

# **West Virginia Medicaid Aged and Disabled Waiver Recipient User Guide**

(Distributed initially and annually to ADW members by the Case Manager)

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## **PROGRAM OVERVIEW**



## AGED AND DISABLED WAIVER RECIPIENT USER GUIDE

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The Aged and Disabled Waiver (ADW) Program is offered by West Virginia Medicaid. The ADW Program provides in-home assistance and services in the community to individuals 18 years of age and older who are medically and financially eligible. You must have the same type of needs as someone living in a nursing home and you must also meet the financial limits set by Medicaid. Your medical and financial eligibility will be reviewed every year to make sure you qualify to stay on the program.

The primary services available in the Aged and Disabled Waiver are Personal Attendant services and Case Management services. Transportation to non-Medicaid reimbursed medical appointments, grocery shopping, other errands and some community activities is provided as well.

### **MEDICAL AND FINANCIAL ELIGIBILITY**

**Medical eligibility-** When you apply for the ADW program with the referral from your doctor (the Medical Necessity Evaluation Request form, or MNER), a nurse will come to your home or contact you to conduct an evaluation. You will receive a notice in the mail regarding the decision on your medical eligibility. Your Case Manager will update and submit your MNER every year that you are on the program.

**Financial eligibility-** You will need to complete a DHHR Long-Term-Care financial application every year to determine financial eligibility. Your Case Manager or the DHHR Economic Services Worker (ESW) can help you with this process as well.

## **SERVICE DELIVERY MODEL OPTIONS**

There are two (2) options or choices you can make for how you receive services in the ADW program: Traditional or Personal Options.

**Traditional Model:** All services are provided by an agency and the staff/workers are employees of the agency. Agency's will work with you to try to provide you with the hours and days of the week that you choose to have services, when possible. With the Traditional Model, you will have both a Personal Attendant Agency (the agency that sends the staff/worker into your home) and a Case Management Agency (the agency that manages your case and makes sure you receive all of the services you are entitled to.)

**Personal Options Model:** You self-direct your services. In this program, you may hire your own staff/worker. Your staff/worker may be either a family member or friend (you cannot hire a spouse or a legal guardian to provide your care). You can choose services and staff/workers based on a budget that has been determined to fit your medical needs. A Resource Consultant with the Personal Options Program will help you with hiring staff/workers and also with payroll activities. You will also have a Case Manager who will manage your case and make sure you receive all of the services you are entitled to.

## **STAFF AND AGENCY REQUIREMENTS**

Both agencies and the workers who come into your home have to be certified or have training to be able to provide services to you.

**Staff Requirements:** Personal Attendants/workers must have a Criminal Investigation Background Check (CIB) and basic training before providing services to you. If you have special needs, the personal attendant/worker

should have separate training before working with you. It is important to ask your personal attendant/worker if he/she is trained. Contact the nurse at your Personal Attendant agency if you do not feel that your worker is properly trained.

**Provider Agency Requirements:** Provider Agencies must have a Certification from the Bureau of Senior Services and an enrollment with West Virginia Medicaid before providing ADW services. The Bureau of Senior Services monitors provider agencies on a regular basis. It is important to first contact the agency if you have a problem with your services. The agency wants to know of any problems as soon as possible so they can fix them.

## **SERVICES COVERED BY WV MEDICAID**

ADW services include Case Management, Personal Attendant Services, Skilled Nursing, Non-Medical Transportation Services, Medical Adult Daycare, Environmental Accessibility Adaptations (EAA) and Personal Emergency Response Systems (PERS):

**Case Management:** The Case Manager is responsible for your health and safety, helping find services and developing a Service Plan to fit your unique needs. Expect to hear from the Case Manager at least monthly by telephone and they will also make a home visit at least every three months (quarterly). If you need them to contact you more than once per month, the Case Manager will contact you more often. He/she will conduct an annual Assessment and a six-month review of your needs. If you need assistance, you should contact your Case Manager directly. The Case Manager should talk with you about your services and your needs. He/she may ask about when your personal attendant/worker comes to your home, activities he/she performs in your home, if they are not doing something that you need or any changes in your medical condition. Your Case Manager can assist you with working with your Personal Attendant agency to access things in the community or other things that you might need. It is important to let your Case Manager know when you need help. It is also important to tell your Case Manager when you get any letters or phone

calls from the DHHR about your financial reviews. Also, if at any time you would like to transfer agencies for Personal Attendant services or for Case Management services, or to change to a different Service Delivery Model, your Case Manager can assist you.

