



Consumer Direct Employer (CDE) Services **Individual Provider (IP) Employment Handbook**

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EVERY LIFE. EVERY MOMENT. EVERY DAY.

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Section 1:

INTRODUCTION

Frequently Used Terms

Administrative hold: Period of time that you are not able to provide paid care to your Client because you are out of compliance with one or more employment requirements.

Assigned Service Coordinator (ASC): The CDWA employee assigned to help you with pay questions, account maintenance, and other inquiries. ASCs are assigned to the Client, so you may interact with multiple ASCs if you work for more than one Client.

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 the Client's Individual Providers.

ADP: Payroll processing service used by CDWA.

CareAttend: Mobile application for submitting hours to comply with EVV requirements.

Collective Bargaining Agreement (CBA): The agreement between CDWA and SEIU 775 regarding IP wages, benefits, and working conditions.

Client: An individual authorized by DSHS to receive in-home personal care or respite services. For the purpose of this manual the use of the term Client includes an Authorized Representative. The Client is responsible for the functions and duties of the managing employer of their IP(s).

Consumer Directed Employer (CDE): The entity contracted to serve as the legal employer for Individual Providers of in-home personal care and respite services in Washington state for the purposes of performing administrative and employer functions. Consumer Direct Care Network Washington (CDWA): The CDE for Washington state.

Cumulative Career Hours (CCH): The total number of personal care and respite hours worked as an IP since July 2005. CCH forms the basis of placement on the wage scale. CCH does not include PTO, Training, or Admin time.

Electronic Visit Verification (EVV): A method used to verify that in-home personal care and respite services were provided. A federal requirement from the 21st Century Cures Act. CDWA uses the CareAttend system for EVV compliance.

Individual Provider (IP): An individual employed by the CDE to provide personal care or respite services to individuals authorized by DSHS to receive in-home services.

Interactive Voice Recognition (IVR): Phone-based option for an IP to submit hours worked. This option is not EVV-compliant.

Paid Time Off (PTO): Time that an IP is not working while still receiving regular wages. PTO is based on the CBA.

Workday: A program used by CDWA for hiring and employment management. This is where an IP will do activities such as onboarding, CDWA-specific trainings, edit contact information, manage payment elections, and complete federal withholding elections (W-4).

Work Week Limit (WWL): The total number of service hours an IP may work in a week (Sunday-Saturday). WWLs are the rules developed by DSHS to establish a process for allowing overtime to IPs in response to the Department of Labor Companionship Exemption. The standard WWL is set to 40 hours.



Introduction

Introduction to Consumer Direct Care Network Washington (CDWA)

Welcome to Consumer Direct Care Network Washington! We are excited to have you join our team as an Individual Provider (IP). CDWA is part of Consumer Direct Care Network (CDCN). Founded in 1990, CDCN has expanded across the nation and works with individuals who self-direct their care in their homes and communities. Our foundation is our Mission, Vision, and Values:

Mission

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

Vision

To help people live the life they want.

Values

Respect | Integrity | Service | Excellence

Your role as an IP is an important part of fulfilling our Mission, Vision, and Values. The care and support you provide to individuals help them live as independently as possible.

Important Legal Notice

This handbook provides information about your employment and is not a contract of employment. It is a reference for policies, processes, and program requirements both you and your managing employer must follow.

You are expected to read this handbook and understand the information in it. If you have any questions or do not understand something, please call your Client's Assigned Service Coordinator (ASC).

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 this handbook can always be found at www.ConsumerDirectWA.com



General Information

Self-Direction & The Consumer Directed Employer (CDE)

What is Self-Direction?

Self-direction is the ability to make your own decisions and direct, manage, or make choices for yourself.

Self-direction in long-term care is a care model that prioritizes personal choice and control, and helps people maintain their independence and live the life they want.

When a person self-directs their own care, it means they decide how they want their care delivered, when they want their care delivered, and who they want providing their care.

What is Co-Employment?

Co-employment is an arrangement where two employers both have rights and obligations to the same employee.

In the CDE model:

- CDWA is your legal employer
- Your Client is your managing employer

What is the Consumer Directed Employer Program

The Consumer Directed Employer (CDE) is Washington's Department of Social and Health Services' (DSHS) self-directed co-employment program for providing long-term care services. In this model, CDWA and the Client share employer duties.

As your legal employer, CDWA's responsibilities include, but are not limited to:

- Processing background checks and employment documents
- Monitoring training and credentialing requirements
- Payroll functions

As your managing employer, your Client's responsibilities include:

- Selecting their IP(s)
- Scheduling, supervising, and dismissing their IP(s)
- Training their IP to follow the Plan of Care

Services

Veteran Directed Care (VDC) Program

The Veteran Directed Care (VDC) program is a federal initiative through the Department of Veterans Affairs that allows eligible veterans to receive long-term services and supports in their own homes while maintaining maximum independence and control over how their care is delivered. Through this program, veterans receive a personalized monthly budget and have the flexibility to hire, schedule, and manage their own caregivers.

CDWA partners with the VDC program to serve as the Financial Management Services (FMS) provider. In this role, CDWA manages employer-related responsibilities such as onboarding caregivers, processing background checks, completing hiring documents, issuing payroll, and managing timesheets. This partnership reduces administrative barriers for veterans and ensures they receive timely, accurate support as they direct their own care.

The VDC program helps veterans remain safely in their homes, supports family caregiving when chosen by the veteran, and promotes greater autonomy in managing day-to-day care needs.

Program of All-Inclusive Care for the Elderly (PACE)

CDWA partners with Washington's PACE organizations to support members who are at least 55 years old and meet the state's eligibility requirements for nursing-facility level care. PACE is designed for individuals who want to remain in their homes and communities while receiving comprehensive, coordinated services.

The program provides a full range of support, including medical care, personal care, therapies, transportation, social services, and specialized equipment as needed. PACE organizations manage all Medicare- and Medicaid-covered services through an interdisciplinary team that tailors care plans to each participant. Members receive ongoing support focused on safety, independence, and reducing avoidable hospital or facility stays.

For more information about PACE, please visit: <https://www.dshs.wa.gov/altsa/program-all-inclusive-care-elderly-pace>

Medicaid Alternative Care (MAC) & Tailored Supports for Older Adults (TSOA)

CDWA began working with the MAC & TSOA program in July 2024. It is a program for members who are at least 55 years of age who are eligible for Medicaid but have chosen not to participate in the Medicaid program. The programs provide a variety of support including respite/personal care, housekeeping and errands, and specialized medical equipment and supplies. Members can elect to combine or alternate programs each month.

For more information on this program, please visit:
<https://www.dshs.wa.gov/sites/default/files/publications/documents/22-1739.pdf>

WA Cares Fund (WCF)

WA Cares Fund is a public long-term care insurance program that guarantees coverage for all workers regardless of pre-existing conditions. WCF is managed by the Washington State Department of Social and

Health Services. CDWA is the sole provider of Individual Providers of in-home personal care for this program. WCF provides an option for paying for long-term care.

Key On-Line Resources

Each of these resources plays a key role in your success. These resources will be referenced throughout this handbook.

- **CDWA Website** – You can access resources such as payroll calendars, training materials, and other key information regarding CDWA and the CDW program. www.ConsumerDirectWA.com
- **IP Employment Handbook** – This handbook provides information about your employment. It is a reference for policies, processes, and other key information. The handbook is available on our website. www.ConsumerDirectWA.com/IP-Handbook
- **Direct MyCare web portal** – The web portal is where you will receive important reminders and notices. It is also where you will submit training time, mileage, and PTO. IPs exempt from EVV will also use the web portal to submit time. Important announcements will appear in the lower right corner of the main page. In the web portal you will find:
 - **Notifications Inbox** – This is the envelope icon located in the top right corner. Here you will receive training reminders, background check renewal reminders, Client authorization information, and other key items you may need to act on. It is your responsibility to monitor your DirectMyCare web portal inbox frequently.
 - **Time/Mileage Entry** – This is where IPs exempt from EVV will submit time. All IPs will enter PTO and training time here. You can also find your training authorization balance in this section. More information on time and mileage entry can be found on our website. www.ConsumerDirectWA.com/time-and-mileage-entry/
 - **Pay Stub/W-2 (Link to ADP)** – You can view your current and past pay stubs and your W-2 through the link to ADP found in the web portal. Once in ADP, you can print your pay stubs and tax forms. You can find job aids on how to register for and navigate the ADP website, and how to read your pay stub on our website. www.ConsumerDirectWA.com/payroll/
 - **Workday (Link to Workday)** – You will use Workday to update your personal or contact information and change your pay election method. You will also use Workday to request a leave of absence and change your tax exemptions. You can also access your pay stubs through Workday. Instructional videos on how to perform these tasks are available on our website. www.ConsumerDirectWA.com/IP-Resources
 - **Authorization** – Clients are responsible for assigning hours to their IPs. Here you will be able to see the type of service and number of hours you have been allocated by your Client. You also will be able to view how many hours of your WWL have been used.

- **Client Documents** – Here you will find Service Summaries and Assessment Details for each of your Clients. It is your responsibility to review these before you start working with a Client and also to review any updated documents.
 - **WCF Clients** will provide IPs with a Care Agreement that outlines their care needs or specific tasks required.
- **Qualifications** – This will show any trainings or credentials you have and their expiration date, if they have one.
- **User Profile** – By clicking on your name in the upper right corner, you will find some additional information. This includes your Person ID and IVR PIN numbers, and your CCH and PTO balances



Communicating with CDWA

Communicating with CDWA

Customer Service Hours

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

Contact Information

Email: InfoCDWA@ConsumerDirectCare.com

Toll-Free Phone Number: 866-214-9899

For Deaf and Hard of Hearing: 877-398-7969

Help in other languages:

Arabic: 866-215-6909

Khmer: 866-215-7610

Lao: 866-215-8044

Russian: 866-215-4069

Spanish: 866-215-0131

Ukrainian: 866-215-4674

Cantonese: 866-216-3065

Korean: 866-215-6907

Mandarin: 866-216-1752

Somali: 866-215-5669

Tagalog: 866-215-3817

Vietnamese: 866-215-2762

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

Everett - 906 SE Everett Mall Way Suite 300 Everett, WA 98208

****Please only send mail to our Federal Way Location. Other office locations do not process mail.**

Email

If CDWA needs to communicate sensitive information, we use ZixCorp secure email. For information on how to use Zix mail, please refer to the Zix mail user guide. 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. A CDWA signature will be in the following format:

Name | Title
Consumer Direct Care Network | Washington
Office Address
City, State, Zip
P: xxx-xxx-xxxx
www.consumerdirectWA.com

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If the email does not end with a CDWA signature as indicated above, it is not from CDWA. If you have a concern regarding an email and are unsure if we sent it, 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 from CDWA.

Who to Contact with Questions

CDWA has created a Who to Call resource with common topics you may have questions about. The Who to Call resource is also located on our website. <https://www.consumerdirectwa.com/ip-resources/>

Working for CDWA

Conflict of Interest

Conflicts of interest should always be avoided. A conflict of interest gives you an unfair advantage or affects the relationship between CDWA and a Client.

Conflicting Financial Interest

You should not have an ownership, investment, or compensation interest with any entity with which CDWA has business. You are obligated to disclose any possible current or future conflict of interest to CDWA. A determination will be made based on the information you provide.

Proprietary and Other Confidential Information

You cannot share CDWA's information with any other organization or individual. This includes all forms, 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.

