POLICIES AND PROCEDURES PASSION HEALTH CARE SERVICES LLC BUSINESS



MAILING ADDRESS: 18 BERBRO AVENUE, UPPER DARBY, PA 19082-2002

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CURRENT OFFICE LOCATION:

8600 WEST CHESTER PIKE SUITE-301 UPPER DARBY, PA 19082-2002

EXECUTIVE SUMMARY

Passion Home Health Care Services, LLC., (hereinafter 'Agency') offers a unique combination of premier home care and community-based services to Pennsylvania residents. Market research indicates that there is a significant need for quality home health care and social services within this region and we believe that by employing competent and well-trained staff and providing them with organized and responsive management, we can become the home care social service agency of choice in the great state of Pennsylvania.

1.0 THE MISSION OF AGENCY:

To assist patients to five more independently with a higher quality of life. Working directly with the patient's physician to carry out their orders and serve as their eyes and ears. Most importantly we are delivering great passionate care in the comfort of the client's home.

1.1 THE COMPANY

This Agency was created as a Pennsylvania Limited Liability Company in Upper Darby and will be based in Delaware County, and is owned and operated by its principal stockholder Mason Yondyu Weh Sr. and Edith Lianue Gongloe-Weh.

2.0 THE COMPANY AND OFFICE:

The Agency obtains its initial address as listed on the Limited Liability Company Articles of Incorporation for mailing purpose. The Agency's current main office is located at 8600 West Chester Pike Suite-301, Upper Darby, PA 19082-2002 as the Agency grows and develops satisfied patients.

2.1 MANAGEMENT TEAM:

The Agency Founders, Edith Gongloe-Weh and Mason Y. Weh Sr., bring a wealth of knowledge to the organization from their varied experiences and along with the knowledge compounded by the expertise of the Agency's attorney and CPA has and will continued to position this Agency with the leaders in the in-home health care industry.

2.2 AGENCY SERVICES:

This Agency will provide in-home care for the elderly, disabled, recovering patient, or anyone in need of special home care. Our health care services are provided in the clients' homes, hospital, nursing home, or convalescent centers. We provide live-in, overnight, or hourly shifts. Service is available for as little as two hours or as many as seven days a week. Service schedules will be customized to the client's specific needs. The services listed below are all designed to meet the need of the client only. Excluded services are seasonal chores, maintenance, general housecleaning, lawn services, care for the family members or guests living in the household unless specifically arranged through the office. For those in need we can arrange for general house cleaning and service for other household members at a slight increase in our regular fee.

2.3 OPERATIONAL STAFF:

The Agency, after careful study of the in-home health care industry, found a tremendous void of service in the home health care field. This is the principal reason the Agency was created. The opportunity to create an entity that offered superior service and products is reflected in the staff of the Agency.

The legal form of this Agency is a Pennsylvania Limited Liability Company.

Passion Home Health Care Services management team strength stems from the combined expertise in management, service, and sale arenas. This has produced outstanding results over the past months.

Outsourced Business Departments

Legal Department:

- Periodic legal advice
- Reviews all contracts prior to signature
- Reviews and prepares all policies and procedures Prepares and files annual corporate minutes

Accounting Department:

- Reviews end of year Federal Tax Documents D Prepares next year's quarterly payment amounts Periodic financial advice
- Shares in IRS responsibilities Bookkeeper:
- Registers all daily transactions
- Prepares weekly reports
- Completes monthly billings

The Agency will recruit and employee the following personnel to help it achieve it business goals and client objectives.

Home Health Aides/Direct Care Workers help coordinate patient care with other family members and/or nurse supervisor, and keep records of patient care and may also be called homemaker home health aides, personal attendants, or home attendants.

Home Health Duties or home health aides' duties will vary but generally include what is referred to as Activities of Daily Living or ADL. An aide may go to the same house every day for months or years. Or perhaps provide services to multiple families.

- Helping the patient bathe, and to move around.
- Helping the patient use the toilet or bed pan,
- They might check pulse and breathing rates;
- Change bandages,

- Assist patients with taking their medications.
- Meal preparation
- Housekeeping [minimal cleaning for the safety and comfort of the patient]
- Help cleaning the patient kitchen, and bathroom,

3.0 MARKETING STRATEGY:

Marketing our service-oriented business requires establishing a reputation for expertise and excellence. It starts with our known contacts who are in positions to recommend us and make referrals to us, and continues with long-term efforts to develop recognition among other professionals within the health care and social service fields.

We will develop and maintain a database of our contacts in the field our Owner is already well-known to physicians, other nurses and hospital facilities in our market area, and will work to maintain those relationships throughout our start-up process. The Owner will also make initial contacts in the community as she establishes the business entity and provider status with Medicaid, private insurance companies and local attorneys. She will then introduce the Agency to area professionals who are potential referral sources. Our communications will be professional, as will our marketing tools such as brochures, business cards, and advertisements.

3.1 MARKET ANALYSIS SUMMARY:

The consumer base for the Agency's Home Health Care Services will be patients referred by physicians, health care facilities and other health care professionals. The majority of these patients will be covered by Medicare with a smaller portion being insured by Pennsylvania Medicaid or other private insurance carriers.

3.2. MARKET SEGMENTATION:

The population base in Southeastern Pennsylvania is aging, and more individuals are opting to stay in their own homes longer and return home following hospitalization, rather than proceeding to a nursing home. Our primary market segment includes those patients -typically in an older age bracket who require health care services by home health nursing staff. These patients may also require other home health services, such as social work, in order to access needed community resources.

The Agency's Secondary Market will be those individuals who have suffered a personal injury and require case management services to assist them in addressing medical, financial, and employment issues.

3.3 MARKET ANALYSIS:

		YEAR-1	YEAR-2	YEAR-3	YEAR-4	YEAR-5
Potential Customers Grow	vth CAGR					
		25 10.30%	28	31	34	37
HHC - Medicaid and						
Private Insurance						
Patients						
Total	12.31%	137	154	178		218
	12.31%					

3.4 TARGET MARKET SEGMENT STRATEGY:

Because this Agency specializes in home care and community-based social services, we will focus on those market segments where we know our services are most needed. Focusing on those market segments that require only home-based services will greatly decrease overhead.

3.5 COMPETITION AND BUYING PATTERNS:

The key factor considered by both consumers and referring professionals when purchasing home health care is trust in the professional reputation, reliability and quality of services provided by the home care Agency. Pricing of home health/care services does not usually influence consumers' choices, as most home health services are reimbursed by Medicare, Medicaid, and private insurance companies, and reimbursement rates are set by those entities. Pricing of personal injury case management services is a more important factor, as these services are paid for as negotiated on a case-by-case basis at an hourly rate. When pricing personal injury case management services, we will explain to the client that we estimate the total number of hours needed to complete services liberally, rather than bidding low and then exceeding the anticipated total bid price for services.

Consumers of both home health care services and personal injury case management services rarely compare service providers directly. Usually they follow word-of-mouth recommendations, especially when those recommendations come from their physicians.

Perhaps the most important element for assessing competition in the Home Health and Social Service fields is how to persuade other professionals to repeatedly refer their clients to our agency for services. As our agency demonstrates outstanding patient care, current and pertinent qualification of service providers, and professional organization and business management, we believe that we will be able to capture the majority of the home health care and personal injury case management market in our designated region.

4.0 STRATEGY AND IMPLEMENTATION SUMMARY:

This Agency is currently focusing on five counties within southeastern Pennsylvania; Delaware, Chester, Bucks, Montgomery, and Philadelphia. Exploring other counties will be determined when the need arises. Within our targeted geographical area/s we will target four specific programs:

- Home Health Care(non-medical)/Personal Assistance Services (PAS)
- Personal Emergency Response System (PERS)
- Non-Medical Transportation
- Personal Injury Case Management

Within each area, we have two target markets: the actual client, and the regional physicians, health care facilities, attorneys and insurance companies who refer them to our services.

4.1 COMPETITIVE EDGE:

We start with a competitive edge: Our Agency Owner hired Liberty Licensing & Consulting, LLC and The Law Offices of Kawalksi, Fletcher & Kirkpatrick, P.C. and did train and prepare many of the day-to-day administrative functions that make a home health care agency successful. Liberty and KFK Law Office have butt a reputation for outstanding training and Agency Owner Development, and it is our belief that their hands on approach with our Owner will help to build a strong client and employee base.

5.0 SALES STRATEGY:

Sales in our business means quality patient service and utmost satisfaction from referring physicians and health care facilities. It is perpetual business. One does not sell home health care and personal injury case management; rather one sells excellent care, availability, and effective interpersonal relationships.

In a service industry, growth can mean loss of quality control, which in turn leads to client dissatisfaction. The services we provide should always reflect the

mission and oversight of management. We want our clients to know that the quality of service they receive will be excellent, regardless of the individual service provider performing the service. We will therefore avoid the temptation to broaden the scope of our services too quickly. Rather, we will focus our immediate attentions on making the services we offer of the highest possible quality. Only when those services are well-established and grounded in excellence will we consider expanding our service base.

Staff Training Policy

Passion Home Health Care Services, LLC will ensure that staff are trained in compliance with 55 PA Code Chapter 52.21 and will meet the training requirements necessary to maintain appropriate licensure or certification, or both.

Passion Home Health Care Services, LLC will ensure legally responsible individuals are not paid to provide services. Passion Home Health Care Services, LLC has a system in place to ensure the following are not paid to provide care:

- Participant's spouse
- Legal guardian
- Representative Payee
- Power of Attorney (POA)

Prior to providing a service to a participant, a staff member shall be trained on how to provide the service in accordance with the participant's service plan.

Passion Home Health Care Services, LLC will maintain documentation in each employee file for the following:

- Staff member attendance at trainings.
- Content of trainings.

Passion Home Health Care Services, LLC shall implement standard annual training for staff members providing services which contains at least the following:

- Prevention of abuse and exploitation of participants.
- Reporting critical incidents.
- Ensure staff remains awake during overnight hours.

- Participant complaint resolution.
- Department-issued policies and procedures.
- Provider's quality management plan.
- Fraud and financial abuse prevention.

Staff Training Procedure

- 1) All training shall be documented to include the title of the training session, date and number of hours. This documentation shall be maintained in the individual's personnel file.
- 2) Training may be provided by other organizations in the community. Supervisors must approve all training prior to the event.

It is the responsibility of each staff member to obtain the required hours of training each year. Any staff person who has not acquired mandatory training in the designated time frames will face disciplinary action.

Regulations

§ 611.51. Hiring or rostering of direct care workers.

(Employee Handbook Section 1.06 CLASSIFICATIONS OF EMPLOYMENT)

- (a) *Hiring or rostering prerequisites*. Prior to hiring or rostering a direct care worker, the home care agency or home care registry shall:
 - (1) Conduct a face-to-face interview with the individual.
 - (2) Obtain at least two satisfactory references for the individual. A satisfactory reference is a positive, verifiable reference, either verbal or written, from a former employer or other person not related to the individual that affirms the ability of the individual to provide home care services.
 - (3) Require the individual to submit a criminal history report, in accordance with § 611.52 (relating to criminal background checks), and a ChildLine verification, if applicable, in accordance with the requirements of § 611.53 (relating to child abuse clearance).
- (b) *Direct care worker files*. Files for direct care workers employed or rostered must include documentation of the date of the face-to-face interview with the individual and of references obtained. Direct care worker files must

also include other information as required under § 611.52, § 611.53, and if applicable, § § 611.54, 611.55 and 611.56 (relating to provisional hiring; competency requirements; and health screening).