**Personal Attendant (PA or Worker):** Your personal attendant/worker should come to your home to assist you with activities such as bathing, cooking your meals, grocery shopping, laundry, or other activities that you talked about that are written on your Service Plan. All of the services and activities from your Service Plan meeting are written on a Personal Attendant Log or (PAL) that tells your personal attendant/worker what services and activities you need. Your personal attendant/worker must not perform activities that are not on your plan. Your Personal Attendant agency nurse is familiar with the activities that your worker performs for you and trains them on your special needs. If you are having problems with your personal attendant/worker, contact the agency or your nurse. It is important to let your Case Manager know about any problems as well.

A person on the ADW Program must receive Personal Attendant services on a monthly basis, unless temporarily in a nursing home, hospital, or other inpatient medical facility.

Your workers should never eat your food, have dinner with you, expect you to pay for lunch or dinner, expect money or gifts from you, take your personal belongings or money, treat you disrespectfully or harm you in any way. If this happens, you should tell your agency immediately. Some of the services a personal attendant/worker provides are very personal and you may become friends, but when they come to your home you must remember that this person is a paid professional and when they are providing your services, your home is a workplace. He/she is not making a “social visit” so the personal attendant/worker should not be treated the same as a friend in your home. You should expect professional behavior from the worker while he/she is in your home.

**Skilled Nursing:** A nurse will come to your home to assess your needs. Expect the nurse to do an Assessment every six months. If you have new

medical issues or a change in needs, the nurse may assess you more often. The nurse will review your Personal Attendant Log to be sure that services have been provided (weekly, every two (2) weeks or monthly).

The Personal Attendant Log (PAL) will tell the personal attendant/worker exactly what he/she needs to assist you with and how to do it. You can look at your Log to be sure your needs are listed and check to see that the personal attendant/worker is doing what is on the Log. Tell your nurse when you have any changes in your condition or want to make changes to any of your services.

**Non-Medical Transportation:** This service pays back personal attendants/workers that drive their own vehicles to take an ADW member to essential errands and community activities. The personal attendant/worker should not travel for his/her purposes but only travel for your needs listed on your Service Plan and Personal Attendant Log. The transportation services are for you and no one else, not your family, friends, or pets. If you have family, neighbors, friends, or community agencies that can provide transportation for you without charge, you must use them first. You may be transported by the personal attendant/worker to participate in community activities or run errands as listed in your Service Plan. Essential errands (grocery store, pharmacy) should be completed before mileage is used for community activities (going out to eat, going to the mall) to ensure your needs are met. There is a limit on the number of miles that can be traveled/billed each month.

(This service may not be used for Medical appointments that are paid for by Medicaid. A separate agency provides transportation to medical appointments.)

**Medical Adult Daycare:** Medical Adult Daycare is designed to meet the needs of members during the day while allowing you to continue living with your families or in the community. Examples of services provided include physical and speech therapy, medication management, mental health services and support groups. Adult day care centers generally operate





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during daytime hours, Monday through Friday. A meal is typically provided as part of the program. Medical Adult Daycare can be used to:

- 1) Provide services to adults with medical, health or functional needs and provide an opportunity for social interaction.
- 2) Allow caregivers a regular means to continue to work outside the home while receiving help with the care of a loved one or a periodic break (respite) in which to attend to personal needs.

