

Information Memorandum Transmittal Aging and People with Disabilities



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Number: APD-IM-18-037

Issue date: 4/27/2018

Topic: Long Term Care

Due date:

Subject: Oregon ACCESS Enhancements - May 7, 2018

Applies to (check all that apply):

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

Message:

The following Oregon ACCESS enhancements will be available for Medicaid and OPI use on May 7, 2018 and will include the following updates:

- **On the CAPS2 In-Home Service Plan 546N form -**
 - A new note in Section 3, will be added which reads:
 - 'Local Office: Do not hand out this 546N to the consumer or HCW.'
 - If the service period indicated on the 546N is for more than one day (i.e. 6/10/18 – 5/31/19), a new note will be added in Section 3 which reads:
 - 'The rate on the 546N may not reflect HCW differential payments. Check the HINQ screen to verify the current rate.'
 - This note will not appear in Section 3 if the service period is for one service day (i.e. 6/10/18 – 6/10/18).
- **On the Task List and Service Authorization 598N form –**
 - The Hours section title will be changed as follows:
 - The title for the monthly version of the form shall read 'Hours Authorized Per Month:'.

- The title for the 2-week version of the form shall read ‘Hours Authorized Per Pay Period:’.
- The ‘Rate’ and ‘Total’ columns shall be removed from the Task List and Service Authorization 598N form.
 - This change shall be made to both the monthly and the 2-week versions of the form.
- The note on the signature page of this form shall read as follows:
 - ‘NOTE: The task list reflects the authorized tasks, hours, and mileage for the homecare worker. The hours and mileage may be prorated if the homecare worker is not authorized to work for an entire pay period.
Hourly wage is indicated on the voucher and is subject to collective bargaining.
Homecare workers are not authorized to provide animal care (including service animals), yard work, or services to individuals that are hospitalized.’
 - The 2-week version of the form only shall also include the following:
 - ‘A Pay Period consists of two (2) consecutive Work Weeks. A Work Week is defined as Sunday 12:00 AM through Saturday 11:59 PM.’
- Additional information:
 - The 546N must not be handed out to the consumer or the HCW as the rates on this form may not always be correct.
 - If local office staff wish to look up homecare worker rates you should be using the HINQ screens (once a voucher has been created). Homecare workers may refer to their vouchers for their current hourly rate.
 - If homecare workers have questions about their PDC or EHCW rate they may contact the Oregon Homecare Commission via telephone at 1-877-867-0077 or via email at OHCC@dhsosha.state.or.us.

If you have any questions about this information, contact:

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