§ 611.52. Criminal background checks.

(Employee Handbook Section: 2.18 CRIMINAL BACKGROUND CHECK)

- (a) General rule. The home care agency or home care registry shall require each applicant for employment or referral as a direct care worker to submit a criminal history report obtained at the time of application or within 1 year immediately preceding the date of application. An applicant for employment as a member of the office staff for the home care agency or home care registry and the owner or owners of the home care agency or home care registry also are required to obtain a criminal history report in accordance with requirements contained in this section.
- (b) State Police criminal history record. If the individual required to submit or obtain a criminal history report has been a resident of this Commonwealth for 2 years preceding the date of the request for a criminal history report, the individual shall request a State Police criminal history record.
- (c) Federal criminal history record. If the individual required to submit or obtain a criminal history report has not been a resident of this Commonwealth for the 2 years immediately preceding the date of the the request for a criminal history report, the individual shall obtain a Federal criminal history record and a letter of determination from the Department of Aging, based on the individual's Federal criminal history record, in accordance with 6 Pa. Code § 15.144(b) (relating to procedure).
- (d) *Proof of residency*. The home care agency or home care registry may request an individual required to submit or obtain a criminal history record to furnish proof of residency through submission of any one of the following documents:
 - (1) Motor vehicle records, such as a valid driver's license or a State-issued identification.
 - (2) Housing records, such as mortgage records or rent receipts.
 - (3) Public utility records and receipts, such as electric bills.
 - (4) Local tax records.
 - (5) A completed and signed, Federal, State or local income tax return with the applicant's name and address preprinted on it.

- (6) Employment records, including records of unemployment compensation.
- (e) *Prohibition*. The home care agency or home care registry may not hire, roster or retain an individual if the State Police criminal history record reveals a prohibited conviction listed in 6 Pa. Code § 15.143 (relating to facility responsibilities), or if the Department of Aging letter of determination states that the individual is not eligible for hire or roster.
- (f) *Records maintained*. The home care agency or home care registry shall maintain files for direct care workers and members of the office staff which include copies of State Police criminal history records or Department of Aging letters of determination regarding Federal criminal history records. The files shall be available for Department inspection. The agency or registry shall maintain copies of the criminal history report for the agency or registry owners, which shall be available for Department inspection.
- (g) Confidentiality. The home care agency or home care registry shall keep the information obtained from State Police criminal history records and Department of Aging letters of determination regarding Federal criminal history records confidential and use it solely to determine an applicant's eligibility to be hired, rostered or retained.
- (h) Opportunity to appeal. If the decision not to hire, roster or retain an individual is based in whole or in part on State Police criminal history records, Department of Aging letters of determination regarding Federal criminal history records, or both, the home care agency or home care registry shall provide an affected individual with information on how to appeal to the sources of criminal history records if the individual believes the records are in error.
- (i) *Exceptions*. A direct care worker who has complied with this section and who transfers to another agency or registry owned and operated by same entity is not required to obtain another criminal history report. A direct care worker employed or rostered by an entity that undergoes a change of ownership is not required to obtain another criminal history report to submit to the new owner.
- (j) *Individuals currently employed or rostered*. A direct care worker and each member of the agency or registry office staff who is employed by or rostered by a home care agency or home care registry as of December 12, 2009, shall obtain and submit a State Police criminal history record or Department of Aging letter of determination, as applicable, to the home care agency or home care registry by April 12, 2010. This subsection does not apply if the home care agency or home care registry obtained a criminal history report meeting the requirements of this subsection when the direct care worker or office staff member was hired or rostered and a copy of the report is included in the individual's file.

Cross References

This section cited in 28 Pa. Code § 611.51 (relating to hiring or rostering of direct care workers); and 28 Pa. Code § 611.54 (relating to provisional hiring).

§ 611.53. Child abuse clearance.

(Employee Handbook Section: 1.04 Conditions of Employment)

- (a) General rule. A home care agency or home care registry that serves persons under 18 years of age shall require each applicant for employment or referral as a direct care worker, each applicant for employment as a member of the agency or registry office staff to request a ChildLine verification regarding whether the applicant is named in the Statewide Central Register as the perpetrator of a founded or indicated report of child abuse as defined in 55 Pa. Code § 3490.4 (relating to definitions).
- (b) *Prohibition*. A home care agency or home care registry may not employ, roster or retain an individual where ChildLine has verified that the individual is named in the Statewide Central Register as the perpetrator of a founded or indicated report of child abuse.
- (c) Records maintained. The files maintained by the home care agency or home care registry for each individual employed or rostered and for each member of the office staff must include copies of the ChildLine verification. The agency or registry shall maintain copies of the ChildLine verification for the agency or registry owners, which shall be available for Department inspection.
- (d) *Individuals currently employed or rostered*. A person who is employed by or rostered by the home care agency or home care registry, including each member of the agency or registry office staff, as of December 12, 2009, shall obtain and submit a ChildLine verification to the home care agency or home care registry by April 12, 2010. This subsection does not apply if the home care agency or home care registry obtained a ChildLine verification when the individual was hired or rostered and a copy of the verification is included in the individual's file.

Cross References

This section cited in 28 Pa. Code § 611.51 (relating to hiring or rostering of direct care workers); and 28 Pa. Code § 611.54 (relating to provisional hiring).

§ 611.54. Provisional hiring.

(Employee Handbook Section: 2.18 Criminal background Check)

- (a) *General rule*. The home care agency or home care registry may hire an applicant for employment or referral on a provisional basis, pending receipt of a criminal history report or a ChildLine verification, as applicable, if the following conditions are met:
- (1) The applicant shall have applied for a criminal history report and ChildLine verification, as applicable, and provided the home care agency or home care registry with a copy of the completed request forms.
- (2) The home care agency or home care registry shall have no knowledge about the applicant that would disqualify the applicant under 18 Pa.C.S. § 4911 (relating to tampering with public record information).
- (3) The applicant shall swear or affirm in writing that the applicant is not disqualified from employment or referral under this chapter.
- (4) The home care agency or home care registry may not assign or refer the provisionally hired applicant until that person has met the requirements of § 611.55 (relating to competency requirements).
- (5) The home care agency or home care registry shall monitor the provisionally hired applicant awaiting a criminal background check through random, direct observation and consumer feedback. The results of monitoring shall be documented in the individual's file.
- (6) The home care agency or home care registry shall directly supervise, or assign another direct care worker to accompany, a provisionally hired applicant awaiting a child abuse clearance who will provide home care services to a consumer less than 18 years of age.
- (7)The period of provisional hire of an individual who is and has been, for a period of 2 years or more, a resident of this Commonwealth, may not exceed 30 days. The period of provisional hire of an individual who has not been a resident of this Commonwealth for 2 years or more may not exceed 90 days.
- (b) *Termination*. If the information obtained from the criminal history report or ChildLine verification, or both, reveals that the individual is disqualified from employment or referral under § 611.52 (relating to criminal background checks) or under § 611.53 (relating to child abuse clearance), the individual shall be terminated by the home care agency or removed from the home care registry's roster immediately. If the individual fails to provide the ChildLine verification or criminal history report, or both, within the time period permitted for provisional hire, the individual shall be terminated by the home care agency or removed from the home care registry's roster immediately.

Cross References

This section cited in 28 Pa. Code § 611.51 (relating to hiring or rostering of direct care workers).

§ 611.55. Competency requirements.

(Employee Handbook Section: 2.16 Expectations, sub Heading: Work Behaviors)

- (a) Prior to assigning or referring a direct care worker to provide services to a consumer, the home care agency or home care registry shall ensure that the direct care worker has done one of the following:
 - (1) Obtained a valid nurse's license in this Commonwealth.
 - (2) Demonstrated competency by passing a competency examination developed by the home care agency or home care registry which meets the requirements of subsections (b) and (c).
 - (3) Successfully completed one of the following:
- (i) A training program developed by a home care agency, home care registry, or other entity which meets the requirements of subsections (b) and (c).
- (ii) A home health aide training program meeting the requirements of 42 CFR 484.36 (relating to the conditions of participation; home health aide services).
- (iii) The nurse aid certification and training program sponsored by the Department of Education and located at www.pde.state.pa.us.
- (iv) A training program meeting the training standards imposed on the agency or registry by virtue of the agency's or registry's participation as a provider in a Medicaid Waiver or other publicly funded program providing home and community based services to qualifying consumers.
- (v)Another program identified by the Department by subsequent publication in the *Pennsylvania Bulletin* or on the Department's web site.
- (b) A competency examination or training program developed by an agency or registry for a direct care worker must address, at a minimum, the following subject areas:
- (1) Confidentiality.
- (2) Consumer control and the independent living philosophy.

- (3) Instrumental activities of daily living.
- (4) Recognizing changes in the consumer that need to be addressed.
- (5) Basic infection control.
- (6) Universal precautions.
- (7) Handling of emergencies.
- (8) Documentation.
- (9) Recognizing and reporting abuse or neglect.
- (10) Dealing with difficult behaviors.
- (c) A competency examination or training program developed by an agency or registry for a direct care worker who will provide personal care must address the following additional subject areas:
 - (1) Bathing, shaving, grooming and dressing.
 - (2) Hair, skin and mouth care.
 - (3) Assistance with ambulation and transferring.
 - (4) Meal preparation and feeding.
 - (5) Toileting.
 - (6) Assistance with self-administered medications.
- (d)The home care agency or home care registry shall include documentation of the direct care worker's satisfactory completion of competency requirements in the direct care worker's file. If the direct care worker has a nurse's license or other licensure or certification as a health professional, the individual's file shall include a copy of the current license or certification. Documentation of satisfactory completion of competency requirements is transferable from one home care agency or registry to another home care agency or registry, provided the break in the individual's employment or roster status does not exceed 12 months.
- (e) The home care agency or home care registry also shall include documentation in the direct care worker's file that the agency or registry has reviewed the individual's competency to perform assigned duties through direct observation, testing, training, consumer feedback or other method approved by the Department

or through a combination of methods. The competency review must occur at least once per year after initial competency is established, and more frequently when discipline or other sanction, including, for example, a verbal warning or suspension, is imposed because of a quality of care infraction.

(f) A direct care worker employed by a home care agency or rostered by the home care registry on December 12, 2009, shall achieve compliance with the competency requirements imposed by this chapter by December 12, 2011.

Cross References

This section cited in 28 Pa. Code § 611.51 (relating to hiring or rostering of direct care workers); and 28 Pa. Code § 611.54 (relating to provisional hiring).

§ 611.56. Health screening.

