability to provide services to you.

Examples of why CDWA may determine an IP isn't eligible to work.

- Alcohol or drug misuse
- Endangering a Client's health and safety
- Convictions or pending charges that are not disqualifying
- Being unable or unwilling provide adequate care to a Client

Sharing Background Check Results

- CDWA will notify you if your IP has a review required background check or other indication for a CC&S review.
- You can request your IP provide you a copy of their Washington State record of arrests and prosecutions.
 - If the IP doesn't provide you a copy, the IP will be unable to work for you.

EMPLOYMENT VERIFICATIONS

If an IP asks for a verification of employment you should tell them to contact us. We will process the request.

IP Termination

As the Client, you may dismiss an IP from working for you. An IP can continue working for other Clients as long as they are still employed by CDWA and meet all requirements. If CDWA terminates an IP, they are no longer able to serve any Clients.

Only CDWA can terminate IPs. Reasons IPs might be terminated include:

- Background checks results
- Fraud
- Client abuse, neglect or exploitation
- No hours assigned in the last 12 months
 - An IP may only reapply if they were terminated because they haven't been assigned hours in the last 12 months.

CDWA will notify you if an IP who has worked for you has been terminated. You can no longer schedule an IP if they have been terminated. If in doubt, contact CDWA.

UNEMPLOYMENT

An IP can apply for unemployment benefits through the Employment Security Department (ESD) if they are no longer an IP or have an interruption in employment. CDWA does not determine eligibility for unemployment. An IP should identify CDWA as their employer. ESD will contact us for information regarding the IP's work history and wages. If an IP has questions about unemployment, direct them to CDWA.



Roles and Responsibilities of the Client/Authorized Representative

YOUR RIGHTS

You have the right to:

- Be treated with dignity, respect and without discrimination
- Not be abused, neglected, financially exploited, abandoned
- Have your property treated with respect
- Refuse service
- Have your information kept private within the limits of the laws and DSHS regulations
- Make a complaint without fear of harm
- Assign hours and determine the schedule of IPs
- Choose, dismiss, or change a qualified IP

PLAN OF CARE

- You will create a Plan of Care with your Case Manager.
- You should review your Plan of Care with an IP before they start working with you.
- We will also make your Plan of Care available to the IP.

IP RECRUITING AND INTERVIEWING

Recruiting

You are responsible for recruiting, interviewing and referring IPs to CDWA. There are many ways to recruit IPs.

- Carina
 - Is a free self-service website created to help IPs and Clients find each other.
 - Carina works in partnership with SEIU 775 Benefits Group and DSHS to provide this service.
 - For more information visit www.Carina.org/HomeCare-Options.
 - You can contact CDWA for assistance with Carina
- Friends, family, neighbors and area businesses
- Colleges, universities and hospitals
- Community bulletin boards
- Internet job sites

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Interviewing

Once you have identified a potential IP that you believe may be a match, you should interview the IP. As the managing employer you must follow laws about discrimination. Discrimination is against the law. You can't treat an IP differently because of their:

- Race
- Color
- Religion
- Country of Origin
- Age
- Gender
- Sexual Orientation
- Disability/Handicap
- Marital Status
- Pregnancy

Examples of things that you cannot ask an IP during an interview:

- Children, number of, names, ages, childcare arrangements or marital status.
- General questions about disabilities or physical limitations. It is better to ask if they can perform specific tasks.
- Being single, married, divorced, separated, widowed.
- Questions concerning pregnancy, birth control, children, or future childbearing plans.
- Direct or indirect questions which would indicate an applicant's ancestry, national origin, race or color.
- Any questions that, if answered, would reveal religious affiliation, denomination, customs, holidays observed, or name of minister.
- Questions about age, except to ask if the person is of legal age to work (18).

Examples of interview questions you can ask:

- Do you have experience with this type of work? If yes, for how long?
- Are you available to work the days and times that I need you?
- Why do you think you will be successful as an Individual Provider?
- Do you have experience with other Clients who have similar needs?
- Have you ever experienced conflict on the job before? If so, how did you handle it?
- What would you do if you learned another Individual Provider wasn't behaving properly?

IP REFERRAL AND HIRING

- You will refer IPs to CDWA to be hired. <https://cdcn.wd1.myworkdayjobs.com/External>
- IPs need to complete their hiring documents. For example: W-4 and I-9.
 - You or someone you designate will electronically complete Section 2 of your IP's I-9 form using DocuSign. You can call CDWA for assistance.
 - ◆ An I-9 form is a document used to verify the identity and employment authorization of individuals hired for employment in the United States.
- IPs are required to go through paid CDWA employment orientation.
- You can't schedule an IP to work until we have issued an Okay to Work notification.

IP CLIENT-SPECIFIC ORIENTATION

You are responsible for orientating IPs on any specific expectations. It is important you discuss these with an IP on their first day of work. The topics covered should include:

1. Tour of your space. This may include:

- Where supplies and equipment are located
- Living space that is off-limits
- Emergency exits
- Location of fire extinguisher

2. Overview of your Plan of Care. This includes information about your disability or care needs, such as:

- Do you have trouble falling asleep?
- Are you sensitive to certain smells?
- Are you a morning person?

3. An explanation and demonstration of the tasks that need to be done, which may include:

- Overview of job duties
- Job description
- Hourly schedule
- Observation of an experienced worker or family member completing tasks

4. Safety and Security

- Review proper lifting procedures to avoid injury to either you or an IP
- Explain safety guidelines for any disability-related equipment an IP will be expected to use
- Explain household appliances or equipment an IP will be expected to use
- Discuss your Back-up Plan for when the IP is unable to work
- Share how to enter the home, for example: knocking, key, etc.

5. Expectations - Some examples are:

- Rules about the use of your car, the washing machine, computer/printer and eating your food should be discussed
- Use of cell phones and your landline phone during work hours. (Your disapproval of cell phone use during a shift does not exempt an IP from using the EVV app or IVR as required.)
- Acceptable clothing in the workplace
- Days of the week and time of day assistance is needed

SCHEDULING

You are responsible for setting work schedules based on your approved hours and tasks. You and the IP will work together on any schedule changes, not CDWA. An IP should notify you if they are unable to work.

Both you and an IP are responsible for monitoring hours usage to ensure you are not exceeding your monthly approved hours and the IP's individual Work Week Limit.

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Assignment of Hours and Changes

You are responsible for assigning hours to IPs. Assignment of hours must be done in the DirectMyCare portal. You can also call CDWA for help. If you have only one IP, CDWA will automatically assign hours and tasks up to that IP's individual Work Week Limit.

Nurse Delegation Tasks

If you require nursing tasks, you must consider if your IP(s) are allowed to complete the tasks.

Under Washington State law, the Nurse Delegation Program allows only specially trained individuals to perform certain tasks for in-home care Clients that are normally performed by licensed registered nurses (RNs).

You can only assign nurse delegated tasks to IPs who have completed designated training and are credentialed to complete delegated tasks. If you are unsure if your IP has required training, you can contact CDWA.

Only an RN licensed in Washington State can delegate a task to an IP, IF the IP is qualified to perform the tasks. No one else is allowed to do it!

Here are some examples of Nurse Delegated tasks:

- Administration of medications (see exceptions below)
- Urinary catheterization using clean technique
- Insulin injection (must successfully complete DSHS diabetes training first)
- Non-sterile dressing changes
- Ostomy care in established and healed condition
- Blood glucose monitoring
- Gastrostomy feedings in established and healed condition

The following tasks **CANNOT** be delegated and must only be performed by a RN!

- Injections, other than insulin
- Sterile procedures
- Maintenance of central lines

In addition, tasks that require nursing judgment should not be delegated. Examples of tasks that require nursing judgment include:

- Nursing assessment
- Nursing diagnosis
- Care planning

If you require Nurse Delegated tasks, please contact your Case Manager.

Permanent and Temporary Work Week Limits (WWL)

When scheduling IPs you must discuss an IP's WWL with the IP.

Work Week Limit Facts

- A WWL is the total number of service hours an IP can provide in a work week.
- A work week is Sunday to Saturday.
- An IP WWL is 40 service hours per week unless the IP has been assigned a higher WWL permanent or temporary WWL. CDWA must approve a temporary WWL.
- Unless approved by CDWA an IP may not work more hours than their assigned WWL.
- Violation of assigned WWL will result in IP corrective action.

Service hours count toward an IP's WWL. Service hours are time spent providing:

- Personal care
- Relief care
- Skills acquisition training
- Respite services

Travel time, administrative time and required IP training time do not contribute toward WWLs.

WWL that exceed 40 hours per week can be temporary or permanent.

- CDWA may approve a temporary increase due to temporary client health and safety needs.
- CDWA will honor permanent WWL more than 40 hours per week in accordance with RCW 74.39A.525(4)(a).

Temporary Work Week Limit Increases

CDWA may temporarily approve an IP to work more than their individual Standard or Permanent WWL. Temporary WWL increases may be approved to address situations such as:

- Workforce shortages
- Your health and safety needs
- Avoiding institutionalization placement

If you would like to request an increase to your IPs Work Week Limit, contact CDWA. CDWA will evaluate and respond to requests for a temporary WWL increase.

Coordinating Work Week Limit with Assigned Hours

- IPs must not work more than their assigned WWL.
- IPs can't work more hours than are assigned to each Client in a month.
- An IP must balance the number of hours assigned by each Client they provide care with the WWL assigned to them.
- An IP can compare their WWL to the service time they have submitted on the DirectMyCare Portal.

Work Week Limit flexibility for IPs with a Work Week Limit of 40.25 Hours and Above

Unless approved by CDWA, an IP may not work more hours than their assigned WWL.

Under specific circumstances, you may be able to move an IP's weekly work hours between weeks in a single month if all four of the following are true:

1. There is a specific need for more hours in a given week
2. The IP will not work more than your monthly hours
3. The use of more service hours in one week will not cause you to go without essential care in the other weeks of the month
4. The IP can't work more overtime in the month than they would have if they had worked the hours evenly during the month

If you are in the New Freedom or Veteran Directed Home Services, you may be eligible to purchase hours more than an IP's WWL. For further information, you will need to contact your care consultant.

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Overtime

An IP will be paid overtime at one and half times an IP's rate of pay for time worked more than 40 hours per week.

Paid Time Off (PTO)

An IP is allowed to take (PTO). They can use PTO however they choose. An IP will request and coordinate PTO with you, not CDWA.

Leave of Absence

An IP may be eligible for a leave of absence. A leave of absence is different than Paid Time Off (PTO). An IP may take a leave of absence for a specific circumstance or situation. PTO can be used as the IP chooses.