Section 2:

ROLES and RESPONSIBILITIES

Roles and Responsibilities of CDWA



Roles and Responsibilities of CDWA

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

CDWA is responsible for the Employer of Record functions for federal and state hiring requirements, payroll, and tax withholding. CDWA will:

- Perform initial state and federal background checks for all potential IPs
- Keep an electronic IP personnel file with employment documents and employment information
- Provide IPs paid employment-specific orientation and compliance training
- Provide IPs reminders of training and background check renewal dates
- Provide IPs paid yearly mandatory compliance and safety training
- Process time submitted by IPs
- Withhold and deposit Federal income tax, if applicable
- Withhold and deposit Social Security and Medicare taxes (FICA), and federal and state unemployment tax (FUTA/SUTA) payments, if applicable
- Provide workers' compensation coverage
- Follow all federal and state labor laws
- Comply with the collective bargaining agreement (CBA)
- Pay IPs by either direct deposit or pay card
- Educate Clients in the skills needed to act as managing employer and to self-direct their care (for example: 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, if applicable
- Provide information to Case Managers that impact Client care
- File reports as required by contract, state, and federal laws
- Investigate IP claims of being Harassed, Abused, or Discriminated against by their Client



Roles and Responsibilities of the Client/Authorized Representative

Roles and Responsibilities of the Client/Authorized Representative

Client Rights

Clients have the right to:

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

IP Selection

Clients are responsible for selecting their own IPs and referring them to CDWA if they are not already a CDWA employee. As an IP, your Client should not schedule you to work until you have been issued an Okay to Provide Care date specific to that Client. You will not be paid for any work done prior to that date.

IP Client-Specific Orientation

Each Client has specific house rules and employment expectations. The Client should discuss these with you on your first day of work with them. The topics should include:

- Tour of the Client's living space. This may include:
 - Where supplies and equipment are located
 - Living space that is off-limits
 - Emergency exits
 - Location of fire extinguisher
- Overview of the Client's Service Summary or Care Agreement. This includes information about their disability or care needs, such as:
 - Does the Client have trouble falling asleep?
 - Are they sensitive to certain smells?
 - Are they a morning person?
- An explanation and/or 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
- Safety and Security
 - Review Client’s specific transfer/lifting procedures to avoid injury to either you or your Client
 - Explain safety guidelines for any disability-related equipment you will be expected to use
 - Explain household appliances or equipment you will be expected to use
 - Discuss the Client’s backup plan
 - Share how to enter the home, for example: knocking, using a key, etc.
 - Where Standard Precautions supplies are kept, such as for:
 - Washing hands thoroughly before preparing food
 - Washing hands before and after tasks
 - Where plastic gloves are stored
 - Where the sharps container is located, if applicable
- Expectations – Some examples are:
 - Rules about the use of Client’s car, the washing machine, computer/printer, and eating the Client’s food should be discussed. If the Client does not say what the rules are, ask them.
 - Use of cell phones and the Client’s phone during work hours is determined by the Client. (A Client’s disapproval of cell phone use during a shift does not exempt you from using the EVV app or IVR as required).
 - Acceptable clothing in the workplace.
 - Work schedule (such as what days and hours you will be working).
- Remember: Only assigned tasks that are described on your Client’s Service Summary should be performed.

Scheduling

Clients are responsible for setting schedules based on their authorized hours and tasks. You will work with your Client for any schedule changes, not CDWA. You should notify your Client if you are unable to work. Not showing up for work or being late may result in termination.

Both you and your Client are responsible for monitoring the number of hours worked to ensure the Client’s monthly authorized hours are not exceeded.

Performance Reviews

A performance review evaluates how you are doing. Your Client will decide if they want to do a performance review. While regular performance reviews are not required, they are encouraged. Clients are provided information to perform reviews. It is also a good idea for you to ask the Client for feedback about how you are doing. Feedback will help you know if you need to make changes. Clients do not send performance reviews to CDWA.

Performance reviews do not impact pay. Pay scales are set by the CBA.

Backup Plan

Each Client is encouraged to create a backup plan with their Case Manager. Your Client will use their backup plan if an IP cannot work regularly scheduled hours. Your Client should review the backup plan with you. Unapproved overtime is not an acceptable backup plan.

Your Role and Responsibilities as an IP



Your Role and Responsibilities as an Individual Provider (IP)

IP Standards of Practice

As an IP and an employee of CDWA, you are expected to follow the IP Standards of Practice outlined in WAC 246-980-150. You must demonstrate behavior that maintains and respects the Client's rights and safety. This includes, but is not limited to, the following:

Washington State Residency Requirement

- IPs must be legal residents of Washington State while providing services funded by Medicaid or WA Cares .
- Per WAC [388-106-0035](#), personal care services under Washington's long-term care programs are available only to individuals residing in Washington.
- IPs cannot permanently relocate to another state while continuing to bill Washington Medicaid or WA Cares Fund for personal care services.

Guidelines for Out-of-State Travel with Clients*

IPs may provide care while traveling with a client only under the following conditions:

- Temporary Travel Only – The client cannot be out of state for more than 30 days.
- Pre-Approval Required – Travel must be coordinated and approved before departure with the Case Manager (CM).
- Authorized Services Only – Personal care services must be explicitly approved in the client's care plan before departure.
- No Reimbursement for Travel-Related Costs – IPs cannot bill for:
 - Their own travel time.
 - Any travel-related expenses.
 - Services outside the scope of the approved care plan.
- No Services Outside the U.S. –Personal care services cannot be provided outside the United States (Medicaid or WA Cares Fund).
*IPs caring for WA Cares Fund Clients can only claim time for care provided in the state of Washington.
- 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 in in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.
- A long-term care worker may not accept from a Client 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 in in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.

- A long-term care worker may not accept, borrow, or take alcohol or drugs (prescription or non-prescription), including marijuana, from a Client.
- A long-term care worker may not ingest, inject, inhale, or consume in any manner any substance, including prescribed medicine, which impairs their ability to perform their job duties during the time in which they are paid to provide care.
- A long-term care worker may not solicit or accept a role that gives them power over a Client’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 in in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.
- A long-term care worker may not be the landlord for a Client 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 in in an established personal relationship with the Client, preexisting the provision of services, where there is no evidence of exploiting the Client.
 - 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.
- In accordance with Washington Administrative Code (WAC) 388-115-0540 A long-term care worker may not be the spouse of the client, unless the client is receiving services under the Veteran Directed Home Care Program.
- A long-term care worker shall respect a Client’s privacy and shall not take or disseminate photos or videos of a Client that do not respect the Client’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 their legal guardian, prior to taking or disseminating any photo of video of the Client, 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.
- A long-term care worker should not take care of animals in the home this includes:
 - Walking dogs
 - Bathing animals
 - Cleaning up behind animals

IP Expectations

Your Contact Information

It is important to keep your contact (address, phone, email) information current. You will make changes to your contact information in Workday. Instructions are available on our website. www.ConsumerDirectWA.com/IP-Resources You can also email or call us for assistance with updating your information.

Client Property

You are expected to be careful with a Client's property. If you lose or damage a Client's property, you are responsible. You may have to pay for loss or damage to any property.

Client Injury and Serious Incident Reporting

If you are present when a Client is injured, has a serious accident, or an incident that affects their health or safety, you **MUST CALL 911**.

You also must report the incident to the Case Manger right away. If you learn of an incident after it happens, report it as soon as you are able. You can also report an incident to CDWA. CDWA will notify the Case Manager upon receiving a report.

CDWA does not provide emergency care or medical services. The Client should call a doctor or 911 if he or she is in danger or has a medical emergency. If the Client cannot call, you should contact a doctor or call 911.

Roles and Responsibilities of the CM



Role and Responsibilities of the Case Manager

A Case Manager (CM) assists the Client to develop a plan of care that addresses the health and safety needs of the Client. Case managers support a Client's independence by coordinating and helping access needed services. Case managers are custodians of the state's resources and must balance a Client's choice with program limits.

Core case management functions include*:

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

*Core case management functions may not be waived by the Client.

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.

*Supportive case management functions may be waived by the Client.

**WA Cares Fund Program does not provide case management services.

Section 3:

WORKING WITH YOUR CLIENT



Working for CDWA

Working with your Client

Reviewing The Plan of Care

The Service Summary and Assessment Details (together known as the “Plan of Care”) are your guides to perform your specific duties and the requirements to do your job. Before starting work with a Client, you should review the Service Summary with your Client (and/or Authorized Representative). The Plan of Care for each Client that you support is available for viewing and printing in the DirectMyCare web portal. If you require assistance with accessing your Client’s Plan of Care, please contact your CDWA Service Coordinator. See Appendix A for more details on understanding the Plan of Care.

WCF Clients can create a Care Agreement that outlines their needs, specifics tasks and schedules for care. The Client is responsible for creating this Care Agreement and providing it to you.

Nurse Delegated Tasks

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

Nurse Delegated tasks can only be assigned to IPs who have completed training and are credentialed to complete those tasks.

Only an RN licensed in Washington state who is assigned and responsible for working with the Client can delegate a task to you, IF you are 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)
- Non-sterile dressing changes
- Urinary catheterization using clean technique
- Ostomy care in established and healed condition
- Blood glucose monitoring
- Insulin injection (must successfully complete DSHS diabetes training first)
- Gastrostomy feedings in established and healed condition

Exceptions: The following tasks CANNOT be delegated and must only be performed by an RN!

- Injections, other than insulin
- Sterile procedures

- Maintenance of central lines

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

- Nursing assessment
- Nursing diagnosis
- Care planning

If your Client requires Nurse Delegated tasks and/or you are interested in becoming a Nurse Delegated IP, please contact CDWA for further information.

Section 4:

SUBMITTING TIME AND GETTING PAID

Time and Mileage Entry

Service Hours

Service hours are the time that you spend doing approved tasks for your Client(s). Service hours include:

- Personal care
- Respite
- Skills acquisition training

You may not submit hours for any time that your Client is:

- Not eligible for Medicaid*
- Hospitalized*
- Incarcerated
- In an inpatient facility*
- Outside the state of Washington*

*Does not apply to WCF Clients

See the section on Medicaid Fraud, Waste, and Abuse in this handbook for more details.

Note:

- DDA live-in providers may not provide respite and personal care services in the same month.
- Live-in IPs who are the primary caregiver may not claim respite hours or mileage for their Client.

Electronic Visit Verification (EVV)

Non-live-in IPs are required to clock-in/clock-out and submit tasks through one of the approved EVV methods.

Live-in providers are exempt from EVV requirements.

DirectMyCare Web Portal

The DirectMyCare web portal is used by live-in providers to submit time and tasks. If needed, you can make corrections to time, and tasks reported through the portal.

Non-Service Hours and Mileage

Mileage

If your Client has authorized mileage, you may claim mileage for service-related travel up to their authorized limit when you use your personal vehicle. Mileage must be recorded and submitted for the specific dates on which transportation services are provided.

Mileage will be reimbursed per CBA. You will submit mileage through the DirectMyCare web portal.

Paid Time Off (PTO)

The CBA sets PTO accrual. The CBA also sets the PTO cap. Once you meet the cap amount, you will stop accumulating PTO until your balance falls below that amount. PTO hours can roll over from one year to the next. You are able to use PTO however you choose.

PTO must be taken in 15-minute increments.

You will enter your PTO in the DirectMyCare web portal.

Unused PTO will be paid upon termination or resignation, upon request.