(Employee Handbook Section 7.05 IMMUNIZATION AND PPD TESTING PROGRAM)

- (a) A home care agency or home care registry shall insure that each direct care worker and other office staff or contractors with direct consumer contact, prior to consumer contact, provide documentation that the individual has been screened for and is free from active mycobacterium tuberculosis. The screening shall be conducted in accordance with CDC guidelines for preventing the transmission of mycobacterium tuberculosis in health care settings. The documentation must indicate the date of the screening which may not be more than 1 year prior to the individual's start date.
- (b)A home care agency or home care registry shall require each direct care worker, and other office staff or contractors with direct consumer contact, to update the documentation required under subsection (a) at least every 12 months and provide the documentation to the agency or registry. The 12 months must run from the date of the last evaluation. The documentation required under subsection (a) shall be included in the individual's file.
- (c) A direct care worker employed by a home care agency or rostered by the home care registry on December 12, 2009, shall achieve compliance with the health evaluation requirements imposed by this chapter by June 10, 2010.

Cross References

This section cited in 28 Pa. Code § 611.51 (relating to hiring or rostering of direct care workers).

JOB DESCRIPTION:

Personal Assistant Service (PAS) Job Classification: Non-Exempt

What is a Personal Assistant Attendant: A Personal Assistant Service (PAS) or Personal Attendant can be defined as people or services that assist a person with a physical, sensory, mental, or cognitive disability with tasks that the person would perform for himself/herself if he/she did not have a disability. In general, these may include assistance with dressing, bathing, eating, toileting, and cognitive tasks such as facilitating communication access with a reader.

What are Personal Assistance Services in the Agency?

For this Agency, PAS are provided as a reasonable accommodation to enable an employee to perform the functions of a job. This Agency's responsibility for providing reasonable accommodations begins when the employee reaches the job site and concludes when the work day ends. Workplace-related PAS might include filing, retrieving work materials that are out of reach, or providing travel assistance for an employee with a mobility impairment, reading handwritten mail to an employee with a visual impairment, or assisting an employee with a cognitive disability with an organization system. Each person with a disability has different needs and may require a unique combination of PAS.

Do Personal Assistance Services include Skilled Medical Care?

Skilled medical care, which involves personal use items/services, is not required to be furnished by an employer in the workplace per the Rehabilitation Act for Federal employees and the Americans with Disabilities Act (ADA) for non-Federal workers.

Who can perform Personal Assistance Services?

The individual who provides PAS is referred to as a Personal Attendant (PA). Anyone can serve as a PA as long as he or she has been determined by the employee's manager to be capable of meeting the pre-determined needs of the employee without posing a potential liability to the Department. A PA is not permitted to act as an official representative on behalf of DOT, its employees, or its contractors.

Under no circumstance is the PA to perform any of the employee's essential or non-essential duties. The PA is only able to provide access to otherwise inaccessible aspects of the job. An individual who employs a PA outside of work may be permitted to have the PA accompany him/her to the job site to perform PAS with their manager's approval. The PA may not be disruptive to the workplace and would need to meet the Department's personnel and contractor requirements such as security, background checks, etc.

Job Summary: Responsible for (Non-Medical), in-home provide for the comfort and general supervision of clients as well as home management services. Provides companionship to those individuals requiring socialization arid/or minimum guidance to assure a safe, protected, clean and orderly environment.

Qualifications: Minimum of ninth grade education; high school diploma or GED preferred. Must demonstrate satisfactory completions of any stated mandated training. Applicant must be bondable and meet or exceed minimum qualifications for each of the following background checks: Criminal Background Investigation, Motor Vehicle Driving Record, Credit History, Professional and Persona! Reference Checks, and give permission to submit to random drug and alcohol testing. Must have reliable transportation and fulfill assignments with reliability and punctuality. Must have a valid driver's license and automobile insurance.

Must satisfactorily complete, training and orientation program(s). Must accept responsibility for learning and adhering to Agency policies and procedures, be able to function in the home setting with minimal direct supervision and maintain satisfactory relationships with administrative staff, clients, and family members. Must be able to follow verbal and written instructions and document services provided. Must be genuinely concerned about helping people and have high moral standards of honesty and integrity.

§ 611.55. Competency Requirements

- (a) Prior to assigning or referring a direct care worker to provide services to a consumer, the home care agency or home care registry shall ensure that the direct care worker has done one of the following:
 - (1) Obtained a valid nurse's license in this Commonwealth.
 - (2) Demonstrated competency by passing a competency examination developed by the home care agency or home care registry which meets the requirements of subsections (b) and (c).
 - (3) Successfully completed one of the following:

The Agency has its own in-house program to ensure employees are trained in the following areas:

- (b) A competency examination or training program developed by an agency or registry for a direct care worker must address, at a minimum, the following subject areas:
 - (1) Confidentiality.
 - (2) Consumer control and the independent living philosophy.
 - (3) Instrumental activities of daily living.
 - (4) Recognizing changes in the consumer that need to be addressed.
 - (5) Basic infection control.
 - (6) Universal precautions.
 - (7) Handling of emergencies.
 - (8) Documentation.
 - (9) Recognizing and reporting abuse or neglect.
 - (10) Dealing with difficult behaviors.

Essential Functions:

- Provides general attention to client's non-medical needs in accordance with an established Plan of Care.
- Provides companionship for the client including, but not limited to: talking and listening,
- reading aloud, providing social and emotional support. Promotes the client's mental alertness through involvement in activities of interest. Provides emotional support and promotes a sense of well-being.
- Provides for a dean, safe, and healthy environment for clients and family members.

Provides light housekeeping tasks including laundering of client's garments and linens.

- May prepare and serve meals as directed. Ensures that dishes are washed and kitchens clean after each meal.
- Assists client in completing necessary phone calls, letter writing, etc.
 Accompanies client on walks, community trips, doctor's office, bank, beauty salons, etc.
- · Reminds client to take self-administered medications.
- Observes and reports any changes in the client's mental, physical, or emotional condition or home situation to immediate supervisor in a timely manner.
- Establishes and maintain effective communication and a professional relationship with clients, family members and co-workers.
- Participates in in-service and continuing education programs, staff meetings, and client
- conferences as requested by supervisor.
- Completed required documentation of services delivered and submits to office in a manner according to policy.
- Uses equipment and supplies safely and properly.
- Maintains confidentiality regarding client information.
- Other reasonable related duties as assigned.

Working Environment: Client's home setting, and automobile. Contact with blood or other body fluids may pose a risk for exposure to blood borne pathogens and infectious diseases.

Position Physical Demands: The work requires light physical exertion on a regular and reoccurring basis, such as driving, assisting the client in activities, and light housekeeping. You are regularly required to sit, walk, talk, hear and occasionally required to reach and lift.

(DO NOT SIGN, IF YOU DO NOT AGREE AND/OR UNDERSTAND IT)

Agency requires all employees prior to any offer of employment being extended; all employees must successfully pass a state mandatory criminal background check. Agency is prohibiting from hiring and or retaining any individual(s) with a prohibited conviction or Department of Aging ineligibility determination. As described below:

As required under PA Code § 611.52. (e) Prohibition. The home care agency or home care registry may not hire, roster or retain an individual if the State Police criminal history record reveals a prohibited conviction listed in 6 Pa. Code § 15.143 (relating to facility responsibilities), or if the Department of Aging letter of determination states

that the individual is not eligible for hire or roster.

l,	, acknowledge receipt and understanding of this
	at this reflects a general list responsibility of the position of the working environment and physical demands pted.
Applicant Signature	Date

ADA Compliance Policy

Passion Home Health Care Services, LLC understands the obligation and will comply to the 55 PA Code Chapter 52.11 (a) (5) (iii) In accordance with the Americans with Disabilities Act of 1990 (ADA), the Rehabilitation Act of 1973 and subsequent regulations. Passion Home Health Care Services, LLC will make sure all employees abide by the ADA regulations and that all clients are aware of the policies. Passion

Home Health Care Services, LLC will provide an employee with reasonable accommodation, who can perform the essential functions of the employment position that such individual may qualify or desires. Passion Home Health Care Services, LLC understands and accepts that no covered entity shall discriminate against a qualified individual on the basis of disability in regard to job application procedures, the hiring, advancement, or discharge of employees, employee compensation, job training, and other terms, conditions, and privileges of employment.

Passion Home Health Care Services, LLC will not discriminate against anyone with any physical or mental disability neither against any client or customer with any disability and shall provide such accommodations. Passion Home Health Care Services, LLC provides reasonable accommodation to qualified individuals with an appropriately documented disability, provided that such accommodation does not create an undue hardship. Passion Home Health Care Services, LLC determines accommodations on a case-by-case basis for students who are unable to meet program requirements due to appropriately documented disabilities. Requested accommodations initiated by the student must be reasonable, must not create undue burden, must be supported by adequate documentation, and must be requested within a reasonable time frame. Passion Home Health Care Services, LLC have read and understand and must comply with the ADA provisions Section 12101-12113.

Employee Mandatory Criminal Background Check Policy

In compliance of 55 PA Code Chapter 52.19, 52.14, criminal background checks are required for all employed or rostered direct care workers, office staff and the direct owner of Passion Home Health Care Services, LLC. There will be in-office procedures to ensure that all criminal background checks and verifications are in place prior to employment and updated annually.

Clearances are also required for all direct care workers and service providers, including Service Coordinators and contractors, providing services in homes where children

reside. A child is defined as an individual under 18 years of age. The following three certifications must be obtained prior to providing services in homes where children reside:

- (1) A report of criminal history record information from the Pennsylvania State Police if the employee has been a resident of this Commonwealth for the 2 years immediately preceding the date of application.
- (2) A report of Federal criminal history record information under the Federal Bureau of Investigation appropriation of Title II of the act of October 25, 1972 (Pub. L. No. 92-544, 86 Stat. 1109) if the employee has not been a resident of this Commonwealth for the 2 years immediately preceding the date of application.
- (3) A report of criminal history record from the Child Abuse History Certification from the Department of Human Services (Child Abuse),

Criminal history checks shall be in accordance with the Older Adults Protective Services Act (35 P. S. § § 10225.101-10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Passion Home Health Care Services, LLC hiring process shall be in accordance with the Department of Aging Older Adults Protective Services Act policy as posted.

A copy of the final report received from the Pennsylvania State Police or the Federal Bureau of investigation, as applicable, shall be kept in accordance with § 52.15. If any information obtained from the criminal history check reveals that the person is disqualified from employment under 52.19, Passion Home Health Care Services, LLC. will terminate the provisionally hired person immediately.