**Personal Emergency Response System (PERS):** A PERS unit is a small pendant that you can wear around your neck, wrist or on a belt. When an emergency occurs (falling, sudden illness, home invasion, etc.) you can press the button on the pendant and start a conversation with an operator. If necessary, the operator can send first responders (EMS/Fire Department/Police) to your home immediately. If you would like to have a PERS unit, you should notify your Case Manager or Personal Attendant agency and they will provide you with the equipment and explain how to use them. The units are monitored 24 hours a day, 365 days a year. If you transfer to a different agency, you will need to request new PERS equipment from your new agency.

**Environmental Accessibility Adaptations - Home and Vehicle:** Environmental Accessibility Adaptations - Home and Vehicle are physical adaptations/modifications to your residence/home or vehicle. Adaptations to the home must maximize or improve accessibility both outside and inside the home. Adaptations to a vehicle must maximize or improve accessibility and operation of your primary mode of transportation.

## **PERSON-CENTERED PLANNING AND SERVICES**

Once you are on the ADW program, you and your agencies will plan what services you want and need. This is called Person-Centered Planning.

**Person-Centered Planning:** Person-centered planning is a way to help you plan what services you want from the ADW Program, along with who

will help you with those services. The person-centered plan is your plan, written to address your needs, goals and preferences.

Your agencies, staff/workers, family and friends make up the team that will work with you to be sure the ADW program provides you with what you need.

Person-centered Planning has four steps:

1. Your Assessment
2. Your ADW service planning meeting
3. Writing your ADW Service Plan
4. Reviewing your ADW Service Plan

**Assessment** – An Assessment identifies what services you need, how much you need and how long you may need them. The annual Assessment will gather information about your health, where you need help such as bathing, dressing, etc., what you like to do, where you would like to live, who you would like to have help you and anything else you think is important. The Assessment information will help you and your team write a plan for you.

**Person-centered Service Planning Meetings-** This is the meeting about you. You can invite anyone you want to be with you at the meeting and it will also include your Case Manager, Nurse or Resource Consultant if you are on Personal Options. In the meeting, you should talk about the kinds of services you want, where you want them, and who you want to provide them. Your choices should include which ADW services you want and need along with who you want to live with and where you want to live. You can ask your agency for a meeting to change or update your Person-Centered Service Plan at any time.

**Writing your ADW Service Plan–** Your plan should have the following:

- Where you choose to live and get your services.
- Your strengths, what you like best, and what you need.

- The support or help that you need, both from your agency/worker and informal (friends or family).
- Goals you want to work toward, along with how you will know the goals were met.
- Any problems you might have and plans to deal with them.
- A plan for making sure you are doing the things you need to do that are on your Service Plan.
- Your Plan should be written so you understand what it says.
- After you understand and agree to what is in the Plan, you and the other people who came to the meeting will sign your Plan. Everyone gets a copy of the Service Plan.

The agency must let you know when to expect the personal attendant/worker. Ask the agency for a schedule. The schedule should be on the Personal Attendant Log (PAL) that was written from the Service Plan. The Log is the schedule the personal attendant/worker follows when providing services for you. The Log shows what days the personal attendant/worker is supposed to come to your home and what time they should arrive and when they should leave. It is important for you to report to the agency if your worker does not come to your home on time or if he/she leaves your home early. You are required to sign the Personal Attendant Log so be sure to only sign for times when the personal attendant or worker is there and when he/she provided the services or activity on the form. If the personal attendant/worker watches television or stays on their phone instead of providing your services, you should report this to the agency. Your worker is there to help you.

**Reviewing your ADW Service Plan:** Your Plan should be reviewed at least every six months. If you need to change how you are getting help or

services, or something in your life changes, you can ask for a meeting to review your Plan at any time and a meeting will be held.