Training Time

Training time will be reimbursed per the CBA. You will enter training time in the DirectMyCare web portal.

Administrative Time

You will be paid 15 minutes per pay period for submitting your time. This time will automatically be added to your hours total. You will be paid at your current rate of pay per the CBA.

Travel Time

Travel time is when you travel directly between qualified worksites on the same workday. This may be from one Client's home to another Client's home between work shifts or between a Client's home and a training facility.

Travel time is not authorized for more than 60 minutes between qualified work sites or for more than 7 hours in a work week. Travel time is paid at your current hourly rate. A Travel Time Request form must be completed and submitted to CDWA prior to claiming travel time. This form is found on the CDWA website, www.ConsumerDirectWA.com/time-and-mileage-entry

You can submit travel time through the DirectMyCare web portal.

Time Submission Methods

CDWA offers several methods for submitting your time and mileage. Written and video instructions for each method are available on our website.

Live-in Time Submission Service Time (personal care/respice)

- DirectMyCare web portal
- Care Attend app
- Live-In Provider IVR

Non Live-in (EVV Required) Time Submission Service Time (personal care/respice)

- CareAttend app
- CareAttend EVV Landline
- CareAttend FOB

Non-Service Submission (training, mileage, PTO)

- Direct MyCare web portal

Service & Non-Service Submission Corrections

- Submitted from CareAttend app or IVR: Correct in DirectMyCare portal within 24 hours after submission
- Entries can be corrected in CareAttend prior to submission at the end of a shift
- Submitted from DirectMyCare web portal or after 24 hours: Contact CDWA for corrections
- If no DirectMyCare web portal access: Contact CDWA for corrections
- CareAttend app and IVR entries are captured precisely and then rounded to the nearest quarter hour
- For example, an entry at 3:27 is rounded to 3:30
- Gross hours and non-service time can only be recorded in quarter hour increments
- The 24-hour adjustment timeframe allows CDWA to process shifts quickly and pay IP shifts accurately and timely on the scheduled pay date

Work Week Limits

- A WWL is the total number of service hours you can provide in a work week (Sunday through Saturday).
 - Your WWL is forty (40) hours per week unless you have been assigned a Permanent WWL, or temporary approval has been given by CDWA.
 - Unless approved by CDWA, you may not work more hours than your assigned WWL.
 - Violation of your assigned WWL will result in corrective action.
 - Service hours count toward your WWL. Service hours are time spent providing:
 - Personal care
 - Respite services
 - Skills acquisition training
- Travel time, administrative time and required training time hours do not count toward your WWL.

Types of Work Week Limits

There are different types of WWLs:

- Standard: The WWL is forty (40) hours per week. This type of WWL you will have if you do not have either of the other types.
- Permanent: CDWA will permit an IP to work in excess of 40-hours per week to comply with RCW 74.39A.525(4)(a): A WWL between forty and one-quarter hours and sixty-five hours established by DSHS based upon work performed by the IP in January 2016.
- Work in excess of the permanent WWL will need to follow the temporary request process.
- Temporary: CDWA may permit an IP to temporarily work in excess of their assigned WWL for
- Client health and safety needs.
- A temporary WWL increase should be requested at the time the need is discovered and can only be retroactively approved back one (1) pay period.

Coordinating Your WWL with Your Client's Assigned Hours

You may not work more than your assigned WWL and you must not work more hours for your Client than they are authorized in a month. It is your responsibility to balance the number of hours assigned to you by each Client you provide care for with your assigned WWL. You can compare your WWL to the service time you have submitted in the DirectMyCare web portal.

WWL flexibility for IPs with a WWL of 40.25 Hours and Above

Unless approved by CDWA, you may not work more hours than your assigned WWL. Under specific circumstances, your Client may be able to move your weekly 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. You will not work more than the Client's monthly hours
3. The use of more service hours in one week will not cause the Client to go without essential care in the other weeks of the month
4. You will not work more overtime in the month than you would have if you had worked the hours evenly during the month

If your Client is a participant in New Freedom or Veteran Directed Home Services, they may be eligible to purchase hours more than your WWL. For further information, your Client will need to contact their case manager.

Client Health and Safety

If you have worked all the hours in your work week and need to stay with your Client because of an immediate risk to the Client's health or safety, take these steps:

1. Stay with the Client until the situation is safe and stable
2. If there is an emergency that requires emergency medical services, contact 9-1-1
3. Assist your Client to arrange for backup assistance
4. End your shift as soon as it is safe to do so
5. Contact CDWA within the next business day to explain the situation

Temporary Work Week Limit Increases

CDWA may temporarily approve an IP to work more than their assigned WWL. This may be needed to address situations such as when an IP is temporarily unavailable to work, Client health and safety needs, and to help prevent circumstances that may put the Client at risk for institutionalization. Temporary WWL increase requests should be made directly to your CDWA Service Coordinator by either you or your Client. CDWA will evaluate and respond to these requests. Requests should be submitted before the extra hours are needed. If this is not possible, they should be requested as soon as the need is discovered as they can only be retroactively approved back one (1) pay period.

If you continuously exceed your approved WWL, you may be subject to corrective action.

Overtime

Overtime is paid at one and a half (1.5) times your rate of pay for time worked more than 40-hours per week.

Time Submission Calculator

It is important to ensure that you are working within your WWL and within the monthly authorized hours of your Client(s).

The Time Submission Calculator is available to download from the CDWA website at www.ConsumerDirectWA.com/Time-and-mileage-entry.

The calculator allows you to enter the time you are planning to work for up to three (3) Clients, as well as how many hours have been allocated to you, and your WWL. With this, you can check if your planned work schedule is within your allowed hours.

An instructional video on how to use the calculator is also available on the CDWA website.

Getting Paid

Pay Rates and Pay Rate Changes/Increases

Pay scales are set by the CBA with SEIU 775. You may qualify for wage increases dependent upon additional training. You can find the current CBA here seiu775.org/contracts/

Pay Selection/Payment Methods

CDWA offers two options to receive your pay; direct deposit and a Wisely pay card. Paper checks are not a payment option. Additional details regarding the Wisely pay card can be found here www.ConsumerDirectWA.com/IP-Resources

You selected your payment method when you completed the hiring process. You are able to change your payment method at any time in Workday. When changing your payment method, it may take three (3) to five (5) business days for bank processing. If you are changing from direct deposit to a Wisely pay card, the card will be sent within seven (7) to ten (10) business days to your address on file. Please maintain current contact information to ensure timely delivery.

If we are unable to successfully deposit funds into the account you have provided, we will contact you within three (3) to five (5) business days. In this situation we will issue you a Wisely pay card and deposit your funds on the card. You can choose to switch back to direct deposit any time with correct bank account information.

You will contact the Wisely pay card company directly to report fraud, a lost or stolen card, or request a replacement card. The Wisely customer service line is 1.877.237.4321.

Errors in Payment

If funds are deposited to your account in error, CDWA will take out the amount in the next paycheck to correct the error. If you do not have enough money in that paycheck to cover that amount, CDWA will withhold funds from future paychecks until this dollar amount is repaid. If you no longer work for CDWA you may be sent to collections.

IRS Form W-4

The IRS Form W-4 provides us information on what to withhold for federal income taxes. You completed a W-4 form when completing the hiring process and can change your withholdings at any time. Changes will be made through Workday. CDWA is not able to provide tax advice. If you have

questions regarding how to complete the form, instructions are available on the IRS website www.irs.gov/pub/irs-pdf/fw4.pdf or you will need to consult with a tax professional.

Difficulty of Care Exemption

Certain payments you receive for providing personal care services funded by a Medicaid waiver program are considered Difficulty of Care payments and are not subject to Federal Income Tax (FIT) deductions. If you do not have to pay FIT, we will not report your pay as income, and you will not have to pay FIT on qualifying payments.

The Difficulty of Care exemption applies only to personal care services and relief care. The exemption does not apply to respite care, skills acquisition training, travel time, required training, or PTO.

You are responsible for determining if you meet eligibility for the exemption. You will be required to attest if you meet eligibility. We cannot provide tax advice. If you have questions regarding your eligibility you will need to contact a tax professional.

If your full-time live-in status changes, you must contact CDWA to update your status so we can appropriately withhold FIT. We will regularly do comparisons of IP addresses to Client addresses. If they do not match, we will contact you and the Client to confirm your live-in status.

More information regarding the Difficulty of Care Federal Income Exclusion is available on the IRS website www.irs.gov/individuals/certain-medicaid-waiver-payments-may-be-excludable-from-income.

FICA & FUTA Exemptions

Employees providing domestic services such as personal care, may be exempt from paying certain federal and state taxes based on the employee's age, student status, or family relationship to the Client.

You are responsible for determining if you meet eligibility for the exemption. You will be required to attest if you meet eligibility. We cannot provide tax advice. If you have questions regarding your eligibility, you will need to contact a tax professional.

If you qualify for these exemptions, you must take the exemption.

If your relationship changes, you must contact CDWA to update your status so we can appropriately withhold taxes. More information regarding these exemptions is available in IRS Publication 926:

- **Household Employer's Tax Guide:** www.irs.gov/pub/irs-pdf/p926.pdf and IRS article:
- **Foreign Student Liability for Social Security and Medicare Taxes:** www.irs.gov/individuals/international-taxpayers/foreign-student-liability-for-social-security-and-medicare-taxes

Client Responsibility

CDWA will pay you for all authorized hours that you worked and submitted for payment. The Client should not pay you their Client Responsibility amount. Do not accept money from the Client if they try

to pay you. Please tell the Client to contact CDWA if they have questions regarding Client Responsibility.

Pay Periods and Pay Days

CDWA pays on a bi-weekly schedule. To meet state requirements and ensure timely payment, IPs must submit all time entries accurately and by the designated deadlines each pay period. Late submissions may result in delayed payment and can impact claim processing.

A work week starts Sunday at midnight (12:00:00 am) and ends Saturday at 11:59:59 pm

- Pay days are every other Friday
- There are 26 pay days each year

You can access the current pay calendar on our website www.ConsumerDirectWA.com/IP-Resources. The payroll calendar identifies pay periods and pay dates.

Pay Stubs

Your pay stubs are available in Workday and at MyADP.com. Additional information on accessing your pay stubs and registering for ADP is available on our website www.ConsumerDirectWA.com/IP-Resources.

Final Pay

If your employment is terminated, either voluntarily or involuntarily, your final paycheck will be paid on or before the next regularly scheduled payday.

Garnishments

For garnishment requests, list Consumer Direct Care Network Washington, LLC as your employer. The organization requesting the garnishment will email their request to InfoCDWA@ConsumerDirectCare.com If you believe that there is an error in a garnishment applied to you, please contact CDWA immediately.

Section 5: STAYING COMPLIANT

Background Checks

Washington State Background Check and Fingerprint Check

You are required to pass a Washington state background check, also known as a Name and Date of Birth check, as well as an FBI fingerprint background check before you provide paid care.

CDWA will provide instructions on how to complete the online Background Check Authorization form through the Background Check Central Unit (BCCU). You will receive a background check code after completing the online form. You must give this code to CDWA so we can run your Name and Date of Birth check and receive your results.

Once your Washington state background check has cleared, CDWA will provide instructions on the Fingerprint Application process. CDWA MUST receive your fingerprint results within 120 days from the Okay to Provide Care date. If they are not received in that timeframe, you will be placed on administrative hold and will not be able to work past that 120-day deadline. If you are placed on administrative hold, you will be unable to work until your background check is complete.