Passion Home Health Care Services, LLC will hire a person for employment on a provisional basis pending receipt of a criminal history check if the following are met:

A) The provisionally hires person awaiting a criminal history check will be

- monitored through random, direct observation and participant feedback and the results will be documented in the persons employment file
- B) The provisional hire period will not exceed 30 days for a person who has been a resident of Pennsylvania for at least 2 years.
- C) The provisional period will not exceed 90 days for an individual who has not been a resident of the Commonwealth for less than 2 years
- D) A provisionally hires employee shall swear or affirm in writing that he is not disqualified from employment under this chapter
- E) Passion Home Health Care Services, LLC will not hire a person provisionally if we have knowledge that the person would be disqualified for employment under 18 Pa. C.S. 4911

If an employee is arrested for or convicted of an offense that would constitute grounds for denying employment or participation in a program, activity or service, or is named as a perpetrator in a founded or indicated report:

- A) The employee must provide the administrator or their designee with written notice not later than 72 hours after the arrest, conviction or notification that the person has been listed as a perpetrator in the statewide database.
- B) An employee who willfully fails to disclose information as required above commits a misdemeanor of the third degree and shall be subject to discipline up to and including termination or denial of employment

Background Clearance and Monitoring Policy Including Residence where child under 18 years resides.

§ 611.53. Child abuse clearance.

(Employee Handbook Section: 1.04 Conditions of Employment)

- (a) General rule. A home care agency or home care registry that serves persons under 18 years of age shall require each applicant for employment or referral as a direct care worker, each applicant for employment as a member of the agency or registry office staff to request a ChildLine verification regarding whether the applicant is named in the Statewide Central Register as the perpetrator of a founded or indicated report of child abuse as defined in 55 Pa. Code § 3490.4 (relating to definitions).
- (b) *Prohibition*. A home care agency or home care registry may not employ, roster or retain an individual where ChildLine has verified that the individual is named in the Statewide Central Register as the perpetrator of a founded or indicated report of child abuse.
- (c) *Records maintained*. The files maintained by the home care agency or home care registry for each individual employed or rostered and for each member of the office staff must include copies of the ChildLine verification. The agency or registry shall maintain copies of the ChildLine verification for the agency or registry owners, which shall be available for Department inspection.
- (d) Individuals currently employed or rostered. A person who is employed by or rostered by the home care agency or home care registry, including each member of the agency or registry office staff, as of December 12, 2009, shall obtain and submit a ChildLine verification to the home care agency or home care registry by April 12, 2010. This subsection does not apply if the home care agency or home care registry obtained a ChildLine verification when the individual was hired or rostered and a copy of the verification is included in the individual's file.

Cross References

This section cited in 28 Pa. Code § 611.51 (relating to hiring or rostering of direct care workers); and 28 Pa. Code § 611.54 (relating to provisional hiring).

PROCEDURES: In compliance of 55 PA Code Chapter 52.19, 52.14, criminal background checks are required for all employed or rostered direct care workers, office staff and the direct owner of Passion Home Health Care Services, LLC. There will be in-office procedures to ensure that all criminal background checks and verifications are in place prior to employment and updated annually.

Clearances are also required for all direct care workers and service providers, including Service Coordinators and contractors, providing services in homes where children reside. A child is defined as an individual under 18 years of age. The following three certifications must be obtained prior to providing services in homes where children reside:

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MONITORING AND TERMINATION PROCEDURES FOR CHILD ABUSE CLEARANCE

Passion Home Health Care Services, LLC will hire a person for employment on a provisional basis pending receipt of a criminal history check if the following are met:

- (A)The provisionally hires person awaiting a criminal history check will be monitored through random, direct observation and participant feedback and the results will be documented in the persons employment file
- (B) The provisional hire period will not exceed 30 days for a person who has been a resident of Pennsylvania for at least 2 years.
- (C) The provisional period will not exceed 90 days for an individual who has not been a resident of the Commonwealth for less than 2 years
- (D)A provisionally hires employee shall swear or affirm in writing that he is not disqualified from employment under this chapter
- (E) Passion Home Health Care Services, LLC will not hire a person provisionally if we have knowledge that the person would be disqualified for employment under 18 Pa. C.S. 4911

If an employee is arrested for or convicted of an offense that would constitute grounds for denying employment or participation in a program, activity or service, or is named as a perpetrator in a founded or indicated report:

- A) The employee must provide the administrator or their designee with written notice not later than 72 hours after the arrest, conviction or notification that the person has been listed as a perpetrator in the statewide database.
- (B) An employee who willfully fails to disclose information as required above commits a misdemeanor of the third degree and shall be subject to discipline up to and including termination or denial of employment

Critical Incident Management Policy

There is a step-by-step process to respond to and/or manage critical incidents in accordance with 55 PA Code Chapter 52.17(c). Critical incidents may be defined as an occurrence of an event that jeopardizes the health or welfare of a consumer or an employee. It also includes things that threaten operations, such as fire or loss of utilities, and those that have a direct negative impact on the agency itself, such as a serious accident or threat. Natural disasters, such as tornadoes, floods, ice storms or earthquakes and human and animal disease outbreaks are considered critical incidents due to uncontrollable means. According to 55 PA Code Chapter 52.17(c), there are 5 key factors involved in developing and implementing written policies and procedures on preventing, reporting, notifying, management, and investigating critical incidents.

When a critical incident occurs, any information relating to the critical incident or the participant should be kept confidential, and only necessary information should be released to essential personnel such as police, medical personnel, Adult Protective Services/Older Adult Protective Services, crisis intervention, etc. in order to ensure the participant's health and welfare, and/or complete the critical incident report. Critical incident cases involving an agency may require the employee to be removed from all OLTL HCBS programs. This may include requiring that the employee have no contact with the participant or suspending the employee from all HCBS OLTL programs until the investigation is completed. The employee will have no contact with participant or will be suspended until the investigation is complete Passion Home Health Care Services, LLC has established their agency's policies in accordance with 55 PA Code Chapter 52.17(c).

Prevention

Passion Home Health Care Services, LLC's goal is to be proactive in preventing critical incidents within our power from happening. Planning ahead will allow Passion Home Health Care Services, LLC to stop the problem, take safety measures, and use recovery principles to resume to normal operations. Passion Home Health Care Services, LLC will implement an emergency action plan for staff and consumers that will address consideration for each in their own category. Passion Home Health Care

Services, LLC will have yearly orientation programs developed for all staff to discuss up-to-date Emergency Preparedness Plans that involves fire and safety, CPR trainings and will address the unique needs of each consumer that the employee may assist.

Passion Home Health Care Services, LLC will also educate consumers and their families. There will be instructions on infection control practices in the home, an assistance with medical and social supports that are critical to the process of protecting the health and safety of consumers.

Management

In the event of an emergency or critical incident, Passion Home Health Care Services, LLC 's Management team priority is to secure the safety & well-being of employees and consumers. The secondary needs are making sure that securing assets are protected and that normal operations are maintained.

The management team of Passion Home Health Care Services, LLC will participate in all planning meetings to resolve the critical incident and to develop strategies. The team of Passion Home Health Care Services, LLC will submit updates until the incident is resolved. The team will identify the potential sources of information and gather the evidence or facts as to document the incident. They will implement recommendations to ensure all regulatory and company requirements are met that includes recordkeeping, notification, written reports, and insurance claims. Passion Home Health Care Services, LLC Management team performs any trend analyses of past incidents that may identify additional hazards, prevention methods, training, and other procedures.

Reporting

Passion Home Health Care Services, LLC shall report a critical incident involving a participant to the supervisor as soon as possible. If the supervisor is not available, then the next in chain of command will be contacted to report the incident. An agency supervisor will report will notify Adult Protective Services or Older Adult Protective Services, based on age, within 48 hours of incident. If the incident occurs over a weekend, the incident will be reported the very next business day. An agency supervisor will report a critical incident

involving a participant within 24 hours of the incident upon discovery, or immediately if 911 is called, to the Department or the Service Coordination Entity (SCE), or both, on a form prescribed by the Department. If there is a need for Passion Home Health Care Services, LLC to contact the police, or fire department for medical emergencies, it will be done immediately. If anyone suspects that a participant is in imminent danger of abuse, neglect, exploitation or abandonment, they are responsible to make an immediate oral report to the statewide Protective Services Hotline at 1-800-490-8505., If additional follow-up information is required, then Passion Home Health Care Services, LLC shall submit additional information as requested. Passion Home Health Care Services, LLC is required to report incidents of abuse or neglect to the Department of Aging and to report to DHS cases in which an employee of Passion Home Health Care Services, LLC is a suspected perpetrator, or caregiver reports misconduct.

Notify

Passion Home Health Care Services, LLC will establish a confidential file on each Critical Incident and ensure that the file contains all incident reporting and facts documentation, including details of the responses taken and contact details for all people involved in the response process. A current list of contact information for staff, consumers, and family members will be maintained in order to notify persons involved. The notifying party should seek to maintain the confidentiality of personal information related to all individual persons involved in or witnessing the incident.

Investigation

Passion Home Health Care Services, LLC's investigations will be constructive, credible and made in a timely manner. By doing a thorough investigation, it will determine the causes of the incident. Passion Home Health Care Services, LLC's purpose is to assist in providing the management team with

a solution to prevent it from reoccurring. Passion Home Health Care Services, LLC will properly train staff and understands a clear understanding of roles and responsibilities is essential to the investigation process. All employees and people that will be involved in an incident investigation should be aware of what their role is in the process and how to perform their assigned responsibilities during an investigation

The ultimate responsibility for an incident investigation rests with management. Supervisors must take charge of a thorough incident investigation. Depending upon the type and scope of an incident, Passion Home Health Care Services, LLC will take a team approach to the investigation of the incident may identify additional corrective actions that will help prevent similar incidents in the future.

Pennsylvania

OFFICE OF LONG-TERM

DEPARTMENT OF OF AGING
DEPARTMENT PUBLIC WELFARE

LIVING BULLETIN

ISSUE DATE

August 8, 201 1

EFFECTIVE DATE

Immediately

NUMBER

05-11-04, 51-11-04, 52-11- 04, 54-11-04, 55-11-04, 59-11-

SUBJECT

Program Fraud & Financial Abuse in Office of LongTerm Living MA Home and Community-Based Service (HCBS) Programs

BY Kevin Hancock, Acting Deputy Secretary
Office of Long-Term Living

PURPOSE

The purpose of this Bulletin is to remind the Medical Assistance (MA) Home and Community Based-Service providers of the requirements set forth in Sections 1101.73 (relating to provider misutilization and abuse) and 1101.75 (relating to provider prohibited acts) of Title 55 Pa Code and the procedures for reporting suspected misutilization, abuse and prohibited acts.

SCOPE

This OLTL Bulletin applies to all MA Home and Community-Based Services (HCBS) Waiver service providers, including Care Management and Service Coordination Agencies, Care Managers and Service Coordinators, Fiscal/Employer Agencies, Direct Service Agencies and employees and contractors of these agencies.

DISCUSSION

The OLTL is responsible for providing MA HCBS providers with information about financial abuse and program fraud; documentation requirements; how to report suspected fraud or abuse and remedies available for enforcement.

<u>Title 55 Pa Code 1101.73</u> (relating to provider misutilization and abuse) discusses the steps taken if a provider is found billing for services inconsistent with MA regulations, unnecessary, inappropriate to patients' health needs or contrary to customary standards of practice.

Examples of provider misutilization and abuse include, but are not limited to, the following: • Charging excessively for services or supplies;

- Submitting claims for services that do not meet CMS/MA medical necessity criteria;
- Breaching the Medicare/Medicaid participation or assignment agreements;
 - Improperly submitting claims or utilizing incorrect coding; and
 - Submitting incomplete records required to document service provision, or as otherwise required by state and/or federal rules.

