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| <b>Topic:</b>               | Personal Support Worker Employment Services Enrollment |
| <b>Date Issued/Updated:</b> | 11/4/2016, Updated 06/230/2021                         |

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## Overview

**Description:** Personal Support Worker Enrollment and Qualification to Provide Employment Services to People with Intellectual or Developmental Disabilities (IDD).

**Purpose/Rationale:** The Oregon Department of Human Services (ODHS) requires that employment services for individuals with intellectual and developmental disabilities (I/DD) are provided by people who are trained under competency-based training standards. As a step toward meeting this requirement the ODHS adopted [Core Competencies and Training Standards for Supported Employment Professionals](#) dated 12/5/2013. Note: per the Collective Bargaining Agreement and OAR 411-345, the only employment service PSWs may provide is Job Coaching.

**Applicability:** Personal Support Workers who deliver the employment service Job Coaching, Community Developmental Disabilities Programs, Brokerages, Office of Developmental Disabilities Services.

## Procedure(s) that apply:

### **Employment Service Provider Enrollment - PSW**

To enroll as a Personal Support Worker (PSW) to deliver the employment service Job Coaching, the following is required:

- Contact a CDDP or Brokerage and inform them that you want to become a PSW Job Coach and request a criminal history background check. The background check will need to be completed every two years to remain in compliance with OAR 407-007. Background checks may take up to six (6) weeks. The provider MUST have this completed BEFORE they contact any client of ODDS.
- The CDDP or Brokerage will provide the prospective PSW with a Provider Enrollment Application and Agreement (PEAA or PEA). The prospective PSW will need to provide the following:
  - Legal name and valid address
  - Social Security number or Tax Identification Number
  - Contact information such as phone number and email address
- Complete the 12 Core Competency modules before enrollment. See below for more information about the Core Competency modules.

- Send an email to [EmploymentTraining.Review@dhs.oh.state.or.us](mailto:EmploymentTraining.Review@dhs.oh.state.or.us) stating that you have completed the Core Competency modules.

**Personal Support Worker (PSW)  
Provider Enrollment Application and Agreement**  
(Revised 08/01/2018)

This Provider Enrollment Application and Agreement (*Agreement*), sets forth the conditions and agreements for being enrolled as a Medicaid Personal Support Worker (*Provider*) with the State of Oregon Department of Human Services (DHS), Office of Developmental Disabilities Services (ODDS), and to receive a Provider number to receive payment for services furnished by the Provider to approved Medicaid eligible individuals (*Recipients*) in Oregon. Payments for services are made using federal Medicaid and state funds.

**Type of action requested**

New enrollment     Renewal or re-enrollment

**Provider type requested (mark all that apply)**

Note: All new and renewing providers will be enrolled as Personal Support Workers (84-803). Please only check those additional provider types which apply to your enrollment.

Legal name (first name, middle initial, last name as listed on your current SSN card):

PSW Children Intensive In-Home Services (84-801)

PSW State Plan Personal Care (84-800)

PSW Employment Job Coach (84-809)\*

\*PSWs enrolling as a Job Coach (84-809) must have the appropriate training required in Oregon Administrative Rule (OAR) 411-345-0030 prior to enrollment and must submit training documentation with this application. Job Coach enrollment is good for two years only and must be renewed separately from this agreement.

- Be sure to check the appropriate Provider Type Requested (circled in image above). At the time of enrollment, or renewal, a new specialty will be added to the provider profile in eXPRS. Without this new specialty code attached to the provider's profile, they will NOT be able to bill for Job Coaching services as an authorized provider of Employment Services.
- The CDDP or Brokerage will submit the completed forms to the Office of Developmental Disabilities Services for processing. Once all documents have been reviewed and approved, a Provider Identification Number will be issued.
- Once the Provider ID number is obtained, and an individual for which the PSW will provide support has been identified, the new provider must enroll with the current Fiscal Management System (FMS). The FMS issues payments for services delivered by PSWs, and therefore enrollment is required to get paid. Ask the CDDP or Brokerage how to enroll with the current FMS.
- Providers will also want to enroll in the eXPRS system. eXPRS enrollment is only required upon initial enrollment, not for every client. This enrollment is to enable providers to have access to the eXPRS payment system to directly submit the service delivery dates and time worked information needed for services delivered to the customers who employ them, which is then used to create claims. These claims in eXPRS are what will generate the payment the provider will receive from the designated fiscal intermediary or fiscal

management system agent.