Here are some questions to guide you in thinking about your services and where you are getting your services:

- **Am I living somewhere that I feel comfortable?** I am able to choose to live in a home that is in the community (not an institution) where I have a choice of who lives with me, what I do in my home, who I talk with on the phone, visitors coming into my home, my meals, how I manage my resources and who I interact with outside my home
- **Am I comfortable with the Service Planning process?** Is the meeting scheduled for a place and time that is easy for me and the people I want to have there, such as family members, friends, and my representative.
- **Did I receive the help I needed to fully participate in the Service Planning process? Are my wishes and likes considered and included in my plan?**
- **How do I let someone know what I don't want the worker to do for me?**
- **Do I have choices of what services or supports that I need, and the activities that I do?**
- **Does the Plan help me set my own schedule, get transportation to go out if I need it, and help me do things in the community that I need to do?**
- **Do the people who support me talk to me respectfully? Do they knock before they come into my home? Do they talk to me in a language I understand?**

- **If I have a complaint or a concern, do I know who to call or write?**
- **If someone is hurting me, not providing me with the services that I need or someone is taking my things or money, do I know who to contact to get help?**

If at any time, you have experienced a problem, concern or complaint about your Planning meeting or ADW services, you may contact the Bureau of Senior Services (BoSS) at 1-866-767-1575.

## **ADW PROGRAM MEMBER RIGHTS AND RESPONSIBILITIES**

As a member who receives ADW services, you have certain rights and responsibilities. It is important to know about these upfront so you can plan and think about what you need to do. You have certain rights, or things you can expect from the ADW program, and you need to know what to do if you are not getting the services you need. Keep in mind also, if you refuse to accept your responsibilities, your Waiver could be closed.

### **MEMBER RIGHTS**

Choosing Services - First of all, since you qualify for Medicaid, you have a right to choose between an institutional setting (nursing home) and a home-and-community based setting (living in your home). If you have chosen Aged and Disabled Waiver, you have chosen a home-and-community based setting. You have a right to choose any available provider agency in your area for your services. You may express your preferences for staff choice or characteristics.

Transfers - If, at any time you are unhappy with your agencies or your agency cannot provide your services, you may choose to transfer to another agency in your area. You need to speak with your Case Manager if you wish to change. Your Case Manager will ask you to fill out transfer forms, decide upon the new agency, and they will make the arrangements



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with the new agency. Your current agency must continue to provide your services until the transfer. It is the responsibility of the new agency to contact you and begin the services on the start date.

Changing your Service Plan - You have the right to request changes in your Service Plan at any time. Contact your Case Manager if you want to change services, days or times when you receive services.

Dissatisfaction with services. You have the right to let your agencies know if you are dissatisfied with any aspect of your services. Also, you have the right to be free from any retribution or retaliation from your agency if you tell them you are dissatisfied.

Access to Documents - You have the right to have access to all your files maintained by your agencies and/or Personal Options. Contact your agency to see how to request copies of your documents.

Hearing Rights - You have a right to file a Medicaid appeal regarding a denial of medical eligibility or reduction in services. You will complete a Hearing Request form to request a Medicaid Fair Hearing. Your Case Manager or nurse may help you with it. You also have the freedom from being punished when reporting being unhappy with services or appealing service decisions.

Dignity and Respect - You have a right to be treated with dignity and respect from any and all agency staff or any other person entering your home. You also should be free from abuse, neglect or exploitation.

Freedom from Abuse, Neglect or Exploitation. You have the right not to be abused, neglected or exploited in any way by your agencies, including your worker, even if your worker is a family member or friend. If any of these things occur, you should contact your Case Manager immediately.

Freedom from restrictive interventions. You have the right not to be restrained in any way at any time and also not to be kept in a room or space apart from others against your will. If either of these things would occur, you should contact your Case Manager immediately.



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Incidents - Your provider agency is required to report all incidents to the Bureau of Senior Services such as falls, abuse/neglect/exploitation, injuries, or other situations where you are harmed. For critical or more serious incidents, the state may ask the agency to investigate or conduct corrective action. This is for the protection of your health and safety.

Confidentiality. You have the right of confidentiality in all aspects of your ADW services. All details regarding your services should be kept between you and your agency, unless you give permission for someone else to be included.

Case Closures - Your case may be closed at your request, if you move out of state, if the setting you are in is an “unsafe environment” for workers, you have not received services for over a 100-day time period, you are medically/financially ineligible, you do not comply with the program (see member responsibility below), or you have not had Personal Attendant Services for one month (unless in the hospital or a nursing home). The agency notifies the state of the request to close, and you are offered your right to a Medicaid Fair Hearing. Medicaid Fair Hearings are limited to issues involving medical eligibility, reduction of services, suspension of services or closing your case.