<u>Title 55 Pa. Code S 1101.75</u> (relating to provider prohibited acts) outlines the acts prohibited under the MA program. Examples of provider prohibited acts include, but are not limited to, the following:

- •Submitting claims for services or supplies that were not provided;
 - Altering claims to obtain higher payments;
 - Soliciting, offering or receiving a kickback, bribe or rebate (for example, paying for referral of clients);
- Completing Certificates of Medical Necessity (CMNs) for patients not known to the provider;
 - Submitting any false data on claims, such as the date of service, units of service, or the provider of service; and
- Using deceptive enrollment practices.

The following are situational examples of program fraud committed by providers:

• A personal care worker continued to bill and be paid for services authorized under an MA waiver while the individual supposed to be receiving the services was incarcerated. Both the worker and the person supposed to be receiving the services conspired to continue billing for the services in order to gather money for bail. • A personal care worker billed and received payment for hours of service provided to an individual needing assistance while the personal care worker was on duty at another job.

Examples of program fraud committed by individuals receiving services:

Using another person's Medicare/Medicaid card to obtain medical care; and • Signing an attendant's timesheet for hours of care not provided.

<u>Documentation Requirements for Services Rendered</u>

<u>Title 55 Pa. Code S 1101.51 (d)</u> establishes standards of practice and S 1101.51 (e) sets forth record keeping requirements for all provider types, including MA HCBS Waiver providers. The OLTL must assure that providers have sufficient and accurate documentation to support claims submitted for payment. This documentation is used by the Department to determine the validity of claims

submitted, the medical necessity and quality of services provided to MA recipients.

PROCEDURES

Providers should review their record keeping practices to ensure compliance with applicable Federal and State statutes and regulations, as well as compliance with their licensing and approval standards.

Reporting

Providers that detect or suspect a prohibited act has been committed MUST report the suspected prohibited act to the DPW Office of Administration, Bureau of Program Integrity. This DOES NOT preclude reporting to any other investigative agency or entity.

Detected or suspected prohibited acts must be reported immediately to the Bureau of Program Integrity (BPI) through one of the methods listed below.

• By electronically submitting the MA Provider Compliance Hotline Response Form

htt://www.d w.state.a.us/learnaboutd w/fraud and abuse/marovidercom lianceh otlineresponseform/index.htm)

- By phone: 1-866-DPW-TIPS (1-866-379-8477)
- By fax: (717) 772-4655—Attention: MA Provider Compliance Hotline By U.S. Mail:

Bureau of Program Integrity
MA Provider Compliance Hotline
P.O. Box 2675
Harrisburg, PA 17105-2675

Remedies for Enforcement

OLTL reminds providers that DPW has the following enforcement actions listed in <u>55</u> <u>Pa. Code S 1 101.77 (relating to enforcement actions taken by the Department)</u> available to address fraud and financial abuse. These actions include terminating the provider's provider enrollment and participation in the MA program.

Providers convicted of prohibited acts are subject to criminal penalties outlined in 55 Pa. Code S 1101.76 (relating to criminal penalties).

Providers who have engaged in prohibited acts can also be referred to federal authorities for further investigation and possible prosecution, according to <u>55 Pa. Code S 1101.74</u> (relating to Provider fraud).

DPW can also seek restitution and reimbursement for payments made for prohibited acts under 55 Pa Code S 1101.83 (relating to restitution and repayment).

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Office of Long-Term Living
Office of Policy and Strategic Planning
Forum Place
555 Walnut Street, 5th floor
Harrisburg, PA 17101
717-705-3705

PASSION HOME HEALTH CARE SERVICES, LLC <u>Electronic Visit Verification (EVV)</u> POLICY:

SCOPE:

Passion Home Health Care Services, LLC., (hereinafter "Agency"), as a licensed provider shall abide by Section 12006 of the 21st Century Cures Act which requires all states to implement the use of EVV for Medicaid-funded personal care and home health care services.

Section 12006 of the 21st Century Cures Act

EVV is a technology solution which electronically verifies the provision of PCS by providers of home and community-based services using multiple technologies such as telephonic, mobile application and web portal verification inputs to help electronically validate PCS services and prevent fraudulent PCS claims.

The Cures Act requires that EVV systems must collect and verify the following:

- 1. The type of service provided
- 2. The name of the individual receiving the services
- 3. The date of service delivery
- 4. The location of service delivery
- 5. The name of the individual providing the service
- 6. The time the service begins and ends

The use of EVV ensures near real-time capture of data such as:

- Near real-time monitoring
- Exception flags for visits that are missing required data
- Can resolve visit issues or errors immediately
- Data supports claims submission
- Standard Summary and Detail reporting

Passion Home Health Care Services, LLC will ensure that its staff (including direct care staff and attendants) who provide services for which EVV is required, receive training and comply with all processes required to verify service delivery through the use of EVV.

Passion Home Health Care Services, LLC will train office and administrative staff members on the use of the EVV System to enter all of the required data elements, enter schedules (as applicable), and verify service delivery through visit maintenance and the use of reason codes.

Passion Home Health Care Services, LLC is serving participants who are already enrolled in one of the CHC Managed Care Organizations (MCOs) and will use the MCO's EVV system, HHAexchange. The CHC Managed Care Organizations (MCOs) will use their internal systems to meet the EVV requirement. Passion Home Health Care Services works with the MCO(s) directly regarding their internal systems.

UPMC Health Plan requires the use of Electronic Visit Verification (EVV) for certain Home and Community Based Services. As of January 1, 2020, EVV must be used for all Personal Assistance Services (PAS) or Respite Services provided to UPMC Community HealthChoices participants by HCBS Providers. In order to fulfill the EVV requirement, the following data will be captured and provided to UPMC Health Plan:

- Type of service performed
- Participant receiving the service
- Individual providing the service
- Date of the service
- Location of service delivery
- Time the service begins and ends. All data must be remitted using procedures communicated to HCBS Providers by UPMC Health Plan. EVV data must be unedited to be considered valid. If there are any changes to the original timestamp, HCBS Providers must also provide the following additional information:
 - The name of the individual who authorized the change
- The reason the change was made HCBS Providers will be monitored for compliance with EVV requirements, in accordance with UPMC Health Plan policies and procedures. UPMC Health Plan's policies and procedures regarding EVV will be updated from time to time. Failure to comply with UPMC Health Plan policies and procedures regarding EVV may result in a Provider Corrective Action Plan and/or non-payment for services.

EDIDING OF ELLECTRONICALLY CAPTURED SERVICES:

Passion Home Health Care prohibits the editing of electronically captured services such as captured EVV call-in and call-out time.

- In the event where an employee or Direct Care Work successfully reports to work, complete his/her assigned duties and fails to call-in and call-out or call-in and fails to call-out, Passion Home Health Care Services administrative staff must first confirm the visit: By calling the Participant to confirm and attest that the DCW reported to his/her service location on time and departed at the service end time,
- Must obtain confirmation from Participant that the DCW performs his/her require duties as per the participant's service plan.

Procedures:

The Passion Home Health Care Administrative Staff must follow these basic steps if the DCW/employee fails to call-in and call-out or call-in but failed to call-out of the EVV system for any relevant reason/s:

- Verify the DCW/employee delivered services according to program policy and requirements.
- Receive and retain service delivery documentation [Time & Attendance Log] from the DCW
 - Delivery documentation [**Time and Attendance Log**] should include:
 - Passion Home Health Care Services name
 - Member first and last name
 - Date of the visit
 - Actual Time In and Actual Time Out
 - Service duties performed
 - DCW first and last name
 - Location of the visit in the home or in the community
- With the above confirmations, the administrative staff shall manually enter visits into the EVV system.
- Visit maintenance will be completed by using the most appropriate Reason in HHAexchange.
- Visit Description(s) must be completed by using the most appropriate description in HHAexchange.
- Ensure the visit transaction is accepted at the EVV Portal

DCW Task Sheets Policy

Purpose:

To determine a process for documentation of time and activity in the event that telephony in HHAexchange unavailable.

Process:

It is the responsibility of all staff and DCW to report to their assigned work places on time. DCW is required to call-in and call-out using the HHAexchange telephony or app. Passion supervisor will train all DCW the process of callingin and out before and during assignment.

To call-in or clock-in and call-out or clock-out each DCW will be assigned an assignment ID which contain six (6) digits or numbers. All DCW will use the assignment ID to clock-in and Clock-out.

How to Call-in

When calling-in, you will dial 1(866)217-0416. The system will say, "Welcome to HHAexchange, press one for call-in, press 2 for call-out. [To call-in, you will press 1] The system will say, "Enter Assignment ID". You will enter your assigned Assignment ID of six (6) digits or numbers: [000000]

The system will say out the assignment ID you enter, "You have entered [000000] if correct press 1, press [0] zero to reenter. Note: [If the assignment ID you entered is not correct, you will press [0] zero and the system to prompt you to reenter your assignment. Also, if the assignment ID you entered is correct, you will press 1 and the system will say call registered, goodbye.

Note:

Every Client/Participant is assigned a plan of care which contains the services DCW provides. Each service is called Duty and is assigned a number called **Duty ID**. Example, Meal preparation Duty ID is "Meal prep =115", "Housework = 116" etc. When clocking-out the system will ask you to enter your Duty ID. Note: After entering all the participant's Duty IDs, when the say enter your Duty ID, you enter three zeros, "000". By entering the three zeros you are telling the system that you have entered all of your duty IDs.

How to Call-out

When calling-out, you will dial 1(866)217-0416. The system will say, "Welcome to HHAexchange, press "1" for call-in, press "2" for call-out. [To call-out, you will press "2"] The system will say, "Enter Assignment ID". You will enter your assigned Assignment ID of six (6) digits or numbers assigned to you: [000000]

The system will say out the assignment ID you enter, "You have entered [000000] if correct press "1", press "0" zero to reenter. Note: [If the assignment ID you entered is not correct, you will press [0] zero and the system to prompt you to reenter your assignment. Also, if the assignment ID you entered is correct, you will press "1" and the system will say, "Enter your "Duty ID:" You will enter the first duty, 115, and the system will say again, "Enter you next Duty ID" You will enter "116" and system will continue to say enter your next duty ID. After entering all of your Duty IDs, you will enter three zeros to end the call-out process. "000" When you enter the three zero "000", the system will say to you, "Call register, goodbye."

In the event that a DCW is unable to use the HHAexchange telephony to callin and call-out for accountability, the DCW/Caregiver will use the Weekly Time-sheet and Service Log to record and document service/s provided. The

Direct Care Worker will document time in/out as well as tasks performed in accordance with the Duties that are authorized by the Participant's Service. The DCW will then have the participant/consumer place his/her signature and date on the bottom left side of the weekly time-sheets and service log to verify that the hours and duties performed are accurate. The DCW will place his/her signature and date on the lower right corner of the weekly time and service log. DCW must submit that documentation prior to payroll processing in order to ensure timely billing and pay.