An IP should communicate with you and coordinate the dates they will be on leave. An IP will request a leave of absence through CDWA. Our Human Resources team will support the IP throughout their leave.

Backup Plan

You are responsible for creating a backup plan with your Case Manager.

- The plan should be used if an IP cannot work regularly scheduled hours.
- We are not responsible for providing you a back-up IP and do not have a pool of IPs.
- It is your responsibility to review your back-up plan with IPs.
- Unapproved overtime is not a viable backup plan.
- You may find backup providers on the Carina system.
 - You can contact CDWA for assistance using Carina.

MILEAGE & TRAVEL TIME

You may have mileage authorized and can assign mileage to IPs.

Mileage

- Mileage can only be assigned to IPs who have a valid and current driver's license and proof of current insurance.
- Mileage can be used for service-related travel up to your authorized limit.
- An IP can't claim mileage for driving from their home to begin a shift or back home at the end of a shift.
- An IP can claim mileage if they are driving from a shift with one Client to a shift with another Client. They can also claim mileage if they are going from a shift with you to a training location.
- Mileage for driving between Clients or to a training location will not come out of your authorization.

Travel time

- An IP may be paid for travel from one Client's home to another Client's home between work shifts and direct travel between a Client's home and training facility.
- Travel time is not authorized to exceed 60 minutes between eligible work sites or 7 hours in a work week.

Proof of Insurance

- Proof of current insurance coverage that meets the State's minimum guidelines for auto insurance coverage must be submitted to CDWA
- Either the IP or you can carry this coverage
- If you choose to let an IP drive your vehicle, you assume liability and are responsible for ensuring insurance coverage.
- CDWA does not insure an IP while driving your vehicle.

An IP must report if their driver's license has been suspended or revoked.

If you or the IP are unable to maintain insurance, it must be reported to CDWA immediately. We may request updated copies of current proof of insurance at any time.

PERFORMANCE FEEDBACK

Providing feedback lets an IP know how they are doing.

- You are responsible for providing an IP feedback on their performance.
- Feedback should be both positive and useful if there are issues. Coaching an IP on how to do something differently may be needed.
- You are encouraged to provide IPs verbal and written feedback.
- It may be helpful to document when issues occur. Include the date, a description of the issue and summarize your conversation with the IP.

DISMISSING AN IP

You have the right to dismiss an IP. Examples of why you may dismiss an IP are:

- Not showing up for work
- Being late
- They are not providing an appropriate level of care
- They put your health or safety at risk

You must notify CDWA immediately if you dismiss an IP.

Only CDWA can determine if an IP's employment with CDWA is terminated.

YOUR CONTACT INFORMATION

It is important to keep your contact (address, phone, email) information current. If there are changes, you must update the information with your Public Benefits Specialist. CDWA will receive notice of changes.

PROPRIETARY AND OTHER CONFIDENTIAL INFORMATION

You cannot share CDWA's information to any other organization or individual. This includes all documents, details of procedures, other materials, or other information (such as information from the computer). All information created by CDWA is confidential and owned by CDWA.

CLIENT RESPONSIBILITY

DSHS may determine you have Client Responsibility, also known as Client Participation. If you have questions regarding your Client Responsibility amount you should contact DSHS.

Terms of Client Responsibility:

- You will pay CDWA for your Client Responsibility amount
- You will not pay your Client Responsibility amount to an IP
- CDWA will pay an IP for all authorized hours the IP works, and submits time to us
- Can be found in Appendix A

The Terms of Client Responsibility were included in your CDWA welcome letter. You can also find a copy on our website - www.ConsumerDirectWA.com/client-resources/

If you have questions on how to pay your Client Responsibility to CDWA refer to the Terms of Client Responsibility. You can also call CDWA.

WORKPLACE SAFETY

You must provide a safe workplace for IPs. IPs have been trained to report any unsafe conditions, equipment or practices immediately to you and CDWA. Hazardous conditions include but are not limited to:

- Threatening, uncontrolled animals
- The manufacture, sale, or use of illegal drugs
- The presence of hazardous materials

Home Safety Best Practices

You should review your home for potential safety issues. Take action to address possible issues. You should also share information with and train your IP. Examples of safety precautions:

- Review proper lifting procedures to avoid injury to either you or an IP.
- Explain safety guidelines for any disability-related equipment an IP will be expected to use.
- Explain household appliances or equipment an IP will be expected to use.
- Identify where to properly dispose of sharps (needles, etc.).
- Ensure that walkways are clear and free of trip hazards (Electrical cords are secure and not crossing a hallway).
- Ensure a fire extinguisher and flashlight are available.
- Discuss what happens if there is a fire.
 - Prior to any emergency, call your fire and police departments on their non-emergency numbers to let them know that a vulnerable person lives in the home.
- Discuss any concerns about a pet in your home.

Access to Personal Protective Equipment (PPE)

You must provide gloves to IPs for hands-on personal care tasks.

- You can get up to 200 gloves a month from My Apple Health (Medicaid) benefit. You may be able to get more if it is medically necessary.
- If you have Apple Health (Medicaid) managed care, you may contact your health plan or doctor to order gloves or go to <https://www.hca.wa.gov/assets/billers-and-providers/13-010.pdf>.
- If you have Apple Health coverage that is not through managed care you may:
 - Call a medical equipment supplier from the list on the Health Care Authority website at: https://www.hca.wa.gov/assets/billers-and-providers/ffs_providers_non_sterile_gloves.pdf; or
 - Call your doctor; or
 - Call the Medical Service Center at **1.800.562.3022**. This number is located on the back of your blue Medical Service Card. For more information about getting gloves visit the Health Care Authority website at <http://www.hca.wa.gov/medicaid/dme/Pages/default.aspx>

IPs may also request PPE by completing a request in Workday. You can provide this link, or the IP may contact CDWA. www.ConsumerDirectWA.com/Request-PPE

Workplace Injury Reporting

If an IP is injured or gets an illness while clocked in for a shift:

- The IP should get medical help.
- If the injury is serious and life-threatening:
 - Someone should call 911.
 - If the injury needs medical treatment (but is not life-threatening), the IP should go to an urgent-care clinic or doctor's office.
 - If the IP can't get to a clinic or a doctor's office, the IP should go to the emergency room.
- The injury must be reported to CDWA immediately, or as soon as possible by calling **877.532.8542**
- The IP must file a Report of Injury with CDWA.
- The IP should tell you before they leave work.

Failure to comply with directives from CDWA could result in IP corrective action.

Injury and Serious Incident

If you have a serious accident or medical emergency that affects your health or safety, call your doctor or 911. You should instruct IPs to call your doctor or 911 if you have an accident or medical emergency. CDWA does not provide emergency care or medical services.

You or the IP should report the incident to your Case Manager right away.

Violence in the Workplace

Verbal threats, threatening behavior, bullying and acts of violence are not allowed.

- IPs are trained to report violent behavior to CDWA and the appropriate authorities immediately.
- If you witness an IP threatening, bullying or acting aggressively towards you or someone else, you should immediately report their behavior to CDWA.
- The police may be called if the situation is dangerous.
- If an IP is exhibiting these behaviors, you can dismiss them from working with you.
- CDWA may choose to terminate an IP's employment due to inappropriate behavior.
- CDWA may discharge you from receiving CDWA services if you threaten, bully, or act aggressively toward an IP.

Harassment, Abuse, and Discrimination (HAD) Prevention and Reporting

A copy of the IP Health and Safety Policy OP-WA-030 is Appendix B of this handbook.

As the Consumer Direct Employer, CDWA will ensure proper safeguards are in place to protect IPs and reduce instances of harassment, discrimination and abuse that IPs may experience in the workplace. This includes policies and procedures, training IPs and Clients, and putting in place processes for reporting and monitoring these incidents.

Harassment, sexual harassment, abuse or discrimination toward an IP by you or someone in your household is prohibited.

Prohibited behaviors include:

- **Abusive conduct/Workplace violence:** Actions of violence include but are not limited to: verbal or physical harassment or abuse, attempts at intimidation, sabotage, destruction of property, menacing gestures, possession of weapons, stalking, coercion, pushing or shoving, horseplay, or other hostile, aggressive, harmful and destructive actions
- **Discrimination:** Discriminating in the provision of employment opportunities, benefits or privileges, creating discriminatory work conditions, or using discriminatory evaluation standards in employment if the basis of that discriminatory treatment is, in whole or in part, the person's race, color, national origin, age, religion, disability status, gender, sexual orientation, gender identity, genetic information, marital status, veteran status or any other characteristic protected by law.
- **Harassment:** Unwelcome verbal, visual or physical conduct creating an intimidating, offensive, or hostile environment that interferes with work performance. Harassment can be verbal (including slurs, jokes, insults, gestures, or teasing), graphic (including offensive posters, symbols, cartoons, drawings, computer displays, e-mails, or social media posts) or physical conduct (including physically threatening another, blocking someone's way, etc.) that degrades or shows hostility or aversion towards an individual. Such conduct violates this policy, even if it is not unlawful.

- **Sexual Harassment:** Unwanted and offensive sexual behavior targeting an individual(s). Sexual harassment can include all the above actions, as well as other unwelcome conduct, such as unwelcome or unsolicited sexual advances, requests for sexual favors, and other verbal, visual or physical conduct of a sexual nature.

You are responsible for understanding and safeguarding IPs from these behaviors. IPs are encouraged to report inappropriate behavior to CDWA.

Discrimination/Harassment Reporting Procedure

Harassment, including sexual harassment, is contrary to basic standards of conduct between individuals and is prohibited by Title VII of the Civil Rights Act of 1964, the Equal Employment Opportunity Commission and state regulations.

If an IP believes they are a victim of harassment, sexual or otherwise they have been trained they can choose to take action before filing a formal complaint.

An IP may at any time file a complaint with either the Washington State Human Rights Commission at 1-800-233-3247 or the United States Equal Employment Opportunity Commission concerning a perceived violation of discrimination or harassment laws. The filing of a complaint with one of these agencies, however, does not relieve the IP of the responsibility to also file an internal complaint pursuant to CDWA's Anti-Harassment Policy. CDWA has a responsibility under the law to investigate claims of harassment and to take appropriate remedial measures.

Violations of CDWA's Anti-harassment/Non-discrimination or HAD policies regardless of whether an actual law has been violated, will not be tolerated. CDWA will promptly, thoroughly and fairly investigate every issue that is brought to its attention in this area and will take disciplinary action, when appropriate, up to and including termination of employment.

Retaliation or intimidation directed towards anyone who makes a complaint, or participates in an investigation of a complaint, will not be tolerated.