Background Check Results

You will receive the results of your background check from the BCCU, and you should keep a copy for your personal records.

Washington state law does not allow CDWA to hire you or pay you if your background check has disqualifying convictions, pending charges, or negative actions.

A list of disqualifying convictions and pending charges can be found in WAC-388-133-0020. 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.

A disqualifying negative action may include a final finding of abuse, neglect, financial exploitation, or mistreatment of a minor or vulnerable adult by DSHS, a court of law, Department of Health, or other disciplining authority. Additional information about negative actions can be found in Chapters 388-71 and 388-825 WAC.

If you have other convictions or pending charges that are not automatically disqualifying, CDWA may determine that you cannot have unsupervised access to minors or vulnerable adults. If this occurs, CDWA can choose not to hire you or can terminate your employment. See CC&S section below for more information.

Background Check Renewal

As a condition of your continuing employment, you must complete the Washington Name and Date of Birth background check at least every two years. However, CDWA may request the state and fingerprint check at any time. CDWA will notify you prior to your renewal date. It is your responsibility to provide the background check code and complete fingerprinting, if required, in a timely manner,

preferably 30 days before your expiration date. If you have not completed the process prior to your expiration date, you will be placed on administrative hold and will not be able to work until the renewal background check process is complete.

Exclusion Checks

CDWA is required to run an Office of the Inspector General (OIG), System for Award Management (SAM), and Social Security Death Master File (SSDMF) exclusion check on you. These exclusion checks are run as part of the hiring process and will continue to be run periodically while you are employed with CDWA. If you appear on one of the checks, CDWA may not be able to hire you or may have to terminate your employment.

Character, Competence, and Suitability (CC&S)

CDWA will use a CC&S review to determine if you can have unsupervised access to minors or vulnerable adults. A CC&S review can be initiated because of background check results or a reported concern about your ability to provide services for a Client.

A separate CC&S review is required for each IP/Client match. CDWA may determine you are not eligible for employment, or you are not able to work with a specific Client. However, you may be eligible to work with a different Client, or with restrictions. Examples of why CDWA may determine you are not eligible to work include alcohol or drug misuse, endangering a Client's health and safety, other non-disqualifying convictions, or pending charges, or being unable or unwilling to provide adequate care to a Client.

Sharing Background Check Results with a Client

CDWA will not share the results of your background check. If your Client requests them, you must provide a copy of your background check results and your Washington State record of arrests and prosecutions (RAP) sheet. If your background check results come back as "Review Required," CDWA must perform a CC&S review. In order to proceed with a CC&S review, you must disclose your background check results to your Client(s). If you choose not to share your background check results or RAP sheet, CDWA will not be able to perform a CC&S review for you and you will not be hired.

TRAINING AND CREDENTIALING LEARNING

Your learning benefits start as soon as you become an IP. You will get learning experiences that will help you give high-quality care to your Client or loved one, as well as opportunities to build your skill set, grow professionally, and increase your technical knowledge.

Required Training

Many IPs have basic training requirements. Additionally, some IPs will need to complete 12 hours of Continuing Education (CE) each year before their birthday. Details about the IP categories and training requirements can be found at www.myseiu.be/cdwa-my-training

Training/Credentialing Reminders

If you have a Continuing Education requirement, CDWA will send you reminders prior to your due date. If you have a credential requirement, CDWA will send you reminders prior to its expiration date. These reminders will be available in your DirectMyCare web portal notification section.

If you do not complete your requirements by the deadline, you will be out of compliance with the requirements of being an IP and CDWA will place you on administrative hold. During this time, you will be unable to work with your Client(s). You will remain on administrative hold until you have completed your requirements and CDWA has received confirmation from either the SEIU 775 Benefits Group (for Continuing Education) or the Department of Health (for credentialing). Details about the IP categories and training requirements can be found at www.myseiu.be/cdwa-my-training.

To find Continuing Education classes in English and other languages:

- Visit SEIU 775 Benefits Group at www.myseiu.be/cdwa-ce
- Call the Member Resource Center (MRC) at 1.866.371.3200 Monday through Friday from 8am-4:30pm

Visit the DSHS, Aging and Long-Term Support Administration (AL TSA) website for information about training for long-term care workers at

fortress.wa.gov/dshs/asdsaapps/Professional/training/training.aspx

CDWA Annual Compliance Training

There will be a CDWA Compliance Training requirement to complete every year. Federal and Washington State regulations requires this training.

Note: This is separate from any other training requirements and all IPs have to complete this training.

A notice will be sent out with instructions on how to complete this training and how long you have to complete it. The training will be done through Workday. If you do not complete the training by the deadline, you may be subject to corrective action up to and including termination of your employment with CDWA.

This is a paid training.

Section 6: REPORTING

Reporting

Your safety and your Client's safety are of primary importance.

When you suffer a workplace injury, it is very important to reach out to CDWA immediately.

And, as mandatory reporters, any time it is suspected that the Client's welfare is at risk, it needs to be reported to CDWA immediately, and in some circumstances, to APS or CPS.

The following pages will review:

- Workplace Injury
- Medicaid Fraud, Waste, and Abuse
- Harassment, Abuse, and Discrimination
- Adult Protective Services/Children's Protective Services

Workplace Injury

You are expected to follow all safety rules and procedures for a safe working environment and to prevent workplace accidents. You should report any unsafe conditions, equipment, or practices immediately to the Client or CDWA or by calling the hotline 877.532.8542.

Violence in the Workplace

Verbal threats, threatening behavior, bullying, and acts of violence are not allowed. If this kind of behavior is directed toward you or another person, report it right away to CDWA and the authorities. If you threaten, bully, or act aggressively toward a Client, another IP, visitor, guest, or other individual, your behavior will be reported immediately. The police may be called. Other actions may also be taken. You may be dismissed from working with a Client or your employment with CDWA may be terminated. A Client who acts this way could be discharged from receiving services from CDWA.

Workplace Injury Reporting

CDWA is concerned about any injury in the workplace. If you are injured at work or get an illness caused by work, you must:

1. Get medical help if you need it.
2. If the injury is serious and life-threatening, someone should call 9-1-1.
3. If the injury needs medical treatment (but is not life-threatening), you should go to an urgent care clinic or doctor's office. If you cannot get to a clinic or a doctor's office, go to the emergency room.
4. You must report your injury to CDWA immediately, or if unable then as soon as possible within 24 hours following the accident by calling 877.532.8542.
5. Tell the Client of the injury or illness before you leave work if the injury is not life-threatening.

Failure to comply with these steps could result in corrective action.

Additional information on workplace injury reporting is available in the resources section www.ConsumerDirectWA.com/Injury-Reporting/

Access to Personal Protective Equipment (PPE)

Clients must provide gloves to you for hands-on personal care tasks. You may also request PPE by completing a request in Workday.

www.ConsumerDirectWA.com/Request-PPE

Driving/Transportation

CDWA has a safe driving program. As part of employment orientation and on an annual basis, you will be required to view the safe driving video in Workday.

Driver's Licenses

If you accept a driving assignment with a Client, you are required to have a valid and current driver's license.

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 upon request.

You must immediately report to CDWA if your driver's license has been suspended or revoked, or if you are unable to maintain insurance. This will impact your continued ability to drive as part of your employment.

CDWA may request updated copies of current and valid driver's license and/or proof of insurance at any time.

If a Client chooses to let you drive their vehicle, the Client assumes liability and responsibility for their own insurance. CDWA does not insure you while operating the Client's vehicle.

Medicaid Fraud, Waste, and Abuse

Information from the Fraud, Waste and Abuse Policy is below.

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.
 - Submits time for dates their Client was in the hospital.
 - Accepts pay for time the IP did not work.
 - Accepts 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 they were not done.
 - Forges another person's signature on paperwork.
 - Helps a Client get services or supplies that are not required for their 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 their 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 payments for services.
 - Fails to report overpayments.
 - Alters claim forms, medical records, or receipts to receive a higher payment.

The False Claims Act (32 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.
- Summaries of the FCA and applicable State statutes are included in the Policies section of this handbook.

Summaries of the FCA and applicable State statutes are included in the Policies section 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

If you witness or suspect the occurrence of Medicaid fraud you must report the allegation to a CDWA team member or directly to the Washington State Attorney General’s office at

- <https://fortress.wa.gov/atg/formhandler/ago/mfcucomplaintform.aspx> as close to the date of discovery as possible.
- Email: MFCUreferrals@atg.wa.gov
- Phone 360.586.8888

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 in the Policies section of this handbook.

Harassment, Abuse, and Discrimination

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

Purpose:

To provide you with a range of solutions that you can consider trying if you are feeling uncomfortable, unsafe, experiencing harassment, abuse or discrimination while providing care to a Client.

Summary of levels of concern:

In an attempt to address the range of situations or behaviors that you may encounter, three levels of concern have been identified:

Level 1

You feel uncomfortable with behavior or conduct of the Client or somebody in the Client's household, but safe.

Possible Interventions:

- It is appropriate for you to voice concerns to a Client (or other individual). The Client (or other individual) may or may not be aware of their behavior(s). If you feel comfortable expressing concerns, ask the individual to stop the behavior and explain that the behavior makes you feel uncomfortable.
- If it is the Client's behavior making you uncomfortable, review the Client's Plan of Care to see if the particular behavior is addressed in the Plan of Care and if there are interventions listed to help you address their behavior(s).
- Contact the CDWA HAD reporting line at 877.532.8542.
- For new Client behavior that may be related to diagnosis, contact the Client's CM for suggestions or to report new behavior(s).

LEVEL 2

You feel unsafe with behavior or conduct of the Client or somebody in the Client's household but do not want/need to immediately leave the situation.

Possible Interventions:

- Review all the possible interventions listed in Level 1.
- Contact the CDWA HAD reporting line at 877.532.8542 to report the behavior(s).
- Depending on the reason for the behaviors, you may consider accessing specialized training to help you better understand the Client's unique behavioral needs. For example, inappropriate

behaviors and interventions for a Client with dementia, may vary from someone with a traumatic brain injury, a developmental disability, or mental health issues.

- If you no longer wish to provide care for the Client, tell CDWA that you no longer feel safe caring for this Client.

LEVEL 3

You feel unsafe with the behavior or conduct of the Client or somebody in the Client's household and want or need to immediately leave the situation.

Possible Interventions:

- Leave the home, then immediately call the CDWA HAD reporting line at 877.532.8542 and the Client's CM to let them know that you left, why and what happened. If there are concerns about leaving the Client alone and you are unable to contact the Client's CM, attempt to contact a supervisor or other DSHS/AAA staff.
- If appropriate, call 911, then immediately call the Client's CM to let them know that you left, why and what happened. If there are concerns about leaving the Client alone and you are unable to contact the Client's CM, attempt to contact a supervisor or other DSHS/AAA staff.
- Review and consider the interventions listed in levels 1 and 2.