Some examples of why telephony would not be available would be, but not limited to: Consumer does not have phone available, Consumer refuses DCW access to their phone for telephony purposes, technical error with Telephony service, Phone out of order, Phone out of service, etc.

Prior to submitting weekly time-sheet service log documentation for billing and payroll purposes, Passion Supervisor will verify that all hours and dates are signed off on by consumer or consumer representative. If sheet is missing signature, supervisor will contact consumer to verify that hours and tasks were performed according to the documentation.

Employee SSN Verification Policy

In accordance with 55 PA Code Chapter 52.11 (a)(5)(x), Passion Home Health Care Services, LLC will verify all staff social security numbers with the Social Security Administration prior to employment. This step will be to verify current or former employees and only for wage reporting (Form W-2) purposes. Passion Home Health Care Services, LLC will utilize the Social Security Number Verification Service (SSNVS).

HIPAA Compliance Policy

Passion Home Health Care Services, LLC will comply to the HIPAA Privacy Rule, which protects the privacy of individually identifiable health information; the HIPAA Security Rule, which sets national standards for the security of electronic protected health information; the HIPAA Breach Notification Rule, which requires covered entities and business associates to provide notification following a breach of unsecured protected health information; and the confidentiality provisions of the Patient Safety Rule, which protect identifiable information being used to analyze patient safety events and improve patient safety. Passion Home Health Care Services, LLC will be in compliance with the

Healthcare Insurance Portability and Accountability Act of 1996 (Pub. L. 104-191).

Passion Home Health Care Services, LLC will stipulate in yearly trainings the importance that any information regarding the diagnosis or treatment of consumers is private and confidential. Employees from Passion Home Health Care Services, LLC may never discuss any consumer's treatment or diagnosis with other consumers, other employees, family members, or friends unless they are involved in the care of the consumer or there is a signed release form. Passion Home Health Care Services, LLC will hand a written privacy notice to the consumer before giving service to them. Acknowledgement from the consumer in writing will be proof that they have reviewed the policy. The consumer information should only be discussed with the Director, Case Manager or Care Coordinator.

Employee Training: Passion Home Health Care Services, LLC will train staff members to be in compliance with the HITECH ACT covered by HIPAA, including privacy and security laws to protect Protected Health Information (PHI) by taking increased precautionary measures.

Passion Home Health Care Services, LLC will appoint a Privacy Officer to conduct Risk Management Analysis so that Passion Home Health Care Services, LLC may comply with the any breach of PHI disclosure notification regulations.

The Privacy Officer will ensure training for all employees. Such training will include: Definition of PHI; Accountability for Confidentiality; Legal Ramifications for Confidentiality Breaches; What is considered a breach; Incident Response Program; How to prevent a breach.

An annual HIPAA quiz will be given to each staff to assess their knowledge with the HIPAA regulations.

Passion Home Health Care Services, LLC will have a secure location where the consumer's files are kept and locked in filing cabinets. The Administrative staff of Passion Home Health Care Services, LLC that would include the director, case manager, office assistant, and the billing manager will be aware of turning off computer systems containing patient information when they leave the computer. All documents that are not used will be shredded immediately.

Participant records will be kept confidential and, except in emergencies, may not be accessible to anyone without the written consent of the participant or if a court orders disclosure other than the following:

- a) The participant.
- b) The participant's legal guardian.
- c) The provider staff for the purpose of providing a service to the participant.
- d) An agent of the Department.
- e) An individual holding the participant's power of attorney for health care or healthcare proxy.

Any violations of a consumer's privacy should be reported immediately to the Director at Passion Home Health Care Services, LLC or the Case Manager for an investigation. If there is a breach, the consumer has rights and an explanation of them is strongly recommended. Passion Home Health Care Services, LLC will also report the incident to The Office for Civil Rights of the Department of Health and Human Services for it to decide whether improper use of disclosures was violated according to PHI guidelines. Passion Home Health Care Services, LLC will follow-up with The Office for Civil Rights to find out if any penalties were involved. Violation of consumer's privacy may be grounds for termination.

2021

HIPAA PRIVACY ACT



Passion Home
Health Care Services,
LLC

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HIPAA-PRIVACY COMPLIANCE

Definition:

The HIPAA Privacy ensures that personal medical information you share with physicians, hospitals and others who provide, and pay for, healthcare is protected. The Privacy Rule does the following:

- Imposes new restrictions on the use and disclosure of personal health information
- 2. Gives patients greater access to their medical records
- 3. Gives patients greater protections of their medical records

Protected Health Information (PHI)

When a patient gives personal health information to a covered entity that information becomes Protected Health Information or (PHI). It includes:

- 1. Any personal health information that contains information that connects the patients to the information.
- 2. Information that might connect personal health information to the individual patient including the individual's name or address, social security or other identification numbers, physician' personnel notes and billing information.

PHI may be used or disclosed:

- 1. For treatment, payment and healthcare operations
- 2. With authorization or agreement from the individual patient
- 3. For incidental uses such as physicians talking to patients in a semi-private room

PHI must be released for use and disclosure:

- When requested or authorized by the individual, although some exceptions may apply
- 2. When required by the Department of Health and Human Services (HHS) for compliance or information

Signed Authorization from the patient is required if his/her PHI is used for Purposes other than:

- 1. Treatment
- 2. Payment
- 3. Healthcare Operations.

This includes:

- 1. Use or disclosure of psychotherapy notes (except for treatment, payment or healthcare operations
- 2. For use and disclosure to third parties for marketing activities, such as selling lists of patients and enrollees
- 3. Covered entities can communicate freely with patients about treatment options and health-related information.

Authorization forms must contain:

- 1. A description of the PHI to be used/disclosed, in clear language
- 2. Who will use/disclose PHI and for what Purpose
- 3. Whether or not it will result in financial gain for the covered entity and the patient's right to revoke the authorization
- 4. A dated signature of the patient whose records are being used/disclosed
- 5. An expiration date

Authorization Is NOT required as long as there is patient agreement as follows:

- 1. To maintain afacility's patient directory
- 2. To inform family members or surrogates or notify them on patient location, condition or death
- 3. To inform appropriate agencies during disaster relief.

Other permitted uses/disclosures that do not require patient agreement include:

- 1. Public health activities related to disease prevention or control
- 2. Reporting victims of abuse, neglect, or domestic violence
- 3. Conducting health oversight activities such as audits, legal investigations licensure or for certain law enforcement Purposes or government functions
- 4. For coroners/medical examiners, funeral directors, tissue/organ donations or certain research purposes
- 5. To avert aserious threat to health and safety.

In general, use/disclosure of PHI is limited to the minimum amount of health information necessary to get the job done. This means:

- 1. Covered entities must develop policies to reduce health information sharing to a minimum
- 2. Employees must be identified who regularly access PHI
- 3. The type of PHI needed and the conditions presented for access must be monitored
- 4. The Minimum Necessary Rule does not apply to use/disclosure of medical records for treatment, since healthcare providers need the entire record to provide quality care.

Privacy Notice:

Patients have the right to give adequate notice concerning the use/disclosure of their PHI on the first date of service delivery, or as soon as possible after an emergency.

New notices must be issued when your facility's privacy practices change. The

Privacy Notice must:

- 1. Contain patient's rights and the covered entities' legal duties
- 2. Be made available to patients inprint
- 3. Be displayed at the site of service or posted on a web site if possible.

Once a patient has received notice of his or her rights, covered entities must make an effort to get written acknowledgment of receipt of notice from the patient, or document reasons why it was not obtained. Copies must be kept of all notices and acknowledgments.

Patient PrivacyRights:

The Privacy Rule grants patients new rights over their PHI, including the following:

- 1. Receive a Privacy Notice at the time of first delivery of service
- 2. Restrict use and disclosure, although the covered entity is not required to agree
- 3. Have PHI communicated to them by alternate means and at alternate locations to protect confidentiality
- 4. Inspect, correct and amend PHI and obtain copies, with some exceptions
- 5. Request a history of non-routine disclosures for six years prior to the request
- 6. Contact designated persons regarding any privacy concerns or breach of privacy within the facility or at HHS.

Privacy Rights of Minors:

In general, parents have the right to access and control the PHI of their minor children - except when state law overrides parental control. Examples include:

- 1. HIV testing of minors without parental permission
- 2. Cases of abuse
- 3. When parents have agreed to give up control over their minor child.

Agency Compliance with HIPAA: In order to comply with HIPAA regulations, Passion Home Health Care Services, LLC will:

- 1. Allow patients to see and copy their PHI.
- 2. Designate a full or part-time privacy official responsible for implementing the programs.
- 3. Designate a contact person or office responsible for receiving complaints.
- 4. Develop a Notice of Privacy Practices document.
- 5. Develop policies and safeguards to protect PHI and limit incidental use or disclosure.
- 6. Institute employee-training programs so everyone knows about the privacy policies and procedures for safeguarding PHI.
- 7. Institute a complaints process and file and resolve formal complaints.
- 8. Make sure contracts with business associates comply with the Privacy Rule.

Purpose:

To ensure that Passion Home Health Care Services, LLC's in compliance with the Medical Privacy Act.

Policy:

State regulatory requirements are identified and applied within the context of this administrative policy.

General Information:

- The Department of Health & Human Services has issued the HIPAA final rule entitled Modifications to the HIPAA Privacy, Security, Enforcement and Breach Notification Rules under the Health Information "Technology for Economic and Clinical Health Act and the Genetic Information Non-discrimination Act." The HIPAA Privacy Security and Enforcement rules:
 - a. Make business associates of covered entities directly liable for compliance with HIPAA Privacy and Security Rules' requirements and expands the definition of business associates.
 - b. Strengthens the limitations on use and disclosure of protected health information for marketing and fundraising purposes and prohibits the sale of protected health information without individual authorization.
 - c. Expand individuals' rights to receive electronic copies of their health information.
 - d. Restricts disclosures to a health plan concerning treatment for which the individual has paid out-of-pocket in full.
 - e. Require modifications to, and redistribution of, a covered entity's notice of privacy practices.
 - f. Modify the individual authorization and other requirements to facilitate research and disclosure of child immunization proof to schools, and to enable access to decedent information by family members or others.
 - g. Adopt the additional HITECH Act enhancements such as the provisions addressing enforcement of noncompliance with the HIPAA Rules due to willful neglect.
- 2. The HIPAA Enforcement Rule (October 30, 2009 interim final rule) incorporates the increased and tiered civil money penalty structure provided by the HITECH Act.
- 3. The Breach Notification for Unsecured Protected Health Information (August 24, 2009 interim final rule), replaces the breach notification rule's "harm" threshold.

4. The HIPAA Privacy Rule (October 7, 2009 proposed rule).

Employee training is mandated on state and federal laws regarding PHI that is tailored to each employee's scope of employment. It also puts in place new requirements for notices to patients regarding electronic disclosure of PHI.

Covered entities that wrongfully disclose a patient's PHI face increased civil penalties ranging from \$5,000 to \$1.5 million per year.