If you violate CDWA's Anti-harassment/Non-discrimination or HAD policies, CDWA could discharge you from receiving CDE services.

Roles and Responsibilities of the IP

IP STANDARDS OF PRACTICE

IPs are an employee of CDWA. IPs are expected to follow the IP Standards of Practice outlined in WAC 246-980-150. IPs should maintain and respect your rights and safety. This includes, but is not limited to, the following:

1. A long-term care worker may not solicit, accept or borrow money, material or property from a Client or resident. This subsection does not apply to a long-term care worker who is in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.
2. A long-term care worker may not accept from a Client or resident gifts of value greater than twice the current hourly minimum wage in Washington state. Gifts are limited to customary gift-giving times, such as birthdays or major holidays. This subsection does not apply to a long-term care worker who is in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.
3. A long-term care worker may not accept, borrow, or take alcohol or drugs (prescription or nonprescription), including marijuana, from a Client or resident.
4. A long-term care worker may not ingest, inject, inhale, or consume in any manner any substance, including prescribed medicine, that impairs their ability to perform their job duties during the time in which they are paid to provide care.
5. A long-term care worker may not solicit or accept a role that gives them power over a Client's or resident's finances, legal matters, property, or health care decisions. This includes, but is not limited to, acting as power of attorney, legal guardian, payee, insurance beneficiary, or executor or beneficiary of a will. This subsection does not apply to a long-term care worker who is in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.
6. A long-term care worker may not be the landlord for a Client or resident they provide care to. This does not apply to adult family homes licensed by the Department of Social and Health Services so long as the adult family home license is active and in good standing. This section does not apply to a long-term care worker who is in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.

- **a.** For the purposes of this section, "landlord" means having a formal, written lease agreement between the lessor and lessee. It does not apply to situations in which cohabitants voluntarily contribute financially to household expenses without a lease agreement.
7. A long-term care worker shall respect a Client's or resident's privacy and shall not take or disseminate photos or videos of a Client or resident that do not respect the Client's or resident's dignity and rights. This includes, but is not limited to, social media. A long-term care worker must obtain the written permission of the Client or resident, or their legal guardian, prior to taking or disseminating any photo or video of the Client or resident, unless the long-term care worker is in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.

ALCOHOL AND DRUG-FREE WORKPLACE

IPs must report to work fit for duty and free of any adverse effects of drugs or alcohol. A copy of the CDWA Drug and Alcohol-Free Workplace Policy can be found in Appendix C. Violating this policy can result in termination of employment. If you feel an IP is not fit for duty, please call CDWA at **866.214.9899**.

DRIVING/TRANSPORTATION

CDWA has a safe driving program. IPs are required to view a safe driving video as part of employment orientation and on an annual basis.

If you assign driving tasks to an IP, the IP is required to:

- Have a valid and current driver's license
- Provide CDWA with a copy of a valid/current driver's license
- Report if their driver's license is suspended or revoked immediately. The IP will not be allowed to drive.

If an IP is not allowed to drive for you, you will need to find another option for driving tasks. We may request an updated copy of the IP's current and valid driver's license at any time.

Proof of Insurance

All vehicles used must have insurance coverage that meets the State's minimum guidelines for auto insurance coverage. Proof of insurance must be submitted to CDWA.

You assume liability and responsibility for insurance if you choose to let an IP drive your vehicle. CDWA does not insure an IP while operating your vehicle.

It must be reported immediately if you or the IP is unable to maintain insurance. We may request updated copies of current proof of insurance at any time.

Client Health and Safety

Even if an IP has worked all their assigned hours in a work week, they must stay with you if your health or safety is at risk.

An IP has been trained to take these steps:

- Stay with you until the situation is safe and stable
- Call 911 if emergency medical services are needed
- Assist you to arrange back up assistance
- End their shift as soon as it is safe
- Contact CDWA the next business day to explain

YOUR PROPERTY

IPs are expected to be careful with your property. If an IP loses or damages your property, the IP is responsible. The IP may have to pay for loss or damage to property. You and the IP will need to work together to determine a resolution.

MANDATORY REPORTING

By law, if an IP witnesses or suspects a child or vulnerable adult is being abused, neglected, or otherwise mistreated, they are required to report it immediately. All IPs are trained on their responsibilities to report all suspected abuse, neglect or exploitation.

If you believe you are being abused, neglected or mistreated by someone, you are encouraged to report it to the appropriate authorities.

How to report for Children:

1.866.ENDHARM is Washington State's toll-free 24/7 hotline that will connect you to the appropriate local office. PLEASE CALL 911 if the situation is an EMERGENCY.

You may also report by:

Phone: 1.877.734.6277 or 1.866.END.HARM
TTY: 1.833.866.5595

How to report for Adults:

Reporters are encouraged to make a report online:

<https://www.dshs.wa.gov/altsa/home-and-community-services/report-concerns-involving-vulnerable-adults>

Benefits of online reporting include a confirmation number and 24/7 availability to reporters.

Email: APSCentralIntake@dshs.wa.gov Fax: 1.833.866.5590

PLEASE CALL 911 if the adult or child situation is an EMERGENCY

YOUR PRIVACY

IPs receive Privacy Awareness training. They are trained that all your information is confidential (private), as is some of the information they may learn about other Providers. They cannot share or talk about it with other people. If you believe your privacy has been inappropriately shared you should contact CDWA. More information about confidentiality and your rights under the Health Insurance Portability and Protection Act (HIPAA) is in the Privacy Awareness Guide Appendix D and the Notice of Privacy Practices Appendix E of this handbook.

IP RESIGNATION

It is recommended that an IP provide a two-week written notice if the IP is no longer able to work. This will allow you time to find a replacement.

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Roles and Responsibilities of the CM



Case Managers will assist you to develop a Plan of Care. Your Case Manager will help you access needed services. Case Managers will issue an authorization to CDWA based on your Plan of Care. Case managers are custodians of state resources and must balance your choice within program limits.

Core case management functions include*:

- Assessment
- Care Planning/Plan monitoring
- Mandatory Reporting
- Report Suicidal Ideation
- Termination Planning

**You can't waive core functions.*

Supportive case management functions may include, but are not limited to*:

- Client Advocacy
- Assistance with needed services
- Referrals
- Family Support
- Crisis Intervention
- Access to resources such as discharge resources, local community services, assistive technology and benefits under the Medicaid State Plan.

**You may waive supportive functions.*

C O N S U M E R D I R E C T C A R E  N E T W O R K W A S H I N G T O N

Complaint Process



If you are not satisfied with the services that CDWA is providing, we want to hear from you so that we can work to resolve the problem. Complaints may be submitted in writing (via email, fax or letter) or verbally (via the phone or an in-person conversation) using the contact information described in the Communicating with Us section of this handbook. Language support is available for complaints made in a language other than English.

We ask that you report complaints no later than sixty (60) calendar days after the event or incident that leads to the complaint or within ten (10) calendar days of discovery of the event or incident. The sooner we learn about an issue the better!

Assigned CDWA personnel will respond back to you acknowledging your complaint within two (2) business days from receipt of the complaint. This individual will work towards a resolution within that individual's role and authority and may escalate the complaint to the next supervisory level for assistance. A response and explanation of the resolution decision will be communicated to you within ten (10) business days of receiving the complaint.

APPEALS

If you are not satisfied with the resolution of your complaint, you may submit an appeal either verbally or in writing to CDWA within thirty (30) calendar days of the initial resolution communication. The appeal will be reviewed by the supervisory level above the CDWA personnel who reached the original resolution; if there is a feasible alternative resolution, it will be offered. You will be notified within thirty (30) days whether the original resolution is upheld or an alternative resolution is offered.

If the complaint remains unresolved, the Chief Executive Officer (CEO) reviews the facts and prior resolution(s) offered and makes a final resolution decision for those involved. The CEO's decision is final and will be given within one hundred and twenty (120) calendar days of receiving the original complaint.

Please see the Complaint Resolution Policy, OP-WA-001 Appendix F of this handbook.



Corporate Compliance

CDWA is committed to honest and ethical conduct. As such, we follow all governmental laws, rules and regulations, many of which are described throughout this Handbook. If you think that false or illegal activity has happened, report it to a CDWA staff person.

These individuals include:

- Service Coordinator
- Program Manager, State or Regional Director
- Senior Management

An example of not following program rules is doing something that is considered Medicaid fraud (described in the Medicaid Fraud part below).

MEDICAID FRAUD, WASTE AND ABUSE

The money for services in the CDE Program comes from state Medicaid funds. Fraud, waste, or abuse of this Medicaid program is against the law. If an IP, Client, or CDWA is suspected of Medicaid fraud or abuse, it must be reported.

- Fraud is the intentional deception or misrepresentation made by a person (individual or entity) with the knowledge that the deception could result in some unauthorized benefit.
- Waste is the overutilization or misuse of services or other practices that, directly or indirectly, result in unnecessary costs to Medicaid.
- Abuse is defined as provider practices that are inconsistent with sound fiscal, business, or medical practices, and result in an unnecessary cost to or reimbursement from Medicaid programs.

Some examples of potential fraud, waste and abuse of Medicaid funds are:

▪ **An IP:**

- Falsifies submitted time by including more time than actually worked or takes an unpaid break without subtracting the unpaid break time.
- Accepts pay for time the IP did not work.
- Accepts any payment from the Client.
- Claims to live with a Client they do not live with to avoid using Electronic Visit Verification (EVV).
- Documents that tasks or procedures were completed when the tasks were not done.
- Forges another person's signature on paperwork.
- Helps a Client get services or supplies that are not required for the person's healthcare needs.

▪ **A Client:**

- Pressures an IP to split the IP's pay with the Client.
- Receives services or supplies that are not required for the person's healthcare needs.

▪ **An Agency or other provider:**

- Bills for services not provided or medically necessary.
- Bills for the same service more than once.
- Makes false statements to receive payment for services.
- Fails to report overpayments.
- Alters claim forms, medical records, or receipts to receive a higher payment.

THE FALSE CLAIMS ACT (31 USC §3729-33)

The False Claims Act (FCA) is a federal law that makes it a crime for any person or organization to knowingly make a false record or file a false claim with the government for payment.

"Knowing" or "Knowingly" implies that the individual or agency is acting with purposeful intent. When talking about the FCA, it means that the person or agency:

- Knows the record or claim is false;
- Seeks payment while ignoring whether or not the record or claim is false; or
- Seeks payment recklessly without caring whether or not the record or claim is false.

Examples of false claims can include billing for services not provided or medically necessary, billing for the same service more than once or making false statements to receive payment for services.