## **MEMBER RESPONSIBILITIES**

Member Refusal of Services - As a member, you have a responsibility to notify the Personal Attendant agency if you do not need services at least 24 hours prior to a scheduled work shift. If you cancel often, you may need to change your Service Plan. Your Case Manager will assist with the changes.

Home Visits - You must accept all scheduled home visits from the Case Manager, Personal Attendant, nurse (either Personal Attendant nurse or nurse evaluator), or state level staff responsible for oversight of the program. This will allow you to meet assessment deadlines and get your paperwork turned in on time so you may keep your ADW services. Visits should be scheduled in advance and have a minimal disruption to your daily care routine. This is an important aspect of the program.



Change in Status or Residence - If you experience a change in residence, go in the hospital, go into a nursing home, or experience a change in your medical condition, Medicaid coverage, or a change in your legal representation and/or guardianship, you must notify your agency (Case Management, Personal Attendant or Resource Consultant for Personal Options). You should also provide copies of appropriate documentation for any changes.

Person-Centered Service Plan - You must comply with all of the services and supports listed on the agreed upon Person-Centered Service Plan and Responsibility Agreement(s), if applicable.

Maintain a safe home environment - You must maintain a safe home environment (inside and outside) for all agency staff that come into your home. Unsafe environments could include aggressive pets, family members or friends involved in illegal activities or who cause other

problems, etc. Aggressive pets would need to be caged or controlled in some way while your personal attendant is in your home. Family members or friends who are involved with illegal activity or cause problems should not be allowed in your home while you are receiving services.

Verify your services - It is your responsibility to review and verify the Personal Attendant Log (PAL) or worksheet. Check to see that the Personal Attendant provided what is on the worksheet, he/she was there the entire amount of time, and it is the correct date. When you initial and sign the Personal Attendant worksheet, you are confirming that it is accurate. It is very important to be accurate since this is a Medicaid program.

Illegal Activity - Report any suspected illegal activity of staff to their local police department or appropriate authority as well as your Case Manager, Personal Attendant agency and/or Resource Consultant.





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Non-Medical Transportation - You should utilize family, friends, neighbors or community agencies first for non-medical transportation, when available, before using transportation through Medicaid.

Services Not on your Service Plan - You cannot ask personal attendants/workers to provide services that are excluded by policy or not on your Service Plan. Examples would include pet care, household deep cleaning, or providing any services for anyone other than yourself.

Personal Options termination of employee - Notify your Resource Consultant within 24 hours when you terminate an employee.

Non-compliance or Unsafe Environment - If you are being investigated or your services are in process of being closed by an agency for noncompliance or unsafe environment, you cannot transfer to another agency. If your services have been closed due to non-compliance or unsafe environment and you re-apply for ADW or other Home and

Community-Based Service programs, the non-compliance or unsafe environment closure information will be shared with the new agencies you have selected.

**Note:** Due to the nature of unsafe environment closures, a member would not be eligible for the option to continue existing services during the fair hearing process.

In Addition:



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Fraud - Report any suspected fraud to your Case Manager, Personal Attendant provider agency or Resource Consultant, and they will submit a report to the Bureau for Medical Services, Office of Program Integrity.

Abuse, Neglect, Exploitation - Report any incidents of abuse, neglect, or exploitation to the Case Manager, Personal Attendant provider agency, the Resource Consultant, or the WV Centralized Intake hotline at 1-800-352-6513.