To determine the penalty amount, a court may consider six factors:

- 1. The seriousness of the violation
- 2. The entity's compliance history
- 3. The risks of harm to the patient
- 4. Whether the practice was certified that it has been in past compliance with its standards
- 5. The amount necessary to deter future violations
- 6. Efforts made to correct the violation. Additionally, states include their own distinct provisions and penalties regarding breaches of computerized data containing "sensitive" personal information. Failure to notify individuals under state law may result in penalties including an additional \$100 state penalty per individual for each day the notice is not sent, not to exceed \$250,000. State penalties are levied in addition to any penalties for violating federal laws.

Procedures:

- 1. All employees, within 60 days of hire and every 2 years, will be trained regarding current state and federal laws concerning PHI for privacy/security compliance that includes the latest state and federal regulations.
- 2. In addition to HIPAA guidelines outlined in policy 1.48 training will include the maintenance and protection of electronic PHI.
- Employees will sign, electronically or in writing, a statement verifying his or her attendance at the training program. The signed statement will be maintained in the personnel record.
- 4. Patients will be provided with electronic copies (unless the patient is willing to accept this in another form) of their health information within fifteen days of the patient's written request for therecords.
- 5. Patients will be provided with notice that their PHI is subject to electronic disclosure during the admission process.
- 6. Passion Home Health Care Services, LLC will not disclose a patient's PHI to any other person in exchange for any direct or indirect payment.
- 7. The patient's PHI information may be disclosed to other covered entities for treatment, payment, health care operations, insurance or HMO functions, or as authorized or required by federal or state law.

Patients must be informed of a breach of their PHI. Failure to do so will result in financial penalty and potential felony charges.

Employee Training:

The healthcare industry is in the midst of a sweeping change. Internet information sharing has made Private Health Information (PHI) vulnerable to many indiscretions. From disgruntled employees stealing patient info and maliciously posting it on the internet, to hackers stealing insurance ID information and misusing social security numbers, the breaches are serious and astounding.

The federal government has recognized an immediate need for the way health records are managed. The <u>Health Information Technology for Economic and Clinical Health Act</u> (HITECH or "The Act"), of 2009 (ARRA), allowed a number of incentives to <u>encourage</u> the adoption of health information technology use. Electronic health records (EHR) systems among health care providers <u>has increased</u> but, this <u>diminishes privacy</u> and security regulations under (HIPAA). Now this electronic health information sharing will be subject to much <u>stricter</u> guidelines.

HITECH ACT expands the activities covered by HIPAA, including privacy and security laws to protect Patient Health Information (PHI) by taking increased precautionary measures.

A privacy breach is defined as an unauthorized disclosure of PHI which may result in financial, reputational or other harm to the individual including what incidents constitutes a privacy breach. It requires business associates and employees to comply with the Security Rule's administrative, physical, and technical safeguard requirements.

The Act also requires accounting of disclosures to patients upon their request. Penalties for HIPAA violations range from \$100 to \$50,000 per incident for businesses in non-compliance. The maximum civil penalties (placed upon employee breaches) on an annual basis for multiple violations, range from \$25,000 to \$1.5 million.

As a result of this legislation, Agencies must have a Privacy Officer appointed to conduct Risk Management Analysis so that it may comply with the new "breach of PHI disclosure notification regulations" starting February 17, 2010.

Understanding Patient Health Information Risk/Definitions

The duties of the Privacy Officer must first be to understand definitions and concepts associated with private Patient Health Information (PHI), Risk Management, Confidentiality, Breaches in Information Confidentiality, Agencies of the Employees to Ensure Privacy, Protocol for Notification if a breach occurs and keeping abreast of New Challenges with PHI. These are important definitions under the new guidelines:

A **breach** is an unauthorized disclosure of PHI which may result in financial, reputational or other harm to the individual. The Privacy Officer would need to make decisions if breaches were to occur as to whether the disclosure would result in significant enough harm to the individual to warrant notification to that individual or to other authorities.

Safeguards required to be in place to protect administrative, technical and physical aspects of Passion Home Health Care Services, LLC. As follows:

- 1. Administrative Protection how PHI is to be handled and maintained in terms of bookkeeping and accounting. Protocols must be in place for ensuring privacy and taking seriously the ramifications of negligence, misuse or inappropriate use of PHI.
- 2. Technical Protection encryption /web-keys, firewalls and password protection when using communication devices and the internet. There should be a way of authenticating communication with other entities. Encryption is recommended for sharing x-rays and charts. A system of double-keying passwords should be evident and there should be a way of authenticating digital signatures. Speaking to an I.T. Professional for these key security pathways is recommended. There must also be a secure path for data backup which should include protection against occurrences like natural disasters and data should be accessible from an outside source. If a wireless router is must be used it should be isolated from the primary network. Again an I.T. Professional can advise you best on safeguards.
- 3. Physical Protection involves the handling of patient charts, forms, x-rays and all applicable PHI. Private workstations should keep PHI secure and inaccessible to non-employees. There must be lockdown procedures in place for logging in and out of Agency management software when away from your station or at the end of the day.

Required Written Procedures:

Each Agency must have a written set of HITECH Privacy Procedures in place that address the following areas:

Breach Occurrences

This section must list possible breaches, how they will be handled and the risk of the breach occurring. This plan will also state who has access to PHI, what kind of PHI can be accessible by an employee and for what purpose.

Balancing Test

The Privacy Officer will need to develop and test that their Agency PHI procedures are secure and do not exposes PHI to outside sources too easily. Left untested an Agency would be vulnerable to major business risks, whether from fraud, theft or simple errors that can compromise ePHI and PHI. Protected health information, whether electronic or paper, can be vulnerable to a breach in any of the following conditions: data in motion (data moving through a network); data at rest (data that resides in databases, file systems, and other structured storage methods); data in use (data in the process of being created, retrieved, updated, or deleted); or data disposed (discarded paper records or recycled electronic media). Information security risk assessments can help identify controls in place or a lack of them to secure Protected Health Information (PHI) based on its data state. An information security risk assessment will identify any gaps or inadequacies in policies and procedures, and will provide recommendations to protect sensitive patient and business information. Here's a step-by-step guide on how to perform a security assessment and what it should include:

- 1. Identify what is at risk
- 2. Assess the risk
- 3. Analyze risk control measures
- 4. Make control decisions
- 5. Implement risk controls
- 6. Supervise and review
- 7. Update Policies and Procedures

The Privacy Officer will provide training to all employees. Such training will include:

- 1. Definitions of PHI
- 2. Accountability for Confidentiality
- 3. Legal Ramifications for Confidentiality Breaches
- 4. What is considered a breach
- 5. Incident Response Program
- 6. How to prevent a breach

As the health care industry keeps evolving it is imperative to realize the importance of maintaining electronic records. It is a serious issue that can have severe implications should one press of a button be improper. Employers as well as individual employees can be held responsible and ignorance of the law is not a defense. Protect your Agency by filling-in the following written plan. Make sure all of your employees are aware of these procedures, their importance and implications for following the law.

HIPAA Compliance Officer & Advisory Committee Form

Passion	Home Health Care Servi	ices, LLC of:				
Address	s:18 Berbro Avenue	2				
City:	<u>Upper Darby State</u> :		PA	Zip: 19082		-
Phone:	_(215)360-3682		F.	ax:	(215)66	66-0364
	Agency	Email:		Mason@passi	<u>onhomehealtho</u>	<u>care.com</u>
OurHIPA	A Compliance Officer is:_	Mas	son	Υ.	Weh	Sr

OUR HIPAA COMPLIANCE COMMITTEE/ADVISORS:

The purpose of this committee is to assist the HIPAA Compliance Officer with decisions, implementation and compliance with the program. Examples of members can be employees, attorneys and professional consultants.

Committee Member Name: Ma	ason Y. Weh Sr		
Company Name: Passion Hor	ne Health Care Ser	vices, LLC	
Company Address: 18 Berbro Avenue			
City: Upper Darby	State: PA	zip:_19 <u>082</u>	
Phone:(215)360-3682		Fax: <u>(215)666-0364</u>	
Email: Mason@passionhome	ehealthcare.com		

RISK MANAGEMENT ANALYSIS IN ACCORDANCE WITH HIPAA LAW

Privacy Officer: _Mason Y. Weh Sr_

Facility Name: Passion Home Health Care Services, LLC

Listed below is our official definitions and procedure for Risk Management Analysis at Passion Home Health Care Services, LLC. These guidelines were developed in accordance and comply with HIPAA's Health Information Technology for Economic and Clinical Health Act (HITECH). All employees have been trained and agree to uphold the following courses of actions.

Definitions of PHI:

Employee Confidentiality

An understanding that encounter with Patients' Healthcare Information (PHI) can pose serious harm if handled improperly. Every employee can be subject to civil prosecution should their behavior with PHI be reckless or casual. All PHI must be handled with strict confidentiality, digression and care according to the guidelines set forth by Passion Home Health Care Services, LLC 's Privacy Officer.

A breach

A breach is an unauthorized disclosure of PHI which may result in financial, reputational or other harm to the individual. The Privacy Officer would need to make decisions if breaches were to occur as to whether the disclosure would result in significant enough harm to the individual to warrant notification to that individual.

Safeguards

These are required to be in place to protect administrative, technical and physical aspects of Passion Home Health Care Services, LLC.

Administrative Protection

Encompasses how PHI is to be handled and maintained in terms of bookkeeping and accounting. Protocols must be in place for ensuring privacy and taking seriously the ramifications of negligence, misuse or inappropriate use of PHI.

Technical Protection

Includes encryption /wep-key security codes, firewalls and password protection when using communication devises and the internet. There should be a way of authenticating communication with other entities. Encryption is recommended for sharing x-rays and charts. A system of double-keying passwords should be evident and there should be a way of authenticating digital signatures. Speaking to an I.T. Professional for these key security pathways is recommended. There must also be a secure path for data backup which should include protection against occurrences like natural disasters and data should be accessible from an outside source. If a wireless router is must be used it should be isolated from the primary network. Again an I.T. Professional can advise you best on safeguards.

Physical Protection

Involves the handling of patient charts, forms, x-rays and all applicable PHI. Private workstations should keep PHI secure and inaccessible to non-employees. There must be lockdown procedures in place for logging in and out of Agency management software when away from your station or at the end of the day.

Business Associate Agreement

A HIPAA contract between a given Agency and out-side contracted that creates, accesses, uses, discloses and/or stores PHI in order to perform a function, service, or activity by or on behalf of your Agency. Examples of Business Associate relationships include, but are not limited to, claims processing or administrative services; accreditation; data analysis; billing; legal services; consulting; software maintenance or support that includes access to PHI; and record storage or disposal services.

Temporary workers or contractors working on premises under the direct supervision of your Doctors may be considered part of the workforce and are not a business associate. Persons or entities whose services or activities do not involve creation, use, or disclosure of PHI do not require a BAA even if they are exposed to or have access to PHI. (Labs in most cases are exempt.)