Summaries of the FCA and applicable State statutes are included in Appendix G of this handbook.

Fraud Prevention

CDWA abides by all federal and state laws, including the False Claims Act, to effectively implement and enforce procedures to detect and prevent fraud, waste and abuse in receiving payments from Medicaid programs. All CDWA administrative staff and IPs are expected to conduct themselves in an ethical and legal manner, including maintaining accurate records related to the rendering of items and services payable by health care programs.

Reporting

Any IP who witnesses or suspects the occurrence of Medicaid fraud must report the allegation to a CDWA team member or directly to the Washington State Attorney General's office as close to the date of discovery as possible.

Attorney General Contact Information:

Phone: 306.586.8888

Email: MFCUreferrals@atg.wa.gov

CDWA protects all workforce members from retaliation and retribution when they report suspected wrongdoing in good faith. For additional information, please see the Reportable Incidents Policy, OP-WA-002 Appendix H of this handbook.

APPENDICES

Appendix A: Terms of Client Responsibility

Appendix B: IP Health and Safety Policy

Appendix C: Drug and Alcohol-Free Workplace Policy

Appendix D: Privacy Awareness Guide

Appendix E: Notice of Privacy Practices

Appendix F: Complaint Resolution Policy

Appendix G: False Claims Act Summary

Appendix H: Reportable Incidents Policy

Appendix I: IP Corrective Action Policy

Terms of Client Responsibility

The Washington Department of Social and Health Services (DSHS) requires some clients in the Consumer Directed Employer (CDE) program to pay for a portion of their care services. These clients pay a “Client Responsibility” or co-payment amount each month. The amount is determined by DSHS based on client income. This document outlines Consumer Direct Care Network Washington’s (CDWA) terms of service for processing your Client Responsibility.

Background

- Client Responsibility was previously known as copay or PNA.
- Client Responsibility amounts are determined by DSHS, not CDWA.
- Contact DSHS if you have questions about the amount of your Client Responsibility.
- Payments are made to CDWA, not DSHS, and not to your IP.
- Your Individual Provider’s (IP) pay is not affected.

Processing

- CDWA will issue a statement to clients for each month of service.
- CDWA will send a statement once the month’s services exceed your Client Responsibility total.
- If your cost of care is less than your Client Responsibility amount, you will be issued a statement for the cost of care amount the following service month.
- We will send your Client Responsibility statement by mail or you will receive a text or email alerting you that your statement is available on the Patient Notebook portal.
- Clients can create a Patient Notebook account where they can view their statements and payment history.
- Your statement includes your Client Responsibility amount, outstanding balance, payments, and credits.
- Payments are due to CDWA within 30 days of the statement date.
- If payment is not received within 30 days of the statement date, your account will be past due.

Past Due Accounts

- If your account is past due, you will receive a 30-day termination notice.
- CDWA will also send reminders prior to the 30-day termination date.
- Your IP and Case Manager will also be notified of your account’s past due status.
- Any past due balances not received prior to the termination date, will result in termination from CDE services.
- If terminated:
 - We will notify your IP(s) of your account status so they are aware they will not be paid for any further services provided during the termination period.
 - You must work with your Case Manager to arrange other services.
 - You may be reinstated for CDE program services upon full payment of your outstanding balance.
 - We may refer your delinquent account to a collections service.

Payments

- We accept the following forms of payment:
 - Electronic Funds Transfer (EFT).
 - Credit or debit card.
 - Check.
- Electronic payments can be set up on a recurring schedule or as a one-time payment.
- CDWA does not accept cash or payments at our office locations. Contact us by mail, email, or phone to make a payment.
- If payment is rejected for non-sufficient funds (NSF), account closure, credit card rejection or any other reason, we will:
 - Attempt to process the charge again, and/or,
 - Contact you for a different payment method.

If you have any questions regarding your Client Responsibility statement(s), please contact us by email at InfoCDWA@ConsumerDirectCare.com or by phone at 866-214-9899.

Client Responsibility Timeline Example

January Service Example

January 1 – Service begins.

If your Client Responsibility is accrued by:	Your statement will be sent:	Payment is due
January 8, 2022	January 13, 2022	February 12, 2022
January 15, 2022	January 20, 2022	February 19, 2022
January 22, 2022	January 27, 2022	February 26, 2022

- If your cost of care is less than your Client Responsibility amount, you will be issued a statement for the cost of care total the following service month.
- If payment is not received within 30 days of the statement date, your account will be past due, and you will receive a 30-day termination notice.
- Any past due balance not received by the termination date, will result in termination from CDE services.

IP Health and Safety/Anti-Harassment

Consumer Direct Care Network Washington (CDWA) does not tolerate harassment, discrimination, abusive conduct, or workplace violence against Individual Providers. All forms of harassment, including any words or actions toward an individual or an individual's race, color, religion, gender, sexual orientation, gender identity, national origin, age, disability, genetic information, marital status, or any other characteristic protected by law are prohibited. Our company is committed to a workplace free of any harassment, discrimination, abusive conduct, and workplace violence.

All employees, Clients, and Authorized Representatives are expected to take appropriate measures to prevent harassment, discrimination, abusive conduct, and workplace violence. Employees are expected to report incidents that they witness, are made aware of, or experience, as close to the date of the incident as possible. CDWA prohibits retaliation against any individual that makes a report in good faith. Any employee, Client, or Authorized Representative who is found to have engaged in harassment, abusive conduct, or workplace violence will be subject to appropriate corrective action, up to and including termination.

PURPOSE

All employees, Clients, and Authorized Representatives are covered by and are expected to comply with this Policy and to take appropriate measures to ensure that prohibited conduct does not occur.

SCOPE

All Consumer Direct Care Network Washington employees, Clients, and Authorized Representatives.

DEFINITIONS

CDWA's Injury & HAD Reporting Hotline

1 (877) 532-8542

Abusive conduct/Workplace violence

Actions of violence include but are not limited to: verbal or physical harassment or abuse, attempts at intimidation, sabotage, destruction of property, menacing gestures, possession of weapons, stalking, coercion, pushing or shoving, horseplay, or other hostile, aggressive, harmful and destructive actions.

Challenging Behavior

A challenging behavior is not considered harassment, discrimination, or workplace violence if it means behavior by a Client that is specifically caused by or related to a disability that might be experienced by an IP as offensive or presenting a safety risk.

Harassment

Unwelcome verbal, visual, or physical conduct creating an intimidating, offensive, or hostile environment that interferes with work performance. Harassment can be verbal (including slurs, jokes, insults, gestures, or teasing), graphic (including offensive posters, symbols, cartoons, drawings, computer displays, e-mails, or social media posts), or physical conduct (including physically threatening another, blocking someone's way, etc.) that degrades or shows hostility or aversion towards an individual. Such conduct violates this policy, even if it is not unlawful.

Sexual Harassment

Unwanted and offensive sexual behavior targeting an individual(s). Sexual harassment can include all the above actions, as well as other unwelcome conduct, such as unwelcome or unsolicited sexual advances, requests for sexual favors, and other verbal, visual or physical conduct of a sexual nature. Examples of sexual harassment include, but are not limited to:

- Unwelcome sexual flirtations, touching, advances, or propositions;
- Verbal abuse of a sexual nature;
- Graphic or suggestive comments about an individual's dress, body, or gender;
- Sexually degrading words to describe an individual; or
- The display of sexually suggestive objects or pictures, including nude photographs.

PROCEDURE

1. Education and Prevention

1.1. CDWA provides education and resources to Clients, IPs, and teams on the prevention, intervention, reporting and investigation of harassment, discrimination, abusive conduct, and workplace violence.

1.1.1. Policy is posted in prominent locations within CDWA premises,

1.1.2. Policy is provided to all new IPs upon hire and annually thereafter, and

1.1.3. Policy is available in English and the top three languages spoken by IPs.

1.2. CDWA maintains a prevention plan to:

1.2.1. Prevent and protect employees from abusive conduct,

1.2.2. Assist employees in environments with challenging behaviors, and

1.2.3. Work to resolve issues impacting the provision of services.

1.3. The prevention plan is:

1.3.1. Developed and monitored by a Workplace Safety committee.

- 1.3.1.1. The Workplace Safety committee consists of individuals that are employee-elected, employer-selected, and include at least one Client and/or Authorized Representative.

- 1.3.2. Reviewed as necessary and at least once every three years.

2. Reporting

- 2.1. Any IP who believes in good faith that their health and/or safety is in imminent danger at an assigned work location may leave that location immediately and contact CDWA's Injury & HAD Reporting Hotline. If the IP believes the Client may be in danger, the IP will call 9-1-1 or other emergency services.
 - 2.1.1. This process must not authorize abandonment as defined by RCW 74.34.020 unless the IP has called the Injury & HAD Reporting Hotline and has a reasonable fear of imminent physical harm.
- 2.2. Any employee who receives a report or believes someone has violated this policy should promptly bring the matter to the attention of a CDWA representative (manager or above). Reports can be made verbally or in writing and can be made anonymously if the employee desires.
- 2.3. If a supervisor or member of management learns of any employee's concern about conduct in violation of this policy, whether in a formal complaint or informally, they must immediately report the issues raised to their direct supervisor, another manager, or HR Representative.

3. Investigation

- 3.1. The CDWA representative (manager or above) will initiate a thorough and impartial investigation of the facts and circumstances surrounding any claim within 3 business days.
- 3.2. During the investigation, the CDWA representative generally will:
 - 3.2.1. Interview the complainant, the target (if not the complainant), witnesses, the alleged offender, and any other relevant individuals,
 - 3.2.2. Collect written and signed statements and relevant documents as appropriate,
 - 3.2.3. Document steps taken and outcome of the investigation, and
 - 3.2.4. Communicate the determination of the investigation to the appropriate parties that may include but are not limited to:
 - 3.2.4.1. Client,
 - 3.2.4.2. Authorized Representative,
 - 3.2.4.3. Individual Provider, and/or
 - 3.2.4.4. Case Manager.
- 3.3. Upon completion of the investigation immediate and proportionate corrective measures will be taken.