The eXPRS User Enrollment form for PSW providers is available here:

<http://apps.state.or.us/exprsDocs/EnrollIndividualProviderUserPSW.pdf>

Instructions on how to complete this form are available here:

<http://apps.state.or.us/exprsDocs/EnrollIndividualProviderUserPSWInstructions.pdf>

- Oregon Home Care Commission (OHCC) Registry Enrollment: This enrollment is optional, but HIGHLY recommended. This enrollment is to establish the provider's profile on the OHCC Registry and Referral System. This enrollment must be completed IF the provider wants to be active in registry searches for other potential PSW employment opportunities. The OHCC Registry and Referral System website can be found here: <https://www.or-hcc.org/>

### **Core Competency and Training Standards**

Every prospective Personal Support Worker Job Coach must demonstrate the Core Competencies and Training Standards **prior to enrollment**. Core Competency Modules are described in the [Core Competency Training Worker Guide](#). Once the 12 Core Competency modules are complete, the prospective PSW should send an email to [EmploymentTraining.Review@dhsosha.state.or.us](mailto:EmploymentTraining.Review@dhsosha.state.or.us) and state the Core Competency trainings are completed. *ODHS expects that any employment professional will maintain records to furnish verification of training and/or credentialing requirements met.*

### **Annual Continuing Education Requirement**

Every Personal Support Worker Job Coach must complete 12 hours of Department Approved Supported Employment training annually as a continuing education requirement. The Core Competency trainings count as 8 hours of Department Approved training in the first year.

### **Renewing Certification**

Every two years verification of training requirements met is required. Verification of continuing education training must be submitted to: [EmploymentTraining.Review@dhsosha.state.or.us](mailto:EmploymentTraining.Review@dhsosha.state.or.us). Please indicate that the verification is for renewal of certification. The proof of continuing education credits should be sent in AT LEAST 30 days prior to renewal to be sure that the PSW's Job Coach specialty does not terminate.

### **Form(s) that apply:**

ODHS expects that any employment professional will maintain records to furnish verification of training and/or credentialing requirements met upon request from any source.

Information regarding Department Approved competency-based training courses that will satisfy initial and ongoing training requirements is available on

<http://www.oregon.gov/DHS/SENIORS-DISABILITIES/DD/Pages/Employment-Service-Provider-Resources.aspx>.

### **Definition(s):**

"Employment Professional" means an employee of an agency service provider, an independent provider, or an employee of an independent provider who has the qualifications and training to provide employment services under OAR 411-345, including individual employment support,

small group employment support, discovery, or employment path services. PSW Job Coaches who deliver Job Coaching under OAR 411-345 are considered Employment Professionals.

"Independent Provider" means:

- (a) A personal support worker; or
- (b) An independent contractor delivering services including nursing services, discovery, job development, or behavior consultation.

### **Reference(s):**

- [Executive Order 15-01](#)
- Oregon Administrative Rule (OAR) 411-345 Employment Services for Individuals with Intellectual or Developmental Disabilities
- [Core Competencies and Training Standards for Supported Employment Professionals.](#)
- Transmittal [APD-AR-15-004](#): Training and Credentialing Requirements for Employment Service Providers
- [Core Competency Training Worker Guide](#)
- [Employment Professional Qualification and Training Worker Guide](#)

### **Frequently Asked Questions:**

Q: Where can I find training in my area?

A: The list of Department Approved Training Courses may be accessed on [Oregon.gov](#). There are a variety of courses available, including in person and online courses, and include some free courses.

Q: Can a PSW begin Job Coaching before they have completed all of the First Year Requirements?

A: No. The 12 Core Competency courses must be completed before a prospective PSW Job Coach will be enrolled and before job coaching services can start.

Q: Does a PSW have to complete a new Provider Enrollment Agreement (PEA) to provide Job Coaching services to a client they are already serving?

A: Yes. The Job Coaching specialty code will not be added to a provider's enrollment without the appropriate training verification.

Q: Will I need to submit a Provider Enrollment agreement to both my local CDDP and Brokerage if I want to serve clients through both?

A: No. A separate enrollment is NOT required for CDDP and Brokerage clients, as the individual is enrolling with the State of Oregon Department of Human Services.

### **Contact(s):**

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