The following is a list of resources that may help you understand a Client's behaviors and provide general interventions that can be used with certain behaviors:

- Developmental Disabilities Training: <https://fortress.wa.gov/dshs/adsaapps/TPTesting/>
- Traumatic Brain Injury (TBI): Resource Center | Brain Injury Alliance of Washington - Providing free services to Individuals throughout Washington whose lives are affected by Brain Injury (biawa.org)
- Dementia: <https://www.alz.org/help-support/resources/care-education-resources>
- Mental Health Resources: <https://www.namiwa.org/>
- Diagnosis-specific training offered through the SEIU 775 Benefits Group Training Partnership

Additional resources regarding discrimination and harassment for long-term care workers to utilize:

- US Equal Opportunity Commission: <https://www.eeoc.gov/field-office>
- Washington State Human Rights Commission: <https://www.hum.wa.gov/>
- Crisis Hotline: <https://www.hca.wa.gov/health-care-services-supports/behavioral-health-recovery/mental-health-crisis-lines>

Adult Protective Services (APS) and Children's Protective Services (CPS)

Mandatory Reporting

As an IP, you are a mandatory reporter. By law, if you witness or suspect a vulnerable adult or child is being abused, neglected, or otherwise mistreated, you are required to report it immediately.

Who is a Vulnerable Adult?

A vulnerable adult is a person:

- Sixty years of age or older who does not have the functional, mental, or physical ability to care for himself or herself; or
- Admitted to any facility; or receiving services from home health, hospice, or home care agencies licensed or required to be licensed; or
- Found to be incapacitated; or
- Who has a developmental disability; or
- Receiving services from an individual provider; or
- Who self-directs his or her own care and receives services from a personal aide

What is Abuse, Neglect, or Exploitation?

Abuse is the willful action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment on a vulnerable adult. Abuse includes sexual abuse, mental abuse, physical abuse, and personal exploitation of a vulnerable adult. It includes improper use of restraint against a vulnerable adult.

Neglect means 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 adult, or that fails to avoid or prevent physical or mental harm or pain to a vulnerable adult; or 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 adult's health, welfare, or safety, including but not limited to conduct prohibited.

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

Exploitation means an act of forcing, compelling, or exerting undue influence over a vulnerable adult causing the vulnerable adult to act in a way that is inconsistent with relevant past behavior or causing the vulnerable adult to perform services for the benefit of another.

Abuse is considered any of the following:

Intentionally causing pain, suffering, and/or injury to a vulnerable adult

- Can be physical, mental, sexual, or the improper use of restraints.
- Can be abandonment, neglect, personal exploitation, or financial exploitation of a vulnerable adult
- Can be self-neglect on the part of a vulnerable adult

Reporting

By law, if you witness or suspect a vulnerable adult or child is being abused, neglected, or otherwise mistreated, you are required to report it immediately to Adult Protective Services (APS), Child Protective Services (CPS), or to the Department of Health (DOH).

- Please call 911 if the situation is an EMERGENCY
- Call: 1.866.END.HARM (866.363.4276) to report the abuse of a
 - Child
 - Vulnerable adult
 - Adult with disabilities
- To make an APS report:
 - Online: <https://www.dshs.wa.gov/altsa/home-and-community-services/report-concerns-involving-vulnerable-adults>
 - Call: 877.734.6277
 - Email: apscentralintake@dshs.wa.gov

Section 7:

HUMAN RESOURCES

Human Resources (HR)

As an employee of CDWA, there are policies and processes that need to be followed. This section will specifically address the following:

- Alcohol and Drug-Free Workplace
- Hepatitis B Vaccination
- Employment Verification
- Jury Duty
- Resignation of Employment
- Unemployment
- Non-Discrimination & Workplace Harassment
- Leave of Absence
- Policies

Privacy Awareness

All information about a Client is confidential (private), as is some of the information you may learn about other IPs. This means you cannot share it or talk about it with other people. More information about confidentiality and the Health Insurance Portability and Accountability Act (HIPAA) is in the Privacy Awareness Guide (Appendix D) 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
- Area, State, or Regional Director
- Senior Management

Alcohol and Drug-Free Workplace

Employees must report to work fit for duty and free of any adverse effects of drugs or alcohol. Violating this policy can result in termination of employment.

Hepatitis B

The Hepatitis B (Hep B) vaccine is available to IPs at risk of occupational exposure unless:

- The employee has previously received the complete Hepatitis B vaccination series
- Antibody testing has revealed that the employee is immune
- The vaccine is contraindicated for medical reasons

Availability

The Hep B vaccination series is available at no cost to employees with a risk for occupational exposure once they have completed Orientation & Safety training.

How to Receive the Hep B Vaccination

1. You may decide at any time during your employment with CDWA to receive the Hep B vaccine.
 - a. Send an email to InfoSafety@ConsumerDirectCare.com
 - b. The CDCN Safety Department will gather your information and location
 - c. The CDCN Safety Department will provide you with a voucher to receive the Hep B vaccine at your local Walgreens
 - d. If there is no Walgreens within 30 minutes of your location, the CDCN Safety Department will assist in arranging for you to receive the vaccination at another location
2. The second and third doses
 - a. When it is time for your second and third Hep B vaccination, notify the CDCN Safety Department at InfoSafety@ConsumerDirectCare.com

Counseling

If you choose to have the vaccination, you will receive counseling from a health care provider on the Hepatitis B vaccine, including information on efficacy, safety, method of administration, and the benefits and side effects of being vaccinated.

Employment Verification

Employment Verification Requests

Employment verifications include dates of employment, rate of pay, hours worked, and salary information.

The Work Number is an Equifax service and provides automated income and employment verifications. It should be used for employment verification for

- A new employer
- Housing (other than a Housing Authority)
- Financial employment verification

Those wishing to verify an IP's employment with CDWA can visit www.theworknumber.com/verifiers, or call The Work Number Client Service Center at 1.800.367.5690. The CDWA employer code is 29876.

If the employment verification request is from Child Protective Services, a Housing Authority, or a Stop Work Form, have the completed request form emailed to CDWAHumanResources@ConsumerDirectCare.com.

For any questions, please contact your Client's ASC.

Jury Duty

If you are called for jury duty, CDWA and your Client(s)/managing employer are required to allow you time off to serve. You should notify your Client(s)/managing employer so alternative care for the Client can be arranged.

This time is unpaid. You may use PTO that you have accrued to cover your hours.

Resignation of Employment

Resignation

You should provide your Client(s) two (2) weeks written notice if you are no longer planning to work with them. This allows time for your Client to find a replacement IP. If you choose to resign from CDWA and no longer be an IP, you will provide notice in Workday through a Job Change. Instructions can be found on our website. www.ConsumerDirectWA.com/IP-Resources

Termination

Your Client does have the right to dismiss you. Depending on the reason, CDWA will determine if you are eligible to work with other Clients or if the dismissal is grounds for termination.

CDWA will terminate you if you have not submitted any time in the last 12 months. If this occurs and you have not previously been terminated for cause, you may reapply to be an IP.

Unemployment

If you are no longer an IP or have an interruption in employment, you can apply for unemployment benefits through the Employment Security Department (ESD). CDWA does not determine if you are eligible. You will identify CDWA as your employer. ESD will contact us for information on your work

history and wages with CDWA.

Non-Discrimination & Workplace Harassment

Non-Discrimination in Employment

Discrimination is against the law. CDWA and Clients must follow federal and state laws about discrimination. CDWA and Clients cannot treat you differently because of your:

- Race • Religion • Age • Sexual Orientation • Marital Status • Color • Country of Origin • Gender • Disability • Pregnancy • Veteran Status

If you think that a Client is discriminating against you, immediately report it to CDWA at 866.214.9899 or InfoCDWA@ConsumerDirectCare.com.

Workplace Harassment

CDWA has a zero-tolerance policy regarding harassment in the workplace. This policy applies to employees, leadership, vendors, and contract workers. If you feel you have been harassed by a Client or someone in the Client's home, please see the Harassment, Abuse and Discrimination (HAD) policy below.

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.

HARASSMENT: any verbal, physical, or visual conduct or action that belittles or shows hostility or dislike towards any individual because of race color, religion, gender, national origin, age, disability, physical features, creed, marital status, sexual preference or status with regard to public assistance and which has the purpose or effect of creating an intimidating, hostile or offensive workplace, interferes with an individual's work performance or otherwise adversely affects an individual's employment opportunities.

SEXUAL HARASSMENT: unwelcomed sexual advances, requests for sexual favors, and/or all other verbal, physical, or visual conduct of a sexual or otherwise objectionable nature, where submission is made explicitly or implicitly a term or condition of obtaining or continuing employment or is used as the basis for making employment decisions, or has the purpose or effect of unreasonably interfering with the individual's work performance or creates an intimidating, hostile or offensive work environment. Sexual Harassment also includes third-party situations in which an individual is offended by the sexual interaction, conduct, or communications between others.

If you believe you are a victim of harassment, sexual or otherwise, you may choose to take action yourself before filing a formal complaint. When talking to another individual regarding harassment, remember to state the facts as you see them, describe your feelings or reactions to the incident(s), and state what you would like to happen next.

Discrimination/Harassment Reporting Procedure

If you do not wish to communicate directly with the person(s), or if your attempts have been unsuccessful, please report the behavior to your Client's ASC or the Human Resources Department at CDWA.

You 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 you of the responsibility to also file an internal complaint pursuant to CDWA's Anti-Harassment Policy. We have a responsibility under the law to investigate claims of harassment and to take appropriate remedial measures. We are unable to do so unless you bring the matter to our attention through our own internal complaint procedure.

Violations of CDWA's policy 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 or termination of services.

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

Leave of Absence

You may be eligible for a leave of absence. The type of leave is dependent on the reason for your need. A leave of absence is different than your Paid Time Off (PTO). A leave of absence is taken for a specific circumstance or situation. PTO is accrued based on hours you have worked. PTO can be used as you choose. Please note this section is focused on leaves of absence. We address requesting PTO under the Time and Mileage Entry section of this handbook. If you need to request a leave of absence, you should communicate this to your Client(s) and coordinate the dates you will be on leave. If you have questions regarding leaves, our Human Resources team can assist and support you throughout your leave. You can send questions to InfoCDWA@ConsumerDirectCare.com.

Types of Leave of Absence

Family and Medical Leave Act of 1993

The Family and Medical Leave Act (FMLA) became effective August 5, 1993. It applies to employers with 50 or more employees within a 75-mile radius. The policy of CDWA is to balance the demands of the workplace with the needs of families of employees by allowing an eligible employee to take reasonable leave for legitimate medical reasons, as stated in the FMLA regulations.

Eligibility Requirements:

- The employee must have been employed by CDWA for at least twelve (12) months with no gap greater than seven (7) years.

- The employee must have worked at least 1250 hours with CDWA during the previous 12-month period.

Leave Requirements:

FMLA is job-protected leave that allows an eligible employee to be entitled to a total of twelve (12) weeks of unpaid leave during any 12-month period for any of the following reasons. Note: Employees will be required to exhaust their PTO during an FMLA leave of absence.

To care for the employee's child after birth, or placement for adoption or foster care.

- To care for the employee's spouse, son, daughter, or parent, who has a serious health condition.
- For a serious health condition that makes the employee unable to perform their job. A medical release from the employee's physician is required to return to work.
- Any qualifying urgent need arising out of the fact that the employee's spouse, son, daughter, or parent is a covered military member on "covered active duty;" or
- Twenty-six (26) work weeks of leave during a single 12-month period to care for a covered service member with a serious injury or illness if the eligible employee is the service member's spouse, son, daughter, parent, or next of kin (military caregiver leave).

Your FMLA hours will be based on the average number of hours you worked for the 12 weeks prior to the date of the FMLA request. For more information on this, please contact InfoCDWA@ConsumerDirectCare.com.