- 3.3.1. For employees of CDWA these measures will include corrective measures at the appropriate level. These actions may include, but are not limited to:
 - 3.3.1.1. Employee retraining on prevention of prohibited actions,
 - 3.3.1.2. Skills counseling,
 - 3.3.1.3. Corrective action plans, and/or
 - 3.3.1.4. Employee termination.
- 3.3.2. If a Client, Authorized Representative, or Client household members or visitors engage in prohibited behavior CDWA will take appropriate corrective measures that may include, but are not limited to:
 - 3.3.2.1. Client re-training on prevention of prohibited actions,
 - 3.3.2.2. Intervention support with Case Manager,
 - 3.3.2.3. Disclosure of information such as illnesses, behaviors, history of harassment, discrimination, abuse, or violence (unless prohibited by law) to subsequent IP, and/or
 - 3.3.2.4. Termination of CDE services.
- 3.4. CDWA will work with IPs who are victims of harassment, abusive conduct, workplace violence, and challenging behavior by:
 - 3.4.1. Referring IPs to appropriate community resources,
 - 3.4.2. Assisting the IP in reassignment to another Client (if applicable),
 - 3.4.3. Cooperating with law enforcement, and
 - 3.4.4. Providing a debriefing process for affected IPs following a violent act.
- 3.5. If an employee is not satisfied with the resolution of their complaint, they have the right to file a complaint with the appropriate government agency.
- 3.6. CDWA will work with Case Managers throughout the investigation to maintain service when:
 - 3.6.1. The allegation is related to challenging behaviors by the Client,
 - 3.6.2. The Client is at risk of not having an IP available to provide services, and/or
 - 3.6.3. The Client is at risk of termination of CDE services.
- 4. Records of reported incidents will be retained for at least five (5) years and will be made available for inspection to DSHS or its agents, upon request.
- 5. Per CDCN's Non-Retaliation/Whistleblower Policy, no employee will be subject to, and CDWA prohibits, any form of corrective action or retaliation for reporting perceived violations of this policy, pursuing any such claim, or cooperating in any way in the investigation of such claims. If an employee believes someone has violated the Non-Retaliation Policy, the employee should bring the matter to the immediate attention of the Human Resources Director or Compliance Officer.

Preventing harassment and creating a civil and respectful workplace is everyone's responsibility. Prompt reporting of observed or experienced harassment enables us to act quickly to remedy problems as they arise.

INTERNAL CONTROL

All employees are expected to comply with this Policy. The Human Resources and Regional Directors are responsible for overall compliance with this Policy. The Workplace Safety Committee is responsible for review and required reporting on the frequency, causes, and consequences of reported discrimination and abusive conduct. Monitoring compliance with this policy will be the responsibility of the WA QM Director through regular review cycles described in the CDWA Quality Management Plan.

ADDITIONAL INFORMATION

Relevant Materials:	SEIU Collective Bargaining Agreement Client Co-employment Handbook IP Employment Handbook
Relevant Regulations:	SB 6205 RCW 49.95
Policy Group(s):	Human Resources Operations
Subject Matter Expert:	Human Resources and Regional Director
Applicable States:	Washington
Applicable Entities:	Consumer Direct Care Network of Washington
Policy Review Cycle:	Biennially
Date Approved:	5/16/2023
Policy History:	On March 17, 2021, this Policy was approved by WA DSHS. On May 16, 2023, this Policy was updated to bring it up to date with current processes.

Drug and Alcohol-Free Workplace

POLICY

Consumer Direct Care Network ("CDCN") is committed to providing a safe, healthy, and productive workplace that is free from alcohol, unlawful drugs, or any other unlawful substance as classified under local, state, or federal laws while employees are working for CDCN, whether on or off its premises.

PURPOSE

Being under the influence of drugs or alcohol in the workplace results in decreased productivity, increased liability exposure, and higher workers' compensation insurance premiums. In addition, an employee's use of drugs or alcohol jeopardizes the safety of co-workers, clients, and the public and places a company's reputation in jeopardy. CDCN thus has a substantial interest in not only providing, but ensuring, a drug and alcohol-free workplace.

SCOPE

This Policy applies to all employees and job applicants of CDCN and drivers of any CDCN vehicles and equipment.

For any employees or caregivers represented by a union, language in the collective bargaining agreement (CBA), specific to this subject, will take precedence.

DEFINITIONS

Alcohol

An intoxicating agent in alcoholic beverages, ethyl alcohol, also called ethanol, or the hydrated oxide of ethyl.

Controlled Substance/Drugs

A dangerous drug, as defined in 21 U.S.C. § 812, except a drug used pursuant to a valid prescription or as authorized by law.

Employee/Caregiver

Any full-time, part-time, or contract employee who performs services for compensation, in whatever form, for CDCN.

Illegal drugs

Means all drugs whose use or possession is regulated or prohibited by federal, state or local law.

Impaired

Any observable physical, behavioral, speech, or performance indicators of probable alcohol misuse or use of controlled substances which could include but is not limited to: poor

judgement, impaired motor senses (sight, hearing, balance, reaction times, and reflexes), slurred speech, reduced fine motor skills, erratic behavior, appearing dazed or sedated.

On Duty

All working hours, regardless of whether on CDCN's premises.

Premises

Any office building, parking lot, vehicles or equipment owned by Company and all other property owned, leased, or occupied by the Company.

PROCEDURE

1. Responsibilities

Employees must report to work fit for duty and free of any adverse effects of drugs or alcohol. This Policy does not prohibit employees from the lawful use and possession of prescribed medications taken as prescribed and that does not compromise workplace safety. Employees must, however, consult with their doctors about the medication's effect on their fitness for duty and ability to work safely.

2. Prohibitions

2.1 Unauthorized Activities

The unlawful or unauthorized use, abuse, solicitation, theft, purchase, sale or distribution of controlled substances, or alcohol by an individual anywhere on CDCN premises, or while representing Consumer Direct Care Network, is strictly prohibited.

2.2 Working While Impaired

Employees and other individuals contracted to work for CDCN are prohibited from reporting to work or working while they are impaired by alcohol or any controlled substances.

3. Prescription and Over-the-Counter Drugs

This Policy does not prohibit the possession and proper use of lawfully prescribed or over-the-counter drugs. However, an employee taking medication should consult with a health care professional or review dosing directions for information about the medication's effect on the employee's ability to work safely, and promptly disclose any work restrictions to a supervisor or Human Resources. Employees are not required to reveal the name of the medication or the underlying medical condition.

CDCN reserves the right to transfer, reassign, place on leave of absence, or take other appropriate action regarding any employee during the time the employee uses medication that may cause impairment. CDCN complies with all requirements pertaining to providing reasonable accommodations to the extent required by applicable law.

4. Responsible Drinking During Company Events

CDCN is committed to providing a safe and enjoyable environment for its members and guests during company-sponsored events that may include alcohol.

Employees are ultimately responsible for their choices and behavior regarding the consumption of alcohol when it is available at company-sponsored events, trainings and meetings. A CDCN-sponsored event, meeting or training occurs anytime a group of employees gather and is sanctioned by Leadership. Employees may be held individually or collectively liable for incidents from the uncontrolled or illegal use of alcohol. Accordingly, employees are always expected to act appropriately and professionally and to comply with all company policies, including the *Code of Conduct* and *Standards of Behavior*.

- The sale, availability, or distribution of alcoholic beverages to anyone under the age of 21 is strictly prohibited.
- The consumption of alcohol is not permitted while operating company vehicles used during or to support CDCN-sponsored events, including shuttles and bus services used for both local and long-distance transport of participants.
- It is always the sole responsibility of the employee, and not CDCN, to ensure they do not operate a vehicle if their blood alcohol level exceeds the legal limit in the jurisdiction in which the event, meeting or training is being held.

CDCN may take disciplinary action against individuals whose use of alcoholic beverages negatively impacts the company's brand, business operations or the health, safety and welfare of CDCN's organization and members.

5. Counseling and Rehabilitation

Any employee who feels that they have an addiction or dependence to drugs or alcohol is encouraged to seek assistance prior to any event that could lead to discipline. Requests for information concerning such assistance will be confidential. Employees seeking assistance for drug or alcohol dependency may be afforded coverage under CDCN's employee assistance program and/or health care plan. Employees should refer to benefit plan documents to determine coverage. To request information about the benefit plan please email InfoHR@consumerdirectcare.com.

CDCN grants rehabilitation leave to employees seeking treatment on a voluntary basis. Employees must contact the Human Resources Director to request rehabilitation leave. Rehabilitation leave is unpaid unless the employee is eligible for and has accrued paid time off or qualifies for a leave donation.

An employee who has violated this Policy and then failed to complete a recommended rehabilitation program is not entitled to job protection by the American Disabilities Act or the Family and Medical Leave Act.

7. Non-Discrimination and Non-Retaliation

CDCN maintains a policy of non-discrimination and will endeavor to make reasonable accommodations to assist individuals recovering from substance and alcohol dependencies, and those who have a medical history which reflects treatment for substance abuse conditions. However, employees may not request an accommodation to avoid disciplinary action for a policy violation. We encourage employees to seek assistance before their substance abuse or alcohol misuse renders them unable to perform the essential functions of their jobs, or jeopardizes the health and safety of any CDCN employee, including themselves

8. Consequences for Violation of This Policy

Any employee who violates this Policy will be subject to disciplinary action up to and including termination of employment.

INTERNAL CONTROL

The Human Resources Director or their designee is responsible for implementation of this Policy.

ADDITIONAL INFORMATION

Relevant Materials:	N/A
Relevant Regulations:	21 U.S.C. § 812 Schedules of controlled substances The Americans with Disabilities Act The Rehabilitation Act of 1973
Policy Group(s):	Human Resources Safety Program
Subject Matter Expert:	HR Director
Applicable States:	All
Applicable Entities:	All
Policy Review Cycle:	Biennially
Date Approved:	3/4/2021
Policy History:	On March 4, 2021, this Policy was created and approved by the Executive Team.

As an Individual Provider of Consumer Direct Care Network Washington (CDWA), you'll likely see or hear personal information that belongs to the Client(s) you're providing services to and/or other Individual Providers (IP). Every day CDWA uses people's personal information to provide needed services. Personal information is sensitive, and we must take care to protect it. Its disclosure could harm the individuals to whom it belongs. As such, CDWA employees and IPs must follow federal and state privacy laws.

This Guide will prepare you to recognize Personally Identifiable Information ("PII") and Protected Health Information ("PHI"). You will learn CDWA's policies and procedures to safeguard PII and PHI. You will also learn the proper use and disclosure of PII and PHI. This Guide is meant for IPs.

If you have questions, please contact CDWA.