### **EXPRESSING PROGRAM CONCERNS OR COMPLAINTS**

As in all cases of dissatisfaction, please contact your provider agency. If your issue is not resolved, you may contact the Bureau of Senior Services (BoSS) via phone at 304-558-3317/ toll free 1-866-767-1575 or fax 304-558-6647 first, to file a complaint and see if the issue can be easily resolved. If not, you have other options available:

### **GRIEVANCE PROCESS**

If you are dissatisfied with the services you are receiving from a provider agency, you have a right to file a grievance. All ADW agencies are required to have written grievance procedures. The Grievance process should have been explained to you during your initial and annual re-evaluation process. You and/or your legal representative, if applicable, will be provided with an ADW Grievance Form. You can only grieve for the services that fall under that agency's authority. You may bypass the level one grievance and file a level two grievance with the Bureau of Senior Services if you choose. The grievance process cannot be utilized to address decisions regarding medical or financial eligibility, a reduction in services or case closure. Those issues must be addressed through the Medicaid Fair Hearing Process.

#### **A. Level One: ADW Provider**

The ADW provider has ten business days from the date they receive an ADW Grievance Form to hold a meeting, in person or by telephone. The meeting will be conducted by the agency director or their designee with you (or legal representative). The agency has five business days from the date of the meeting to respond in writing to the grievance. If you are dissatisfied with the agency decision, you may request that the grievance be submitted to the Bureau of Senior Services for a Level Two review and decision.

### **B. Level Two: Operating Agency (OA)**

If an ADW provider agency is not able to address the grievance in a manner satisfactory to you and you request a Level Two review, the Bureau of Senior Services will, within ten business days of the receipt of the ADW Grievance Form, contact you (or legal representative) and the ADW provider to review the Level One decision. Level Two decisions will be based on Medicaid policy and/or health and safety issues.

## **MEDICAL ELIGIBILITY APPEALS**

If you are determined not to be medically eligible and your case could be closed, a written Notice of Decision letter, a Request for Hearing Form and the results of the Assessment will be mailed to you or your legal representative. A notice is also sent to your Case Manager. Your case closure may be appealed through the Medicaid Fair hearing process if the Request for Hearing form is submitted to the Board of Review within ninety (90) days of receipt of the Notice of Decision. Contact your Nurse/Case Manager to assist you in getting additional information from your Doctor that may provide a change in the results of your evaluation.

If you wish to continue receiving services during the appeal process, the Request for Hearing Form must be submitted to the Board of Review within 13 days after you or your legal representative received the Notice of Decision letter. If the Request for Hearing form is not submitted within 13 days, all ADW services will stop at close of business on the 13th day.

A pre-hearing conference may be requested any time prior to the Medicaid Fair Hearing and BMS and the Bureau of Senior Services will schedule. At the pre-hearing conference, you or your legal representative, the Bureau of Senior Services, and BMS will review the information submitted for the medical eligibility determination and the basis for the closure. If you and BMS come to an agreement during the pre-hearing conference, the hearing request will be withdrawn from the Board of Review.

If the denial of medical eligibility is upheld by the hearing officer (the hearing officer rules against you), ADW services will stop on the date of the hearing decision. If the closure based on medical eligibility is reversed by the hearing officer (the Hearing officer rules in your favor), your services will continue with no interruption.

## **DISCONTINUATION OF SERVICES**

The following are reasons your agency may request Discontinuation of Services:

- No Personal Attendant services have been provided for 180 continuous days.
- Your home/environment is deemed to be an unsafe environment.
- You are non-compliant with the Service Plan.
- You no longer desire services.
- You no longer require services
- You can no longer be safely maintained in the community.

## **COMMON QUESTIONS AND ANSWERS**

This next section should help solve problems and answer questions you may have along the way. The questions are about keeping your services, keeping you safe, dealing with problems and more

## Keeping Your Services

### What do I need to do to keep my services?

- Keep all your papers (or letters) together from DHHR.
- Keep all meetings with DHHR.
- Keep all meetings with your Case Manager, Resources Consultant or PA agency Nurse.
- Call your Case Manager or Resource Consultant when you get a letter you do not understand.
- Keep all meetings with the Nurse from Kepro.
- You may ask others to be with you at your meeting with the Nurse from Kepro. It could be a family member, your Medical Power of Attorney (guardian or other legal representative), your Case Manager, your Nurse or your Resource Consultant. Sometimes, it is good to have another person at your meeting to help you.
- Report any changes in your income or finances to DHHR.
- Be available every month for Personal Attendant services.