Military Leave

Uniformed Services Employment and Reemployment Rights Act (USERRA) applies to all regular employees, regardless of position, length of service, or full- or part-time status. It regulates leaves of absence taken by members of the uniformed services, including reservists, and by National Guard members for training, periods of active military service (whether voluntary or involuntary), and funeral honors duty, as well as for time spent being examined to determine fitness to perform such service.

Military Spousal Leave

An IP whose spouse has received an impending call to active duty during a period of military conflict may take up to 15 days of job-protected leave from work. Their spouse must be a member of the armed forces or National Guard in order to be eligible. This leave also applies to reservists who have been called to active duty.

To qualify:

- Employees must work an average of 20 or more hours per week.
- Leave must be taken prior to or during deployment. Employees can use any combination of accrued PTO or unpaid leave.

Washington Domestic Violence Leave

Victims and their family members can use domestic violence leave for:

- Legal or law enforcement assistance and court proceedings
- Medical and psychological help
- Help from social service programs
- Safety planning, or
- Relocating due to domestic violence

Domestic violence leave is not limited by an IP's available PTO. It can include reasonable amounts of unpaid leave. Employees can also request a reasonable safety accommodation from their employer that may include a job transfer or reassignment, changing their work telephone and/or email address and implementation of safety procedures. An employee's job is protected by law when using this leave.

Washington Emergency Response Leave

Employers with 20 or more full-time employees must allow employees who serve as Volunteer Firefighters, Reserve Peace Officers, or Civil Air Patrol Members to arrive late or be absent from work because they are currently working at or returning from a fire alarm or emergency call. However, they do not qualify for this leave once they have started their scheduled workday unless the employer agrees to provide such an accommodation. Employees must already be working at the emergency call to request this leave from their regular job.

- Employers cannot discipline or discharge an employee for taking this leave.
- Workers must be unpaid volunteer firefighters, reserve peace officers, or Civil Air Patrol members.
- Workers must already be working at the emergency call to request this leave from their regular job.

Washington Paid Family Medical Leave (PFML)

The Paid Family and Medical Leave program (PFML) is a mandatory statewide insurance program, administered by the Employment Security Department (ESD), which provides paid family and medical leave to eligible employees. Washington's Paid Family and Medical Leave program does not replace the federal Family and Medical Leave Act (FMLA). In many cases, PFML and FMLA will run concurrently.

Eligibility

Employees can receive PFML benefits if they meet eligibility criteria and experience a qualifying event. Eligible employees have worked at least 820 hours in Washington State during one of the following:

- The first four of the last five calendar quarters

- The last four calendar quarters immediately before the application for leave

Qualifying Events

- Family Leave
 - Leave to bond with the employee's child during the first 12 months after the child's birth, or the first 12 months after the placement of a child under the age of 18 with the employee
 - Leave to participate in providing care for a family member due to the family member's serious health condition
 - Leave because of a qualifying military urgent need as permitted under the federal Family and Medical Leave Act

Medical Leave

- Medical leave is any leave taken by an employee from work due to the employee's own serious health condition.

Employee Benefits

The weekly PFML benefit amount depends on how much the employee earns in a typical week. The maximum weekly benefit is \$1,000. The minimum claim duration payment is for 8 consecutive hours of leave. Qualified Washington state workers are eligible for:

- Up to 12 weeks of paid family or medical leave
- Up to 16 weeks of leave when family and medical leave are used in combination (e.g., birth mother pregnancy and parental leave)
- An additional two weeks of leave is available as a result of pregnancy complications

Requesting Leave

- Employees must provide at least 30-day notice to CDWA before the leave begins for a foreseeable event such as the birth or placement of a child or a planned surgery. If the need for leave is unforeseeable, like an accident or sudden illness, employees must provide notice as soon as practical. Employees must be on a leave of absence in order to file a claim for PFML benefits. Employees should follow the procedures for requesting a leave of absence found in IP Resources on www.ConsumerDirectWA.com/IP-Resources

Filing a Claim

Filing a paid leave benefits claim with ESD is a separate process from taking a leave of absence from CDWA. Even when an employee has submitted medical or other documentation to support their need for a leave of absence from CDWA, ESD will ask for documentation to support their claim for paid benefits. Claims can be filed online through the state's Paid Family & Medical Leave web page.

How to Request Leave in Workday

You will request the above leaves through Workday by following these steps.

- Log into the DirectMyCare web portal
- Click on the Workday link
- In Workday click on the Absence icon on your dashboard
- Complete your absence request by selecting the leave type and dates. More detailed instructions on requesting a leave of absence are available on our website.
www.ConsumerDirectWA.com/IP-Resources

One of our Human Resources team members will review your leave request and follow-up with you for approval and any needed details or questions.

Seattle Paid Sick and Safe Time (PSST)

PSST is for work performed within Seattle city limits. When clocking out on the CareAttend app, IVR, or submitting your time on the DirectMyCare web portal, you will identify if any of the hours were performed within Seattle city limits. The Seattle Department of Construction and Inspection (SDCI) has published an interactive map to determine Seattle city limits.

<http://www.seattle.gov/Documents/Departments/LaborStandards/Guide-InteractiveMappingTool.pdf>

CDWA is required to display earned PSST hours on your check stub. However, because the PTO benefit through the CBA is more beneficial, you will request PTO, not PSST.

Section 8: SEIU 775

SEIU 775

As an IP in Washington state, you are covered by a union contract between CDWA and SEIU 775. CDWA respects your right to have a union and to participate in union activities. If you have any questions about your CBA negotiated by SEIU 775, or SEIU 775 membership, please reach out to the SEIU 775 Member Resource Center at 866.371.3200 or mrc@seiu775.org

SEIU 775 Benefits Group

775 Benefits Group works in partnership with IPs like you, SEIU 775, the state of Washington, and other home care employers to get you the best caregiver benefits in the nation. Learn more about your learning, health, retirement, and job-matching benefits at www.myseiu.be/welcome-cdwa.

Learning

Your learning benefits start as soon as you become an IP. You will get learning experiences that will help you give high- quality care to your Client or loved one, as well as opportunities to build your skill set, grow professionally, and increase your technical knowledge.

Required Training:

Many IPs have basic training requirements. Additionally, most long-term care workers will need to complete 12 hours of Continuing Education (CE) each year before their birthday. Details about the IP categories and training requirements can be found at: www.myseiu.be/cdwa-my-training.

Training/Credentialing Reminders:

CDWA will notify you prior to your Continuing Education due dates or credential expiration dates. These will be available in your DirectMyCare web portal notification section. If you do not complete the requirements by the deadlines, you will be considered out of compliance with the requirements of being an IP and CDWA will place you on an administrative hold. During this time, you will be unable to work with your Client(s). You will remain on administrative hold until you have completed the requirements and CDWA has received confirmation from SEIU 775 Benefits Group or the Department of Health. Details about the IP categories and training requirements can be found at: www.myseiu.be/cdwa-my-training.

To find Continuing Education classes in English and other languages:

- Visit SEIU 775 Benefits Group at: www.myseiu.be/cdwa-ce
- Call the Member Resource Center (MRC) at: 1.866.371.3200 Monday through Friday from 8am-4:30pm.
- Visit the DSHS, Aging and Long-Term Support Administration website for information about training for long- term care workers.
<https://fortress.wa.gov/dshs/adsaapps/Professional/training/training.aspx>

Health

Eligible IPs can get high-quality and affordable healthcare that includes medical, dental, prescription drug, emotional health, vision, fertility, orthodontia benefits, and more.

Other free health and safety benefits can help your emotional health, reduce stress and anxiety, keep you safer on the job, and give you and your family personal life help resources.

Retirement

The SEIU 775 Secure Retirement Plan is the first of its kind in the nation for caregivers. It was created to help give you additional financial security when you retire. IPs will automatically be enrolled in the plan after meeting the six-month participation services requirement.

Other Health Benefits

Washington Health Benefit Exchange

You can also get healthcare coverage through the Washington Health Benefit Exchange. Depending on where you live and your individual circumstances, several health plan options may be available to you. For more information about Washington Health Benefit Exchange options or to apply for coverage, visit the Health Plan Finder website at: www.WAHealthPlanFinder.org

If you have questions, call the Washington Health Benefit Exchange's Customer Support Center, Monday-Friday 7:30am-8pm at 1.855.923.4633. Help is available in several languages.

If you need help with your application or understanding your health plan options, registered brokers and certified navigators are available to assist you in several languages.

- To find a registered broker, visit the broker search webpage at: https://www.WAHealthPlanFinder.org/HBEWeb/Annon_DisplayBrokerNavigatorSearch.action?brokerNavigat or=BRK
- To find a certified navigator, visit the navigator search webpage at: http://www.WAHealthPlanFinder.org/HBEWeb/Annon_DisplayBrokerNavigatorSearch.action?brokerNavigator= NAV

Carina.org

Need more hours or looking to work with a new Client? Carina is an easy-to-use website where IPs and Clients can meet and match for care based on availability, needs, and interests. Find more information at www.carina.org/providecare/medicaid/washington.

Complaints & Grievances

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. Depending on the situation, you may need to submit a Complaint or a Grievance and follow the correct process.

A Complaint can be about any act, treatment, behavior, or state which you believe is unfair or unjust and is within CDWA's reasonable control. It can be about either a minor or major issue. Some examples of issues that are within CDWA's reasonable control are issues with the hiring process, CDWA's web portal, or customer service issues.

A Grievance is a claim that CDWA is misapplying, misinterpreting, or violating the CBA. Some examples of this may be: failing to get a paycheck; claiming that you were improperly disciplined; PTO or training issues. This list is not exclusive.

If you are not sure whether to follow the Complaint or Grievance process, please contact your Service Coordinator or the SEIU 775 Member Resource Center for assistance.

Complaint Process

Complaints may be submitted either in writing (via email or letter) or verbally (via the phone or an in-person conversation) using the contact information described in the Communicating with CDWA section of this handbook. Language support is available for complaints made in a language other than English.

We ask that individuals 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!

An 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 toward 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 in Appendix G of this handbook.

Grievance Process

If you believe that CDWA is misapplying, misinterpreting, or violating the CBA, you may raise the issue with CDWA and/or the Union. CDWA will disclose to the Union only information necessary for adjudication of the grievance.

Informal grievances may be submitted verbally (via the phone or an in-person conversation) using the contact information described in the Communicating with CDWA section of this handbook, or to the SEIU 775 Member Resource Center. Formal grievances must be made in writing to LaborCDWA@ConsumerDirectCare.com. Language support is available for grievances made in a language other than English.

Informal Grievance

For grievances related to CDWA's payroll system, the Union, on your behalf, has forty-five (45) calendar days from the date you knew of the incident or reasonably could have known about the incident to begin the informal resolution process.

If the issue is not resolved informally, the Union, on your behalf, has forty-five (45) additional calendar days to submit a written grievance.

Written Grievance

A written grievance must be submitted to CDWA within forty-five (45) calendar days of the incident or when you could have reasonably known about the incident giving rise to the grievance. CDWA will meet with you and your union representative within fourteen (14) calendar days of receipt of the written grievance to discuss and resolve the grievance. If the grievance is still unresolved, CDWA will provide a written response to the grievance by email within twenty-one (21) calendar days from the date of the meeting. If the written response does not resolve the grievance, the Union may proceed to mediation or arbitration within fourteen (14) calendar days of receipt of the response.