INTRODUCTION TO PII & PHI

PERSONALLY IDENTIFIABLE INFORMATION ("PII")

PII is any information that links an individual's name with their:

- Social Security number
- Driver's License number
- Passport ID
- Bank Account or Credit Card Account numbers
- Passwords
- Other confidential information

PROTECTED HEALTH INFORMATION ("PHI")

PHI is more restrictive than PII. PHI is any information from a Client that has a unique identifier that could be used to identify an individual. Some examples of PHI are a Client's:

- Full name
- Social Security number
- Date of birth
- Medical diagnosis
- Address
- Phone number
- Medical record
- Account number
- Email address

OVERVIEW OF PRIVACY LAWS

STATE PRIVACY LAWS

Most states have privacy laws regarding the ways businesses collect PII. These laws ensure that PII is collected and retained in a protected manner. CDWA has developed strict PII protection rules as company policy.

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (“HIPAA”)

The Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) is a federal law. It requires companies and their employees to maintain the privacy and security of PHI for individuals receiving health care. Specifically, HIPAA explains when PHI may be used or disclosed.

Key ways HIPAA rules protect PHI:

- PHI may only be shared with the individual’s consent or if specifically allowed by HIPAA.
- PHI may only be changed or destroyed using procedures described in HIPAA. This protects the integrity of the information.
- HIPAA provides additional overall security and privacy protections.

WHO MUST FOLLOW STATE PRIVACY LAWS & HIPAA?

State privacy laws require any business that collects PII to protect the information from improper disclosure.

HIPAA requires Covered Entities and their Business Associates to follow HIPAA standards. CDWA is a Business Associate in Washington.

- Business Associates are similar to outside consultants who are required to protect PHI because of their contractual agreement with the Department of Social and Health Services.

CDWA and all of our employees & IPs are always required to comply with HIPAA standards.

SAFEGUARDING PII & PHI

HIPAA and state privacy laws require us to make sure PII & PHI is protected and not shared with the wrong parties. PII & PHI is to be protected and kept confidential in handwritten, printed, electronic, or verbal form.

KEEPING PII & PHI CONFIDENTIAL

The most common cause of unauthorized disclosures of PII or PHI is human error. This can be prevented. Below are best practices to help you protect PII & PHI:

- Keep all PII & PHI confidential
 - Treat PII & PHI as a “need to know” event. Share as little information with as few people as needed to complete your task. This includes other Clients and Individual Providers.
 - Do not bring unauthorized individuals with you to a Client’s home without prior permission from the Client.
 - Be aware of who is around you when on the phone. Minimize PII & PHI shared over the phone and don't share information if a non-employee is nearby.
 - Do not leave PII or PHI in a place where others can see it.
 - Only use secure channels to send PII or PHI to CDWA. If you cannot send PHI using a secure method, obtain Client permission (verbal or written) before sending the PHI via an unsecured method.

- Limit Sharing
 - Do not discuss PII or PHI in public areas such as elevators, restrooms, reception areas, or other areas where you can be overheard. Talking with a non-employee about a Client's unique name or any other minor detail can be considered a disclosure of PHI and may be subject to penalties.
 - Always make sure that you are giving PII or PHI only to individuals who are allowed to have it.

USE AND DISCLOSURE OF PHI AND PII

WHAT ARE HIPAA “USES AND DISCLOSURES” of PHI?

Use: occurs when a company that maintains PHI shares, analyzes, or examines the information.

Disclosure: occurs when PHI is shared, transferred or released in any way by the individual or company holding the information.

WHEN CAN PII or PHI BE DISCLOSED?

CDWA's policy states that PII cannot be disclosed without a written authorization. PHI may only be used or disclosed when one or more of the following situations is true:

1. The Client or their designated representative has agreed to the use or disclosure.
2. The Client or their designated representative allows information to be shared with a person involved in their health care.
3. PHI is being shared with the following:
 - Client or their designated representative.
 - U.S. Department of Health and Human Services.
 - Covered Entity when CDWA is the Business Associate.
4. The use or sharing meets one of the HIPAA consent exceptions.

PHI disclosed outside of these situations is considered an Unauthorized Disclosure. If you have questions regarding whether a disclosure is authorized, please contact CDWA prior to making the disclosure.

HOW ARE CLIENTS NOTIFIED OF THEIR HIPAA RIGHTS?

Clients in Washington are given a copy of CDWA's *Notice of Privacy Practices*. This document explains how a Client's PHI may be used and disclosed. It also explains how the Client or their designated representative can access their information.

UNAUTHORIZED DISCLOSURES

WHAT ARE “UNAUTHORIZED DISCLOSURES” of PII & PHI?

Unauthorized Disclosures of PII occur when PII is shared or released without the individual's consent.

Unauthorized Disclosures of PHI occur when:

- PHI is shared or released without the consent of the Client or their designated representative.

- The shared PHI was not authorized under HIPAA.

Examples of Unauthorized Disclosures include:

- Sharing the identity of, or information about, a Client with an unauthorized third party.
- Bringing a third party to a Client's home without permission.
- Speaking about a Client when a non-employee is present.

REPORTING PII or PHI DISCLOSURES

If you are concerned that PII or PHI has been disclosed by you or another individual, without authorization or in violation of CDWA's Privacy Policy, please immediately contact CDWA to report the incident.

NON-COMPLIANCE PENALTIES

CDWA policies require provision of identity theft protection to anyone affected by a confirmed PII disclosure. The cost of providing identity theft protection can range from \$50 to \$250 per person.

Severe civil and criminal penalties can apply to IPs and CDWA for disclosing PHI in the wrong way, even if it's an accident. Both CDWA and the individual IP can be held directly liable and fines can range from \$100 to \$1,500,000.

Please remember to protect PII & PHI at all times and notify CDWA immediately if you suspect an unauthorized disclosure has happened, regardless of who made the disclosure.

ADDITIONAL RESOURCES

More information regarding acceptable use, disclosure, security, and accessibility of PII or PHI may be found in the following policies:

1. *Personally Identifiable Information Policy*, AD-AD-047-1.0-ALL-ALL.
2. *Privacy Policy*, AD-AD-028-1.0-ALL-ALL.

These policies ensure we have taken necessary steps to protect PII & PHI. By following policy guidelines, you are helping guarantee the appropriate use of PII & PHI and avoiding any use or disclosure that is not allowed. Additionally, each day we need to take some simple steps to protect PII & PHI.

Your Information. Your Rights. Our Responsibilities.

This notice is being provided on behalf of the Covered Entity, and tells you how medical information about you may be used and disclosed. It also tells you how you can get access to this information.

Please review it carefully.

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- If we say “no” to your request, we will tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone). You can also ask us to send mail to a different address.
- We will say “yes” to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.

Get a list of those with whom we’ve shared information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask. This will include who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201. You can also call 1-877-696-6775, or visit www.hhs.gov/ocr/privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care.
- Share information in a disaster relief situation.
- Include your information in a hospital directory.

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission:

- Marketing purposes.
- Sale of your information.
- Most sharing of psychotherapy notes.

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

Our Uses and Disclosures**How do we typically use or share your health information?**

We typically use or share your health information in the following ways.

Treat you

We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

We can use and share your health information to run our practice, improve your care, and contact you when necessary.

Example: We use health information about you to manage your treatment and services.

Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways. This is usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease.
- Helping with product recalls.
- Reporting adverse reactions to medications.
- Reporting suspected abuse, neglect, or domestic violence.
- Preventing or reducing a serious threat to anyone's health or safety.

Do research

We can use or share your information for health research.

Comply with the law

We will share information about you if state or federal laws require it. This includes with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims.
- For law enforcement purposes or with a law enforcement official.
- With health oversight agencies for activities authorized by law.
- For special government functions such as military, national security, and presidential protective services.

Respond to lawsuits and legal actions

We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

Other Instructions for Notice

- This notice is effective April 1, 2020.
- Our Privacy Officer can be reached at infoprivacy@consumerdirectcare.com. They may also be reached at (877) 532-8530.
- We never market or sell personal information.
- This notice applies to all companies in the Consumer Direct Care Network which operate in the following states: Alaska, Arizona, Delaware, Maryland, Michigan, Montana, Nevada, New Mexico, Washington, Wisconsin.

CDWA Complaint Resolution

POLICY

Consumer Direct Care Network Washington ("CDWA") documents and attempts to resolve all applicable complaints regarding services, systems, procedures, or administrative decisions pertaining to the program.

PURPOSE

The purpose of this Policy is to document requirements for complaint documentation, monitoring, and resolution timelines.

SCOPE

This Policy is applicable to Consumer Direct Care Network Washington.

DEFINITIONS

Complaint

Written or verbal expression of dissatisfaction that meets one (1) or more of the following criteria:

- 1) The issue is within CDWA's reasonable control and needs to be escalated to the next supervisory level for resolution. Example: "I want to speak to the Supervisor/Manager";
- 2) The person giving the feedback explicitly states, "I want to file a complaint"; or
- 3) The person submits their feedback in writing.

Filing Party

The individual(s) who files a complaint of dissatisfaction with CDWA's services. Anyone may file a complaint.

Reasonable Control

That which is within CDWA's reasonable control and related to the performance of a contractual or legal obligation. Examples of issues that are within CDWA's reasonable control are issues about enrollment processes, handling of payment issues, and CDCN's web portal. Client authorizations, budget amounts, pay delays due to weather or incorrect information supplied to CDWA, etc. are not within CDWA's reasonable control.

PROCEDURE

1. Reporting

- 1.1. Complaints may be submitted in writing (via email, fax, letter or using the "contact us" page on our website) or verbally (via the phone or an in-person conversation). Language support is available for complaints made in a language other than English.

2. Handling

- 2.1. Individuals must file a Complaint no later than sixty (60) days after the event or incident that leads to the Complaint or within ten (10) days of discovery of event or incident.
- 2.2. CDWA team member will open a "case" in CDWA's Customer Relationship Management (CRM) platform to log the details of the Complaint.
- 2.3. CDWA personnel utilize internal training and tools to determine if complaint requires internal or external referral.
 - 2.3.1. Complaints requiring external referral are referred to the appropriate entity/agency.
- 2.4. CDWA personnel utilize internal training and tools determine if Complaint is within internal reasonable control.
- 2.5. All steps taken to resolve the issue(s) of the Complaint are documented in the CRM.

3. Resolution

- 3.1. CDWA personnel respond with an acknowledgement of the complaint to the Filing Party within two (2) business days from receipt of the Complaint.
 - 3.1.1. Complaints submitted in writing are responded to in writing.
 - 3.1.2. Complaints submitted verbally may be responded to either verbally or in writing, unless the Filing Party requests a written response.
- 3.2. An assigned CDWA personnel works towards a resolution of the Complaint within that individual's role and authority. If the individual is not successful in resolving the Complaint, the case is escalated to the next supervisory level until it is resolved.
- 3.3. A response and explanation of a resolution decision is communicated to the Filing Party within ten (10) business days of receiving the Complaint.
- 3.4. Designation of the initial Complaint resolution as satisfactory/resolved is at the discretion of the Filing Party.