## Family/Friends serving as my Personal Attendant

**1. My family member works for an agency as my Personal Attendant. When is she/he my family member, and when is she/he an employee? (For Personal Options ADW recipients, the Personal Attendant is called the “employee”).**

- During Service Plan hours (on the clock), she/he is a professional employee of the agency. She/he must follow the rules of the agency and the Aged and Disabled Waiver Program.
- The Personal Attendant (or employee for Personal Options) must follow the Personal Attendant Log (PAL). Your family member or friend serving as your Personal Attendant must do the same things that any other agency Personal Attendant would do for you.
- If you are not sure what your family member can or cannot do, call your Nurse, Case Manager or Resource Consultant.

- During Service Plan hours, she/he must provide the care for YOUR needs and **not** his or her own needs.
- The family member or friend must work the hours listed on the Personal Attendant Log (PAL). The Personal Attendant (or employee) must be there at the times outlined on your Personal Attendant Log (PAL).
- If your family member becomes unavailable to work for you for over 30 days, be aware that you could be in danger of losing access to the ADW program by refusing a substitute Personal Attendant.

## Crossing the Line

### **1. Is the Personal Attendant (or employee) my friend?**

No. The Personal Attendant (or employee) should be friendly. However, the Personal Attendant (or employee) is not a “friend.” The Personal Attendant (or employee) is there to care for you. These are examples of when a Personal Attendant or employee could be crossing the line:

- Keeping secrets.
- Off duty phone calls or visits.
- Swapping or sharing phone numbers.
- Facebook friends, emails or Twitter.
- Trying to protect the Personal Attendant and not get her/him into trouble
- You or the Personal Attendant (employee) thinking that no one else can take care of you.

The Personal Attendant (or employee) should be polite, protect your privacy and provide service that is on your Personal Attendant Log.

## Back-up and Emergency Planning

### **1. What do I do when my Personal Attendant or employee does not show or he/she is sick?**

- Call the Personal Attendant agency. See if there is a substitute Personal Attendant (traditional agency).
- Refer back to your service plan, Backup and Emergency Planning. If your plan is not correct, contact your Case Manager.
- Call your informal support. Make sure your informal support is available.
- There may be times when your Personal Attendant is not available due to emergencies. Plan ahead; make sure your informal support person is available. Let your Case Manager, Nurse or Resource Consultant know about your urgent needs.
- For any serious emergencies, call 911.

## **2. How do I plan ahead for a natural disaster? (Examples of natural disasters are flooding, high winds, snowstorms, and power outages)**

- For anyone using oxygen, make sure that you have extra oxygen tanks.
- Plan ahead by making a list of important phone numbers.
- Call your local fire department to let them know you may need help in an emergency. Let the fire department know if you are on oxygen. Let them know if you are unable to get out of your home or out of bed.
- If you use oxygen, be sure you have a sign on the door saying that oxygen is used in the home. The sign should include the name of your oxygen provider and the phone number.
- Try to find a safe place before the storm strikes. Is there an emergency shelter in your area? Have you called ahead to make sure that the emergency shelter in your area will take you? Can you stay with family or a friend?
- Make sure that your informal supports and your Case Manager, Nurse or Resource Consultant know your needs in the event of a disaster. Make sure your trusted neighbors know your needs.
- Have enough water, food and medicines for at least three days.
- Keep a working flashlight handy at all times. Have a portable radio that runs on batteries or a crank. Have extra batteries handy. Have a



charged cell phone for emergencies. If you need resources for this, contact your Case Manager, Nurse or Resource Consultant.

- You may call your local county health department and ask to be placed on the West Virginia Special Needs Registry System. That way, emergency personnel will have your information to help you during a natural disaster.