Mediation

Mediation is optional. Mediation may be requested by you, the Union on your behalf, or by CDWA no later than fourteen (14) calendar days of receipt by the Union of the emailed response from CDWA to

the written grievance. If CDWA and the Union agree to mediate, a neutral mediator is selected, and the parties submit statements of their positions on the issue. A decision by the mediator is final and binding when the issue is successfully resolved by mediation.

Arbitration

CDWA and the Union will mutually agree on an arbitrator within thirty (30) calendar days of the request for arbitration. When an issue is referred by the Union to arbitration, the decision by the arbitrator is final and binding. The arbitrator does not have the power to add to, subtract from, or change the terms of the CBA.

Please see the IP Grievance Policy in Appendix H of this handbook.

Appendices

Appendix A: Understanding the Plan of Care

Appendix B: IP Health and Safety Policy

Appendix C: Drug and Alcohol-Free Workplace Policy

Appendix D: Privacy Awareness

Appendix E: False Claims Act Summary

Appendix F: Reportable Incidents Policy

Appendix G: Complaint Resolution Policy

Appendix H: IP Grievance Policy

Appendix I: IP Corrective Action Policy

Appendix J: Standards of Behavior

What is the Plan of Care?

The Plan of Care summarizes the Client's CARE Assessment, which is created by your Client's Social Worker or Case Manager and lists authorized tasks and authorized hours.

Clients orient IPs initially to the Client's Plan of Care prior to the IP providing services. Whenever there is an annual update or change in the Client's Plan of Care, the Assessment Details will be updated and available on your *DirectMyCare web portal*. You will receive notification of those updates. It is your responsibility to review new and updated Plans of Care for each Client that you serve.

Go step by step through each section

Each Plan of Care consists of PHI and confidential information that includes your Client's name, age, address, functional disabilities, food and other allergies or special eating instructions, medical equipment used by your Client, non-medical service tasks, and monthly hours.

When reviewing your Client's Plan of Care with your Client (and/or Authorized Representative), be sure to go through each separate section and ask questions to clarify what you will need to do or know in order to properly care for your Client. Learn as much as you can about your assigned tasks.

For example:

If personal protective equipment (PPE) or supplies are needed - *Where are they?*

Discussing Your Assigned Tasks with Your Client

It is important to talk with your Client about any specific details of what you are required to do (and not to do) so you can avoid future miscommunication and other problems.

For example:

If your Client has preferences for when or how tasks will be done - *What are their preferences?*

Perform activities that are consistent with your Client's Plan of Care

If a Client has care needs that are not in the Plan of Care, you should contact their Case Manager to report the change. You are expected to assist your Client with care needs necessary to ensure their health and safety until their needs can be reassessed by their Case Manager.

Client Tasks (ADLs and IADLs)

Each Plan of Care has detailed information about their condition and the manner in which services are to be delivered.

There are two sections in the Plan of Care:

1. **Activities of Daily Living (ADL)**, which are all the personal care tasks, and
2. **Instrumental Activities of Daily Living (IADL)**, which include routine household tasks and accessing the community.

ADLs are:

Bathing: Assisting with a full body bath/shower, sponge bath, and/or guiding the Client to move in/out of tub/shower.

Bed Mobility: Assisting your Client to and from a lying position, turning side to side, and positioning while lying in bed.

Dressing: Assisting with putting on and taking off clothes, including fastening, buttoning, untying, and assisting with attaching/removing prosthesis.

Eating: Assisting your Client with eating and drinking, such as spoon-feeding, cutting food, putting food on a plate, and pouring liquids in a cup.

Foot Care: Applying non-prescription lotions and/or ointments. **NEVER** trim or file fingernails or toenails of diabetic/poor blood circulation Clients.

Locomotion in room and immediate living area: Assisting your Client with moving between locations in their immediate living environment, including assisting your Client with propelling their wheelchair.

Locomotion outside of immediate living environment including outdoors: Assisting your Client with walking/propelling outside of their immediate living area, including patio, porch, and areas distant from the home.

Walk in room, hallway, and the rest of the immediate living area: Assisting your Client with walking inside their home.

Medication Assistance includes:

- Reminding or coaching the Client to take his/her medication
- Handing the medication container to the Client
- Opening the medication container
- Placing the medication into the Client's hand
- Transferring medication from one container to another for the purpose of an individual Dose

- Using an enabler, which is a physical device used to help the Client self-administer medication.
- The IP's hand may also be an enabler by steadying or guiding a Client's shaking hand only.*

* **Medication assistance DOES NOT include:**

- Putting medication into your Client's mouth
*“hand over hand” administration (total physical assistance).
You ***may*** assist by steadying or guiding a Client's shaking hand only while the Client applies or instills medications such as ointments, eye, ear, and nasal preparations.
- Assisting with intravenous or injectable medication
- Organizing medi-sets/pill boxes
- Dispensing medication

Skin Care: Applying non-prescription lotions and/or ointments; trimming or filing fingernails or toenails; observing/reporting skin condition of high-risk Clients during every shift as instructed.

Toilet use: Assisting your Client with using the toilet room, commode, bedpan, and/or urinal. Including transferring on/off toilet, cleansing, changing pads or adult diapers, emptying catheter bag, and cleaning a healed ostomy site or catheter site.

Transfers: Assisting your Client with moving between surfaces. To/from the bed, chair, wheelchair, and standing position. Transfers involve assisting the Client to move from one surface to another; it does not include lifting the Client.

Personal Hygiene: Assisting your Client with combing their hair, brushing their teeth, shaving, applying make-up, washing/drying face, hands (including nail care), and perineum care.

Treatments, Programs and Therapies:

Applying non-prescription lotions, and creams, trimming or filing fingernails or toenails. **NEVER** trim or file fingernails or toenails of diabetic/poor blood circulation Clients.

Ostomy Care: cleansing of any opening into the abdomen (stoma) that diverts contents of the bowel (fecal matter) or bladder (urine). This includes cleansing of the healed skin around the stoma, or emptying the bag as needed.

Indwelling Catheter Care: care of catheter that is maintained within the bladder for the purpose of continuous drainage of urine. This care only includes emptying the catheter bag.

Turning/Repositioning Program: includes a continuous, consistent program for changing the Client's position and realigning the body.

Range of Motion: Cueing or reminding the Client only to do their formalized exercise program that was established by a qualified nurse or therapist.

Passive range of motion exercises are performed for the Client only by a qualified nurse or therapist.

IADLs are:

Meal Preparation: Assisting your Client with planning and preparing meals, cooking, assembling ingredients, setting out food and utensils, and cleaning up after meals.

Ordinary Housework and Laundry: Performing housework, such as doing dishes, dusting, making the bed, tidying the house, mopping the floors, vacuuming, cleaning the bathroom, and washing, folding, and putting away clothing and linens.

Essential Shopping: Assisting your Client with shopping to meet their health and nutritional needs. Shopping is limited to trips for food, medical necessities, and household items required specifically for your Client's health, maintenance, or well-being. Shopping can be performed with or without your Client.

Phone Use: Dialing or assisting your Client to dial the phone when your Client needs to make a telephone call. Make sure the phone is near the Client, charged and/or plugged in.

Wood Supply: Assisting your Client with splitting, stacking, and/or carrying wood. This task is only performed when wood heat is the only source of heat in the Client's home.

Medical Transport: Assisting your Client with travel by vehicle to a physician's office, clinic to obtain medical diagnosis or treatment. This includes transporting the Client in your insured and licensed vehicle, arranging DSHS-funded transportation, taking a taxi or bus.

① **Managing Finances: This task is NEVER authorized for Clients!**

If your Client asks you to help with banking, paying bills, writing checks or any other financial activities including handling their ATM/debit cards or PIN, please respectfully say, **"No, I'm sorry I'm not allowed to do that"**.

If your Client asks you to mail letters, payments, etc. for them, they must be present when you complete this task.

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.

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.

Individual Provider Drug and Alcohol-Free Workplace

POLICY

Consumer Direct Care Network Washington (CDWA) 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 Individual Providers (IP) are working for CDWA, 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 IP's use of drugs or alcohol jeopardizes the safety of co-workers, clients, the public, and a company's reputation. CDWA thus has a substantial interest in not only providing, but ensuring, a drug and alcohol-free workplace.

SCOPE

This Policy applies to all IPs employed by CDWA.

For any IPs 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/Individual Provider

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, where work is being performed for payment, regardless of location.

Premises

Any office building, parking lot, Client residence, or vehicle where work is being performed for payment.

PROCEDURE

1. Responsibilities

IPs must report to work fit for duty and free of any adverse effects of drugs or alcohol. This Policy does not prohibit IPs from the lawful use and possession of prescribed medications taken as prescribed and that does not compromise workplace safety. IPs 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 CDWA premises, or while performing work as a CDWA IP, is strictly prohibited.

2.2 Working While Impaired

IPs and other individuals contracted to work for CDWA 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 IP taking medication should consult with a health care professional or review dosing directions for information about the medication's effect on the IP's ability to work safely and promptly disclose any work restrictions to their Client or Managing Employer or Human Resources. IPs are not required to reveal the name of the medication or the underlying medical condition.

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

4. Counseling and Rehabilitation

Any IP 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. IPs seeking assistance for drug or alcohol dependency should contact the SEIU Benefits Group at MRC@myseiubenefits.org.

5. Non-Discrimination and Non-Retaliation

CDWA 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, IPs may not request an accommodation to avoid disciplinary action for a policy violation. We encourage IPs 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 other CDWA employees, Clients, or themselves.

6. Consequences for Violation of This Policy

Any IP 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 the 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:	Annually
Date Approved:	2/21/2023
Policy History:	On 2/21/2023, this Policy was created and approved by the HR Director.



PRIVACY AWARENESS GUIDE – INDIVIDUAL PROVIDERS

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.

Keyways 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 do not 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 is 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.

The False Claims Act (FCA) [31 U.S.C. § 3729 – 3733] protects the federal government against fraud and abuse. The FCA makes it illegal for individuals or organizations to knowingly submit false or fraudulent claims to Medicare or Medicaid programs or cause a false or fraudulent claim to be submitted.

The term “knowingly” means the person or organization:

- 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.

For the purposes of the FCA, a “claim” includes any request or demand for money that is submitted to the U.S. government or to a third party that is reimbursed by the government.

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.

The FCA does not require proof of a specific intent to defraud the U.S. government. Instead, an individual or organization can be prosecuted for a wide variety of conduct that leads to the submission of fraudulent claims to the government, such as knowingly making false statements, falsifying records, double billing for items or services, submitting bills for services never performed or items never furnished or otherwise causing a false claim to be submitted.

Some examples of false claims include but are not limited to:

- Falsifying submitted time by including more time than actually worked.
- Documenting that tasks or procedures were completed when the tasks were not done.
- Billing for services or supplies that are not required for the person’s disability.
- Billing for the same service more than once.
- Falsifying federal, state, or contract required paperwork or deliverables.

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 Protections

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. However, an employee who violates applicable laws or company 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.

Reporting

You may report suspected cases of fraud, waste, or abuse directly to Consumer Direct, the applicable fraud control unit, and/or to the U.S. Office of Inspector General. State-specific contact information can be found on Consumer Direct websites. When reporting an issue, please provide as much information as possible. The more information provided the better the chance the situation will be successfully reviewed and resolved.

Washington State Laws

Many states, including Washington, have enacted similar laws to the federal False Claims Act.

Under Washington's Medicaid False Claims Act (WMFCA) [Revised Code of Washington § 74.66], 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 the Revised Code of Washington § 74.09.210 for more information.

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 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.