4. Appeal of Adverse Response

- 4.1. Appeals may be submitted either verbally or in writing to CDWA within thirty (30) calendar days of the initial resolution communication.
- 4.2. The appeal is reviewed by the supervisory level above the CDWA personnel who reached the original resolution.
 - 4.2.1. If there is a feasible alternative resolution, it is offered to the Filing Party.
- 4.3. The CDWA representative reviewing the Complaint notifies the Filing Party whether the original resolution is upheld or an alternative resolution is offered, within thirty (30) days from the date of appeal.
- 4.4. CDWA sends documentation of the request for appeal and the final resolution to DSHS for review.

5. Unresolved Complaints

- 5.1. If the Complaint remains unresolved, the Chief Executive Officer (“CEO”) reviews the facts and prior resolution(s) offered and makes a final resolution decision for those involved. The CEO’s decision will be given within one hundred and twenty (120) calendar days of receiving the original Complaint and is final.
6. Recordkeeping
 - 6.1. CDWA tracks and maintains records on all Complaints, received both verbally and in writing, documentation of action(s) taken to resolve them and resolutions/appeals.

INTERNAL CONTROL

CDWA’s Regional Director and overseeing Senior Director routinely monitor Complaint records for proper documentation and appropriate resolution. Complaints are also internally reviewed to determine quality of services to clients and needed quality improvement or corrective actions.

ADDITIONAL INFORMATION

Relevant Materials:	Complaint/Feedback Form
Relevant Regulations:	CMS 42 CFR § 422.564 Grievance procedures CDE Contract between DSHS and CDWA, § 7.23 Complaint Resolution
Policy Group(s):	Operations Corporate Compliance
Subject Matter Expert:	CDWA Regional Director Senior Director overseeing CDWA operations
Applicable States:	Washington
Applicable Entities:	CDCN-WA
Policy Review Cycle:	Biennially
Date Approved:	6/24/2021
Policy History:	On March 17, 2021, this Policy was approved by WA DSHS. On June 24, 2021, this Policy was reviewed and minor changes were made.

The federal False Claims Act (“FCA”) is designed to protect the federal government against fraudulent practices on the part of its contractors. The FCA prohibits individuals and organizations from submitting false or fraudulent claims to the government for payment or reimbursement. Additional information about the law and its history is available at the U.S. Department of Justice website.

Many states, including Washington, have enacted similar laws. The FCA defines a claim as a “request or demand for money or property” made to the government or to a third party that is reimbursed by the government. The following transactions or activities are examples of claims:

- Requests for payment or reimbursement of property, services or money (including grants, loans, insurance, or benefits).
- Requests for approval or authorization to provide property, services or money.
- Statements made in support of requests for payment, reimbursement, approval or authorization.
- Statements for use in qualifying as a provider.
- Statements identifying an item or service as reimbursable, whether made directly to the government or to someone else – a contractor or other recipient – who the government will be paying or reimbursing for all or part of the claim.

Any information contained in a claim or statement, or in documentation used to support or complete a claim or statement, must be accurate, correct, and complete. Omission of important information may render a claim or statement inaccurate.

A claim is “false” if the person or organization presenting it has actual knowledge that the claim is false, or if the person or organization acts in “deliberate ignorance” or “reckless disregard” of the truth or falsity of the information. This means that, to allege a false claim, the government is not required to prove that the person making the claim actually intended to defraud the government. For this reason, a person or organization may not, either deliberately or carelessly, ignore questionable information contained in a claim or statement, or in supporting documentation.

Some examples of false claims include:

- False or fraudulent claims for payment or approval.
- False records or statements made or used to get a false or fraudulent claim paid or approved by the government, for example, inaccurate quality data reported in support of pay-for-performance escalators.
- Conspiracy to defraud the government by getting a false or fraudulent claim allowed or paid.

How Does the Government Enforce the False Claims Act?

Civil penalties for FCA violations include \$5,500 - \$11,000 per false claim submitted, triple the amount of damages suffered by the government, and attorneys’ fees and costs. The federal government enforces the FCA directly through the Department of Justice or local US Attorneys’ Offices, or through qui tam actions, where an individual or organization sues on behalf of the government and is entitled to a portion of any recovery. In egregious cases, false claims violations may serve as a basis for imposing criminal sanctions.

Whistleblower Protection

The FCA includes specific provisions to protect whistleblowers from retaliation by their employers. Any employee who initiates or assists with an FCA case against the individual’s employer is protected from discharge, demotion, suspension, threats, harassment, and discrimination in the terms and conditions of the individual’s employment if the employer’s actions are taken in response to the employee’s efforts on the FCA

case. For example, an employee who violates applicable laws or institutional policies may be disciplined or terminated for the violation, even if the employee is also a whistleblower. An employee who does suffer retaliation for the individual's initiation or assistance with an FCA case against their employer is entitled to reinstatement, back pay, and other compensation.

State Laws – as described in the Revised Code of Washington (“RCW”) chapter 74.66

Under Washington's Medicaid False Claims Act (“WMFCA”), a person is liable to the government entity for a civil penalty if the person:

1. Knowingly presents, or causes to be presented, a false or fraudulent claim for payment or approval;
2. Knowingly makes, uses, or causes to be made or used, a false record or statement material to a false or fraudulent claim;
3. Is authorized to make or deliver a document certifying receipt of property used, or to be used, by the government entity and, intending to defraud a government entity, makes or delivers the receipt without completely knowing that the information on the receipt is true;
4. Knowingly makes, uses, or causes to be made or used, a false record or statement material to an obligation to pay or transmit money or property to the government entity, or knowingly conceals or knowingly and improperly avoids or decreases an obligation to pay or transmit money or property to the government entity; or
5. Conspires to commit one or more of the above listed violations.

“Knowing” and “knowingly” do not require proof of specific intent to defraud.

Certain liabilities may be reduced if the violator furnishes the Attorney General with all information known to the violator within thirty (30) days of receiving such information, provided that the violator does not have knowledge of an investigation at the time the violator furnishes such information.

Like the federal FCA, WMFCA allows a private citizen to initiate a case against a corporation or a person who violates the statute and, if the case is successful, to earn a portion of the recovery.

WMFCA also protects whistleblowers with sanctions similar to those provided for under the federal FCA. An employer who retaliates against an employee who initiates or assists in a false claims case against the employer is liable to the employee for the following: reinstatement with the same seniority as if the discrimination had not occurred, twice the amount of back pay, interest on the back pay, and other compensation for any special damages sustained as a result of the discrimination, including litigation costs and reasonable attorney's fees. A civil action under this section must be brought within three (3) years or less after the date when the retaliation occurred.

In addition to WMFCA, Washington prohibits certain fraudulent activities in connection with any Washington health care benefit program, including Medicaid. Washington's antifraud law prohibits a person from obtaining or attempting to obtain payments in excess of the amount to which such person is entitled by means of willful false statements, misrepresentation, concealment of material facts, misrepresentation of items billed, or willfully billing for purportedly covered items which were in fact not covered by Washington's Medicaid program. Any person who violates the antifraud law must repay the amounts wrongfully obtained plus interest and may be subject to a civil penalty in an amount up to three (3) times the amount of the excess payment received. See RCW 74.09.210.

Washington's antifraud law also contains an employee protection provision that prohibits an employer from allowing any workplace reprisal or retaliatory action against an employee who in good faith reports a violation of Washington's Medicaid antifraud provision.

Reportable Incidents

POLICY

Consumer Direct Care Network of Washington (“CDWA”) recognizes the importance of our Clients’ health and safety. As such, CDWA ensures that any incident or report of suspected abuse, neglect, exploitation or other critical incident is handled, documented and reported.

PURPOSE

The purpose of this Policy is to set the standards for reporting instances of suspected abuse, neglect, exploitation, fraud, or other critical incidents that threaten the safety of clients.

SCOPE

This Policy is applicable to all Consumer Direct Care Network of Washington employees, individual providers and clients.

DEFINITIONS

Abuse

The willful action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable person with resulting physical harm, pain or mental anguish. Abuse includes sexual abuse, mental abuse, physical abuse, personal exploitation, and improper use of restraint against a vulnerable adult.

Allegation of Fraud

An unproved assertion: an assertion, especially relating to wrongdoing or misconduct on the part of the individual, entity or provider. An allegation has yet to be proved or supported by evidence. An Allegation of Fraud is an allegation, from any source, including but not limited to the following: (1) Fraud hotline complaints; (2) Claims data mining; and (3) Patterns identified through provider audits, civil false claims cases, and law enforcement investigations.

Fraud

An intentional deception or misrepresentation made by a person (individual or entity) with the knowledge that the deception could result in some unauthorized benefit to him- or herself or some other person. It includes any act that constitutes Fraud under applicable federal or State law.

Financial Exploitation

The illegal or improper use, control over, or withholding of the property, income, resources, or trust funds for any person’s profit or advantage other than for the client’s profit or advantage.

Neglect

A) A pattern of conduct or inaction by a person or entity with a duty of care that fails to provide the goods and services that maintain physical or mental health of a vulnerable person, or that fails to avoid or prevent physical or mental harm or pain to a vulnerable person; or B) an act or omission by a person or entity with a duty of care that demonstrates a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to the vulnerable person's health, welfare, or safety.

Self-Neglect

The failure of a vulnerable person, not living in a facility, to provide himself or herself the goods and services necessary for the vulnerable person's physical or mental health, and the absence of which impairs or threatens the vulnerable person's well-being.

Other Reportable Incidents

- Emergency Services – refers to the admission to a hospital or psychiatric facility or provision of emergency services that results in medical care, which is not anticipated for the client and would not routinely be provided by a primary care provider.
- Environmental Hazard – an unsafe condition which creates an immediate threat to the life or health of a Client.
- Hospitalization or Admission to an Inpatient Facility – a Client's overnight admission to a facility that provides inpatient medical care.
- Law Enforcement Intervention – the arrest or detention of a person by law enforcement, involvement of law enforcement in an incident or event, or placement of a person in a correctional facility.
- Natural or Expected Death – any death of a Client caused by a long-term illness, a diagnosed chronic medical condition, or other natural or expected condition resulting in death.
- Unexpected Death – death caused by an accident, unknown or unanticipated cause.
- Other Medical Concerns – any issues that impact the client's medical stability to include evidence of skin breakdown, elevated blood sugar levels, elevated blood pressure, increased falls or other issues which may directly impact the client's health and well-being.