## Paperwork

### 1. Do I need to read my Personal Attendant Log (PAL) or employee worksheet (time sheet) before I sign it?

- Yes, read your worksheet closely to make sure that the Personal Attendant has done it correctly. The Personal Attendant should not put anything on the form that he or she did not do.
- The Personal Attendant must be honest when putting mileage traveled on the form.
- The agency reviews any mileage listed on the worksheet.
- Someone can be found guilty of healthcare fraud for false claims to Medicaid. Charging for services not provided, such as lying on Personal Attendant worksheets, is healthcare fraud.
- Your signature on the worksheet says that services were provided and that the worksheet is correct.
- If you think your Personal Attendant or employee is lying on your worksheet, immediately call your Nurse, Case Manager or Resource Consultant. Sign the worksheet on the last date of service provided by the worker. That includes substitute Personal Attendants.
- Make sure you read and initial the worksheet **EVERY DAY** to make sure that everything is correct. Sign on the back of the form on the last day of service.
- If you feel pressured or bullied to sign a worksheet that is not correct, contact your Nurse, Case Manager or Resource Consultant to let them know.
- If you need someone to go over your paperwork with you, let your Case Manager, Nurse or Resource Consultant know.





## AGED AND DISABLED WAIVER RECIPIENT USER GUIDE

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- For Personal Options ADW participants, make sure that either the participant (person receiving services) or the employee turns in the paperwork.

### 2. Should I expect to get copies of my paperwork?

- Your Case Manager, Nurse or Resource Consultant will make sure that you get copies of all your Aged and Disabled Waiver paperwork. You will get your Assessments, Service Plans, and Personal Attendant Log (PAL).

## IMPORTANT PHONE NUMBERS AND RESOURCES

**Case Manager's Name, Agency, and Number:**

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**Nurse's, Name, Agency, and Number:**

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**Personal Attendant(s) Name and Agency:**

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**Phone Number/Contact for After-Hours Scheduling Concerns:**

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**Important Things I Need to Tell My Case Manager:**

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**Important Things I Need to Tell My Nurse:**

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## **Bureau for Medical Services**

Home and Community Based Services

ADW Program Manager

350 Capitol Street, Room 251

Charleston, WV 25301-4924

Phone: (304) 352-4270

Fax: (304) 558-4398

Website: [WWW.DHHR.WV.Gov/BMS](http://WWW.DHHR.WV.Gov/BMS)

## **West Virginia Bureau of Senior Services Mailing address:**

1900 Kanawha Blvd. East

Charleston, WV 25305

Location:

Town Center Mall, 3rd level

Charleston, WV

Phone: (304) 558-3317, 1-877-987-3646

Fax: (304) 558-6647

Website: [www.wvseniorservices.gov](http://www.wvseniorservices.gov)

## **Kepro – (Medical Assessments)**

ADW Program Staff

1007 Bullitt Street, Suite 200

Charleston, WV 25301

Phone: 1-844-723-7811

Fax: 1-866-212-5053

Website: [http://kepro.com/publicprograms/west\\_Virginia/](http://kepro.com/publicprograms/west_Virginia/)

## **Public Partnerships, LLC (PPL) Personal Options Fiscal Employer Agent (FE/A)**

P.O. Box 5157

Charleston, WV 25361

Phone: 1-888-775-9801

Fax: (304) 988-4201

PublicPartnerships.com



**West Virginia Aging & Disability Resource Centers (ADRC)**

Phone: 1 – 866-981-2372

Website: [WWW.wvnavigate.org](http://WWW.wvnavigate.org)

**West Virginia Protective Services Hotline (abuse/neglect/exploitation)**

Web site: [www.wvdhhr.org/bcf/children-adult/](http://www.wvdhhr.org/bcf/children-adult/)

In an emergency, call 911

Phone: 1-800-352-6513

**West Virginia Attorney General's Office**

Web site:

<https://ago.wv.gov/consumerprotection/Pages/Senior-Protection.aspx#:~:text=The%20Attorney%20General%20is%20deeply,and%20educates%20to%20protect%20seniors>

Senior Protection Hotline: (304) 558-1155

Medicaid Fraud Hotline: 1-888-372-8398

I have received a copy of the ADW Recipient User Guide.

Member signature: \_\_\_\_\_

Date: \_\_\_\_\_