Individual Provider Grievance and Dispute Resolution

POLICY

Consumer Direct Care Washington (CDWA) follows the Grievance and Dispute Resolution process as outlined in the Collective Bargaining Agreement.

PURPOSE

The purpose of this Policy is to ensure IPs have a process to raise a grievance and understand the process for resolution.

SCOPE

This Policy applies to CDWA team members administering the required information and all Individual Providers (IPs) impacted by the exchange.

DEFINITIONS

Collective Bargaining Agreement (CBA)

Agreement between CDWA and SEIU 775 outlining Individual Provider wages, benefits, and working conditions.

Dispute Resolution

A process that can be used to resolve a conflict, dispute, or claim.

Formal Grievance

A written contention of misapplication or violation concerning the application or interpretation of the Collective Bargaining Agreement. Formal grievances may include, but are not limited to: wage disputes, assignment of hours, or corrective action.

Informal Grievance

A verbal contention of misapplication or violation concerning the application or interpretation of the Collective Bargaining Agreement. Informal grievances may include, but are not limited to: wage disputes, assignment of hours, or corrective action.

Reasonable Control

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

PROCEDURE

1. Informal Grievance Process

- 1.1. If an IP believes that CDWA is misapplying, misinterpreting, or violating the CBA, the IP may raise the issue verbally with a CDWA representative and/or the Bargaining Agent to attempt to informally resolve the issue.
- 1.2. Informal grievances will be made verbally to the Bargaining Agent Member Resource Center or to CDWA.
 - 1.2.1. Language support is available for grievances made in a language other than English.
- 1.3. CDWA ensures the appropriate CDWA team members are trained on the provisions of the CBA related to the IP grievance and dispute resolution process.
- 1.4. CDWA personnel utilize internal training and tools determine if the grievance is within internal reasonable control.
- 1.5. For grievances related to CDWA's payroll system, the Bargaining Agent, on behalf of the IP, has forty-five (45) calendar days from the date the individual knew of the incident or reasonably could have known about the incident to begin the informal resolution process.
 - 1.5.1. If the issue is not resolved informally, the Bargaining Agent, on the IP's behalf, has thirty (30) additional calendar days to submit a written grievance.

2. Formal Grievance Process

- 2.1. If the grievance is not resolved in Section 1 of this Policy or the IP and/or Bargaining Agent elects to forgo the informal grievance process, the IP and/or the Bargaining Agent representative will submit a written grievance including all relevant facts surrounding the grievance, including:
 - 2.1.1. Date(s) on which the incident occurred;
 - 2.1.2. Sections of the CBA alleged to have been violated; and
 - 2.1.3. Specific remedies requested.
- 2.2. The written grievance must be submitted to the CDWA within thirty (30) calendar days of the incident or when the IP could have reasonably known about the incident giving rise to the grievance.
 - 2.2.1. CDWA will meet with the IP and the IP's representative within fourteen (14) calendar days of receipt of the written grievance and resolve the grievance.
 - 2.2.1.1. If the grievance is still unresolved, CDWA will provide a written response to the grievance by email within fourteen (14) calendar days from the date of the meeting.
 - 2.2.1.2. If the written response does not resolve the grievance, the Bargaining Agent may proceed to mediation or arbitration within fourteen (14) calendar days of receipt of the response.

3. Mediation (optional)

- 3.1. If the grievance is not resolved in Section 2 of this Policy, the IP, or Bargaining Agent on behalf of the IP may choose by mutual agreement to submit the matter to mediation to resolve the issue.
- 3.2. Mediation can be requested by the IP, the Bargaining Agent on the IP's behalf, or by CDWA no later than fourteen (14) calendar days of receipt by the Bargaining Agent of the emailed response from CDWA in Section 2.
 - 3.2.1. The request for mediation must be accepted or rejected within fourteen (14) calendar days of receipt of request. If there is no agreement to mediate, the Bargaining Agent may notify CDWA of the decision to arbitrate within fourteen (14) calendar days of the email notification of the decision not to mediate.
 - 3.2.2. If CDWA and the Bargaining Agent agree to mediate, a neutral mediator is selected, and the parties submit statements of their positions on the issue.
 - 3.2.2.1. A decision by the mediator is final and binding when the issue is successfully resolved by mediation.
 - 3.2.3. If the issue is not resolved through mediation, the Bargaining Agent may within fourteen (14) calendar days of receipt of a written declaration of impasse or rejection of a settlement offer, proceed to Section 4, Arbitration.

4. Arbitration

- 4.1. CDWA and the Bargaining Agent will mutually agree on an arbitrator within thirty (30) calendar days of the request for arbitration, or, if CDWA and the Bargaining Agent fail to agree upon an arbitrator, the Bargaining Agent shall, within forty-five (45) days of the original request, request a list of seven (7) arbitrators from either the American Arbitration Association (AAA) or the Federal Mediation and Conciliation Service (FMCS).
 - 4.1.1. An arbitrator will be selected within fourteen (14) calendar days of receiving the list by alternating striking names off the list.
- 4.2. When an issue is referred by the Bargaining Agent to arbitration, the decision by the arbitrator is final and binding.
- 4.3. The arbitrator does not have the power to add to, subtract from, or change the terms of the CBA.

5. General

- 5.1. CDWA will disclose to the Bargaining Agent only information necessary for adjudication of the grievance.

6. Recordkeeping

- 6.1. CDWA tracks and maintains records on all informal and formal grievances, received both verbally and in writing, documentation of action(s) taken to resolve them and resolutions.

- 6.2. When a grievance is filed, CDWA team member will open a “case” in CDWA’s Customer Relationship Management (CRM) platform to log the details of the grievance.
 - 6.2.1. All steps taken to resolve the issue(s) of the grievance are documented in the CRM.
 - 6.2.2. Established timelines will be tracked and reported through the CRM.

INTERNAL CONTROL

CDWA’s Regional Director and overseeing Senior Director routinely monitor grievance records to confirm proper documentation and appropriate resolution. Grievances are also internally reviewed to determine timely response and resolution, quality of services to Individual Providers and needed quality improvement or corrective action.

ADDITIONAL INFORMATION

Relevant Materials:	Collective Bargaining Agreement Sec. 7.4 Policy: Employee Bargaining Unit Relations, OP-WA-003
Relevant Regulations:	N/A
Policy Group(s):	Operations Human Resources
Subject Matter Expert:	Labor Relations Director WA Regional Director and Senior Director
Applicable States:	Washington
Applicable Entities:	CDWA
Policy Review Cycle:	Biennially
Date Approved:	7/2/2021
Policy History:	On July 13, 2020, this Policy was created On March 17, 2021, this Policy was approved by WA DSHS. On July 2, 2021, this Policy was revised. On August 9, 2021, this Policy was approved by WA DSHS

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.

Individual Provider Standards of Behavior

POLICY

Consumer Direct Care Network Washington (CDWA) strives to provide care and support to people in their homes and communities, maintain public trust, and provide a safe and healthy environment for employees. To ensure this, and provide the best possible work environment, Individual Providers (IPs) are expected to follow basic rules of conduct that protect everyone's interests and safety.

Nothing in these Standards is intended to restrict employees from discussing their wages, benefits, or other terms and conditions of their employment, or engaging in any protected concerted activity. Failure to abide by these Standards of Behavior may result in discipline up to and including termination from employment.

PURPOSE

The purpose of this Policy is to set forth guidelines and expectations for behavior in the work environment and while representing CDWA.

SCOPE

This Policy applies to all CDWA Individual Providers whether they have full, part-time, temporary, per diem, internship, or summer status.

DEFINITIONS

N/A

PROCEDURE

1. Individual Providers (IPs) are expected to perform their job duties and responsibilities in a manner that is positive to CDWA, our employees, and the clients we serve. Conduct should be conducive to the team environment and working relationships. Commitment to serving the community and engaging in interactions with each other, consistent with our values, is a fundamental expectation for all CDWA employees.
 - 1.1. **Be Respectful** – Although opinions may differ, it is important to remain civil and respectful. Work together to foster a productive environment where everyone is permitted to have an opinion without repercussions.
 - 1.2. **Be Inclusive** – We are welcoming of people from all backgrounds on our team, including members of any race, ethnicity, culture, class, orientation, education, age, size, family status, political or religious beliefs, and mental and physical ability.

- 1.3. **Be Considerate** – Treat others how you would like to be treated in the workplace. Everyone on this team is important and essential, and each person’s decisions and actions affect our outcomes and morale.
- 1.4. **Be Professional** – Conducting yourself professionally includes being kind to others. Always maintain professional interactions when communicating with others.
2. The following list, while not all-inclusive, provides examples of the types of situations that may be grounds for immediate termination.
 - 2.1. Theft or the deliberate or careless damage of any CDWA property or the property of any employee or client;
 - 2.2. Working under the influence of alcohol or illegal drugs;
 - 2.3. Possession, distribution, sale, transfer, or abuse of alcohol or illegal drugs in the workplace, while on duty, operating IP-owned or Client-owned vehicles or equipment;
 - 2.4. Provoking a physical fight or engaging in physical fighting during working hours or on the premises owned or occupied by a Client or CDWA;
 - 2.5. Sexual or any other forms of harassment;
 - 2.6. Using excessively abusive, threatening, or obscene language;
 - 2.7. Using intimidation tactics and making threats;
 - 2.8. Making malicious, false, and harmful statements about others;
 - 2.9. Publicly disclosing another person’s private information;
 - 2.10. Possession of dangerous or unauthorized materials, such as explosives or firearms, in the workplace;
 - 2.11. Falsifying CDWA records or reports, including one’s time records or the time records of another employee;
 - 2.12. Using Client or CDWA materials, supplies, tools, or products for personal reasons without advanced permission from the Client, their Authorized Representative or management;
 - 2.13. Abusing Client or CDWA’s electronic resources, including sending personal emails during working time or in a manner that interferes with the employee’s work performance.
3. General Behavior
 - 3.1. IPs should always be mindful of their behavior. IPs should adhere to the following:
 - 3.1.1. Language – All IPs must refrain from using slang, profanity, and/or offensive, or disrespectful remarks when speaking to other CDWA employees, Clients, and their Authorized Representatives.
 - 3.1.2. Hygiene – All IPs must maintain personal grooming habits that reflect a presentable image for CDWA.

3.1.3. Cultural Awareness – CDWA IPs are expected to always show respect for other cultures and ethnic groups and to provide quality care and services to everyone, equally, without regard to cultural or ethnic differences.

4. Retaliation

4.1. CDWA prohibits retaliation including making threatening communication by verbal, written, or electronic means against any individual who reports or provides any information concerning unlawful discrimination, harassment, or other violations of company policies, rules, and standards of conduct. Any IP found to be engaging in retaliation will be subject to disciplinary action up to and including termination.

INTERNAL CONTROL

CDWA's Program Managers, managers, supervisors, and Clients are responsible for monitoring their employees' actions and initiating appropriate corrective action. The Human Resources Director is responsible for evaluating that this Policy is appropriately and consistently adhered to.

ADDITIONAL INFORMATION

Relevant Materials:	WAC 246-980-150 Standards of Practice IP Employment Handbook
Relevant Regulations:	N/A
Policy Group(s):	Human Resources
Subject Matter Expert:	Human Resources Director
Applicable States:	Washington
Applicable Entities:	CDWA
Policy Review Cycle:	Biennially
Date Approved:	8/18/2023
Policy History:	On August 18, 2023, this Policy was created and approved.