PROCEDURE

1. Training

- 1.1. CDWA employees are informed of their mandatory reporting status as well as their role in the reporting of critical incidents and suspicions of fraud.
- 1.2. CDWA employees receive training and demonstrate competency in understanding, regarding the company's abuse, neglect and fraud reporting procedure during the new hire orientation process. This documentation is saved to the employee's electronic personnel record.

2. Reporting Abuse, Neglect and Other Reportable Incidents

- 2.1. Reportable Incidents include abuse, neglect, self-neglect, financial exploitation and other reportable incidents as defined in the Definitions section of this Policy.
- 2.2. Individual Providers
 - 2.2.1. Any Individual Provider (IP) who witnesses or suspects that a child or vulnerable person is being abused, neglected, or otherwise mistreated, must report this information immediately to Adult Protective Services (APS), Child Protective Services (CPS) or to the Department of Health (DOH). Reports can be made by calling toll-free 1-866-END-HARM or 1-866-363-4276. The IP must inform CDWA about the incident as well.
- 2.3. CDWA Administrative Staff
 - 2.3.1. Any CDWA team member who witnesses, is made aware of, or suspects a reportable incident must:
 - 2.3.1.1. Advise individuals making a report to also make a direct report to APS, CPS or the DOH, as applicable, and provide contact information as documented in 2.2.1 of this Policy;
 - 2.3.2. Document the details of the incident, including but not limited to:
 - 2.3.2.1. The individual(s) involved in the incident;
 - 2.3.2.2. Where the incident occurred;
 - 2.3.2.3. The time and date of the incident;
 - 2.3.2.4. A description of the incident; and
 - 2.3.2.5. Initial actions to keep the client safe, if applicable.
 - 2.3.3. Immediately report the incident to APS, CPS, DOH or law enforcement, as appropriate, to prevent further harm to the individual.
 - 2.3.4. Report the details of the incident(s) to the affected client's Case Manager/Social Worker. Incidents of harm are reported immediately, and all other reportable incidents are reported as soon as possible.
 - 2.3.4.1. The Case Manager/Social Worker is responsible for confirming client safety and following up with the client, legal representative, family, etc.

3. Reporting Fraud

- 3.1. Individual Providers and Clients
 - 3.1.1. Any IP or Client who witnesses or suspects the occurrence of Medicaid fraud must immediately report the allegation to a CDWA team member, or directly to the Washington State Attorney General at 1-360-586-8888 or by email at MFCUreferrals@at.wa.gov.
 - 3.1.2. Reporters of fraud, waste and abuse are not entitled to any updates or information

regarding the investigation and/or resolution of a report.

3.2. CDWA Administrative Staff

3.2.1. Any CDWA team member who witnesses, is made aware of, or suspects the occurrence of Medicaid Fraud involving IPs or Clients, must:

3.2.1.1. Document the details of the allegation, including but not limited to:

3.2.1.1.1. The individual(s) involved in the allegation;

3.2.1.1.2. Any times and dates associated with the allegation; and

3.2.1.1.3. A description of the allegation.

3.2.1.2. Review the provided details to determine the initial credibility of the allegation. Credible allegations of Fraud imply that the reviewer, using their professional judgement, concluded that the existence of Fraud is more probable than not.

3.2.1.3. Report the details of credible Allegations of Fraud to the Attorney General within five (5) business days from the date of credibility determination.

3.2.1.4. CDWA, its affiliates and subcontractors shall cooperate with the Attorney General and DSHS on Fraud investigations.

3.3. Any CDWA team member who witnesses, is made aware of, or suspects the occurrence of Medicaid fraud happening within CDWA must follow the reporting procedure outlined in the corporate *Fraud, Waste and Abuse policy, AD-AD-030-1.0-All-All*.

3.4. If DSHS notifies CDWA that a Credible Allegation of Fraud exists, CDWA will use its professional judgement to review said Credible Allegation of Fraud.

4. Documentation

4.1. The CDWA team member documents information about the incident(s)/allegation(s) in the applicable client's electronic record. This documentation includes information collected in the initial report, actions taken, and any follow up resolutions.

5. Quality Assurance

5.1. CDWA's Quality Assurance team reviews reported incidents and responses on a periodic basis. The team reviews incident details as needed to identify reporting trends.

5.2. The Compliance Director reviews reported fraud allegations and responses on a periodic basis.

INTERNAL CONTROL

CDWA's Regional Director and overseeing Senior Director routinely monitor Reportable Incident case records for proper documentation and verifying that appropriate timelines were met.

ADDITIONAL INFORMATION

Relevant Materials:	Policy: Fraud, Waste and Abuse, AD-AD-030-1.0-All-All Module: Abuse, Neglect and Exploitation Reporting False Claims Training Flyer CDCN's Fraud Brochure
Relevant Regulations:	Revised Code of Washington ("RCW") chapter 74.34 Abuse of Vulnerable Adults RCW chapter 26.44.030 Abuse of Children – Reports RCW 74.66.005 – 74.66.130
Policy Group(s):	Operations
Subject Matter Expert:	WA Regional Director
Applicable States:	Washington
Applicable Entities:	CDWA
Policy Review Cycle:	Biennially
Date Approved:	6/24/2021
Policy History:	On December 21, 2020, this Policy was created. On March 17, 2021, this Policy was approved by WA DSHS. On June 24, 2021, this Policy was updated with the Attorney General's contact information.

CDWA IP Corrective Action, Suspension and Terminations

POLICY

It is the intent of Consumer Direct Care Network Washington (CDWA) to ensure a safe, efficient, and productive workplace for all employees. As such, it is necessary to establish this progressive corrective action process. This process is to ensure that all Individual Providers (IPs) understand what is expected of them. In the event that corrective action is necessary, it is the intent of CDWA's management to follow the process at each appropriate step, understanding that there are times and situations where it may be necessary and appropriate to skip steps in the corrective action process based on the severity of the issue or incident.

PURPOSE

The purpose of this Policy is to establish CDWA's policy and procedures for handling corrective actions to promote the efficient operation of our company and minimize unnecessary disruptions.

SCOPE

This Policy applies to all employees in a Caregiver IP role.

DEFINITIONS

Corrective Action

A progressive process designed to inform IPs of deficiencies in their work or behavior and to give them the tools and counseling available to help them become successful. Reasons for Corrective Action include, but are not limited to:

- Work Week Limit Violations
- Client Authorization Violations
- Expired Training Credentials
- Conduct and/or Investigation Outcome
- IP Handbook Violations

The progressive corrective action steps will be cumulative for all Clients the IP works for, even if violations are different for each step. Additional violations, regardless of type, will fall into the next progressive corrective action step.

Documented Notice

A verbal conversation or electronic communication that is designed to inform the IP of initial violations. There will be a documented record of this communication in the IP's worker profile.

First Written Warning

A written warning is the second step of the progressive corrective action process. This step may also be used as a first step for more severe violations by an IP.

Final Written Warning

A final written warning is the third step in the progressive corrective action process. This step may also be used as a first step for even more severe violations by an IP.

Termination

Termination of Employment is the final step in the progressive corrective action process. This step is used when an IP has been given multiple opportunities to correct one or more violations but has continually failed to do so. There may be some violations that are severe enough in nature to require immediate termination.

PROCEDURE

Step 1 – Documented Notice

Step 1 results from a first incident or policy violation and brings attention to the existing performance, conduct, or other issues. CDWA will notify the IP via email and Workday notification that coaching has been documented. CDWA will also attempt to provide coaching via a phone call.

Step 2 – First Written Warning

Step 2 results from a second incident or policy violation. CDWA will notify the IP, as well as the Client, that a First Written Warning has been issued. The IP will be notified via email and Workday notification. The IP has the right to Union representation during discussions related to this warning. The Client will be notified by phone call and/or email.

Step 3 – Final Written Warning

Step 3 results from a third incident or policy violation. CDWA will notify the IP, as well as the Client, Case Manager, and SEIU 775, that a Final Written Warning has been issued. The IP will be notified via email and Workday notification. The IP has the right to Union representation during discussions related to this warning. The Client will be notified by phone call and/or email. The Case Manager will be notified through CARE notifications. SEIU 775 will be notified via email.

Step 4 – Termination of Employment

Step 4 results from continued incidents or policy violations following a Final Written Warning. Step 4 may also be used in cases of severe situations. Generally, CDWA will try to exercise the progressive nature of this policy by first providing coaching and issuing a First and Final Written Warning before proceeding to termination of employment.

However, CDWA reserves the right to combine and skip steps depending on the circumstances of each situation and the nature of the violation.

CDWA will notify the IP, as well as the Client, Case Manager, and SEIU 775 that a Termination of Employment notice has been issued. The IP will be notified via email. The Client will be notified by phone call and/or email. The Case Manager will be notified through CARE notifications. SEIU 775 will be notified via email.

The IP has the right to Union representation during discussions related to employment termination. The IP will be put on administrative hold pending termination review. The IP must request a meeting with Union representation within five (5) business days of the termination date listed in the email notice, otherwise CDWA will assume the IP is waiving their right to representation and will proceed with termination.

A terminated IP may be eligible to reapply 90 days after their termination date. CDWA reserves the right to deny re-applications based on the termination reason.

Immediate Termination of Employment

Immediate termination, without following the steps of the progressive corrective action process, may be initiated in severe and substantiated situations including, but not limited to:

- Serious safety violations
- Harassment and/or discrimination
- Workplace violence
- Illegal behavior, which may also be reported to local law enforcement authorities
- Theft
- Fraud
- Abuse, neglect, and/or exploitation
- Working while intoxicated or under the influence of drugs or alcohol
- Other serious violations of policy

Suspension or Administrative Hold

There may be situations in which an IP will be placed on Suspension or Administrative Hold (not okay to provide paid care) temporarily pending the outcome of an investigation or because of expired credentials or background check.

In cases of suspension or hold, the IP, Client and the Client's Case Manager will be informed.

Documentation

The IP will have access to all corrective action documentation through their Workday profile.

Corrective Action Expiration

Corrective actions will expire twelve months after they are issued but will remain in the IP's personnel file indefinitely. Any subsequent corrective actions will revert to the prior step in the process.

INTERNAL CONTROL

All corrective action measures will be coordinated with Human Resources.

ADDITIONAL INFORMATION

Relevant Materials:	CDWA IP Handbook
Relevant Regulations:	N/A
Policy Group(s):	Human Resources Operations
Subject Matter Expert:	HR Director
Applicable States:	Washington
Applicable Entities:	CDWA
Policy Review Cycle:	Annually
Date Approved:	2/13/2023
Policy History:	On November 9, 2022 , this Policy was created. December 20, 2022 DSHS approved this policy.