Accountability for Confidentiality:

As an employee of this company, I have a full understanding that encounter with Patients' Healthcare Information (PHI) can pose serious harm if handled improperly. I, as an employee, understand and agree to comply with policies set forth by management to ensure proper handling and security of Patient Health Information (PHI). I also understand that the mishandling of such information can lead to civil prosecution should I behave recklessly with such information. In signing this training affidavit, I pledge my understanding and accountability to protect the confidential nature of all PHI.

Legal Ramifications for Confidentiality Breaches:

I understand that civil monetary penalties for HIPAA confidentiality violations are enforceable and that the State Attorney General enforces these rules through prosecution. Penalties for HIPAA violations range from \$100 to \$50,000 per incident fined to a business. The maximum civil penalties (fined to individuals), on an annual basis for multiple violations, range from \$25,000 to \$1.5 million.

Our Breach Profile/ What is Considered a Breach:

In general, Passion Home Health Care Services, LLC deems the term 'breach' to mean the unauthorized acquisition, access, use, or disclosure of protected health information which compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information. This applies to information being transmitted to non-interested parties. An interested party might include a lab, specialist, other healthcare professional, approved legal entity or healthcare Agency. Having patients sign documentation or a release form further ensure transmissions are permissible.

Citing the general name of where transmissions go, can suffice for repeat transmission of such information. For instance, if a patient signs off that an Agency can file their claims to their insurance, that would grant permission. Transmission of PHI should not go to outside sources, onto internet sites or other entities that do not have proper clearance from your Privacy Officer. Electronic Claims submission should be with proper encryption and routing in place.

Exceptions to the term 'breach' does not include any unintentional acquisition, access, or use of protected health information by an employee or individual acting under the authority of a covered entity or business associate if the acquisition, access, or use was made in good faith and within the course and scope of the employment or other professional relationship of such employee or individual, respectively, with the covered entity or business associate, any inadvertent disclosure from an individual who is otherwise authorized to access protected health information at an Agency or any such information received as a result of such disclosure is not further acquired, accessed, used, or disclosed without authorization by any person.

Incident Response Program:

will not procrastinate with due diligence as it could relate to a possible breach. We will make every effort to ensure that PHI data is fully encrypted. We are aware that PHI data that isn't encrypted can increase the risk of unauthorized disclosure. This would apply to large amounts of information left open to exposure, not properly transmitted to a large insurance company for example. We will be sure our computer systems and wireless routers are working properly and are not at risk for compromise by continually using and maintaining our protective measures.

We are aware that The HITECH Act has a specific provision that discusses this issue. The breach notification provision states who must be notified if our records are compromised. In some cases, just the patients need to be notified; in others, it extends to various federal agencies and even the media. After the discovery of a breach, patients and the Department of Health and Human Services will be notified no later than 60 days after the incident.

We will be quick to respond to initial incidents and handle them before they escalate and coordinate response with I.T. Professionals.

Preventing Breaches:

Our employees will all have proper training and be required to sign off on this training before having access to transmittable PHI. We will monitor the changes in law technology and physical characteristics in relation to the HITECH laws. Yearly our Privacy Officer will investigate, update and initiate any changes to keep our Risk Management Assessment program strong and secure. Employees involved in compromising agencies with regard to PHI will be terminated and the incident reported to the proper authorities.

Breach Occurrences:

Possible breaches, how they will be handled and the risk of the breach occurring is listed below. This plan will also state who has access to PHI, what kind of PHI can be accessible by an employee and for what purpose. Please add more as they apply to your Agency.

POSSIBLE BREACH	HOWTO HANDLE	RISK of OCCURANCE	TEAM ACCESS (list)	PURPOSE
E-Claims	Have manager call Insurance Co. and authorities	Slim	INSURANCE CLAIMS COORDINATORS	Filing Insurance
PHI Internet listino	Terminate Employee	Rare	ALL TEAM	Malicious Intent
PHI paperwork in wrong hands	Situation Dependent	Rare	ALL TEAM	Varies
Pt. chart accessed	Re-claim immediately	Moderate	ALL TEAM	To view info
Workstation access	Enforce password use at all times	Moderate	ALL TEAM	To view info

OUR BALANCING TEST:

(This is found in the HIPAA In-service Section)

Identification of what is at risk: Circle appropriate answers below:

File Cabinets containing Charts will be protected by LOCKED OFFICE/

LOCKED CABINETS /NA

Discarded PHI Papers and forms will be protected by **SHREDDER**

Faxed copies of information will be protected by **SHREDDER**

Previously scanned documents will be protected by **SHREDDER**

Inactive Patient Charts will be protected by BACK STORAGE/COMPUTER

UP

Obsolete Patient Schedules will be protected by Obsolete SHREDDER SHREDDER

Patient Routing Slips will be protected by

Circle appropriate answers below:

Employee Workstations will be protected by **PASSWORD**

Electronic Claim Submission will be protected by NOT ROUTER & FIREWALL/

APPLICABLE

Our Internal Database will be protected by Our DAILY BACK UP

Internet Server will be protected by **ROUTER & FIREWALL**

Daily Data Back-up will be protected by MANAGER / **AUTOMATIC / OFFICE**

RECEPTION TEAM

Doctor's Smart Phone Patient Info will be protected by **DOCTOR**

Our Telephone Answering System will be protected by INTERNAL PHONE

SYSTEM / MACHINE

Our eTronic confirmation service will be protected by NOT

APPLICABLE

SERVICE PROVIDER/

Emailing Patient Information will be protected by **ENCRYPTION**

Digital x-ray transmission will be protected by ENCRYPTION
We have conducted an inventory of all the confidential electronic health records on file and are aware of what we have. We will do this annually.
Date:

ENCRYPTION

Receiving Emailed Patient Information will be protected by

Date: ___

ASSESSING AGENCY RISK:

The following table illustrates what sort of risk tolerance our organization may be susceptible to, who may be involved and will allow us to plan our security strategy and protocols:

PHI SYSTEM	RISK FACTOR	All Team Access	Limited Access	Who has Access
		√ (check)	./ (check)	(list)
Copier	Team copying PHI for outside use	,/		
E Claims	Encryption used	,/	,/	Insurance
	Encryption not used Passwords used			Coordinator
	Passwords not used			
	Firewall used			
	Firewall not used			
Internet	Wireless Router Used	,/		
	Wireless Router not used			
	Encryption used			
	Encryption not used Passwords used			
	Passwords not used			
	Firewall used			
	Firewall not used			
Work Station	Wireless Router Used	,/		
	Wireless Router not used			
	Encryption used			
	Encryption not used Passwords used			
	Passwords not used			
	Firewall used			
	Firewall not used			

Email	Wireless Router Used	./	
	Wireless Router not used		
	Encryption used		
	Encryption not used Passwords used		
	Passwords not used		
	Firewall used		
	Firewall not used		
Voicemail	Passwords used	./	
	Passwords not used		
Smart Phone	Passwords used	./	
Devises	Passwords not used		
	Encryption used		
	Encryption not used		
Website Access	Wireless Router Used	./	
	Wireless Router not used		
	Encryption used		
	Encryption not used Passwords used		
	Passwords not used		
	Firewall used		
	Firewall not used		

ANALYSIS OF RISK CONTROLMEASURES

Making Controlled Decisions for Agency

After identifying and assessing the risks from above, we are now able to create specific solutions or risk controls that will eliminate or reduce PHI risk to acceptable levels within . Discussion between Owner, Privacy Officer and/or an I.T. Security Specialist will influence our final structured protocol. We will also take into consideration our employees that have access to confidential data and ensure they are trustworthy individuals. Finally, with this information, we will be authorizing levels of security clearance, for access to our more sensitive information and making sure all employees create new, **private** passwords for their access. We will enforce that they are responsible for their work stations and protecting PHI.

Identify and evaluate current controls that will prevent unauthorized disclosure, misuse, alteration, or destruction of information or information systems. Also, look into methods of further increasing your security. Compare the various technologies that may be worth investing in for added control measures.

Controls are inadequate or don't exist, for:	
NONE AT THIS TIME	
Action plan to improve and implement controls: (i.e.: wireless router for internet, firewal computers)	l for al
NONE AT THIS TIME	

We will set security levels on our computer software in the following manner:

Circle appropriate answers below:

Implementation of Risk Controls:

High Level Access: DOCTOR/MANAGEMENT

Moderate Level: MANAGEMENT

Standard Level: ALL TEAM

Supervise and Review:

At least once a year, we review the risk assessment to validate that controls are addressing
risks effectively and consider any changes to the business environment.

Date:
Evaluation and research reveals we should implement
Date:
Evaluation and research reveals we should implement

HI-TECH LAW POLICY RISK MANAGEMENT ANALYSIS

Employee Training Acknowledgement

By signing this document, I declare that I have been fully trained understand the materials and steps necessary to carry out and enforce the Risk Management Analysis Policies (HI TECH) and Agencies for Passion Home Health Care Services, LLC. I will fully abide by these Agencies in accordance with our Administrator and Federal law.

Date	Print Name	Signature

FRAUD PREVENTION POLICY

Administrator's Approval
For the office of:
Passion Home Health Care Services, LLC:
Doctor Name(s):
Address:
Phone:
Management Administrator:
As management Administrator for Passion Home Health Care Services, LLC, I do hereby acknowledge that all current employees have been thoroughly trained, have the proper knowledge to carry out the said Fraud Prevention Policies as stated above. This has been designed and will be carried out in accordance with HIPAA's Fraud-Prevention requirements and Red Flag Laws.
Date:
Print Name:
Signature:

Employee Training Acknowledgement

In signing this document, I declare that I have been fully trained, understand the materials and steps necessary to carry out and enforce the Fraud-Prevention Policies and Agencies for Passion Home Health Care Services, LLC. I will fully abide by these Agencies in accordance with our Administrator and Federal law.

Date	Print Name	Signature

EMPLOYEE HIPAA BREACH / REPRIMAND NOTICE

Employee Name:	Date of Notice:		
Position Held:	Date of Hire:		
Type of Violation (circle all that apply):			
 Damage to Agency Property/ PHI Improper Behavior with PHI Unauthorized Performance/ PHI Insubordination OSHA Violation endangering PHI HIPMViolation Other 			
DESCRIPTION OF INCIDENT			
Date:	Time: am pm		
Description:			
EMPLOYEE STATEMENT			
*I agree with the described violation	*I disagree with the described violation		
Explain:			
ACTIONS TO BE TAKEN (circle):			
* Warning * Probation * Explain	* Suspension * Discharge		

Consequences should occurrence happen again			
I HAVE READ AND UNDERSTAND THIS	EMPLOYEE WARNING NOTICE		
Signature of Employee	Date		
Signature of HIPAA Officer	 Date		

EMPLOYEE CONFIDENTIALITY AGREEMENT OF PATIENT HEALTH INFORMATION AND PERSONAL INFORMATION IN <u>ACCORDANCE WITH HIPAA REGULATIONS</u>

For good consideration and as an inducement for	
	(employer) to
hereby agrees not to directly or indirectly use, man information (PHI), to include personal health info (address, phone, email address, etc.) with the busic LLC and its successors and assigns during the perpersonal contact information will result in terminate federal agencies. Fines related to civil and criminal above information are the direct responsibility of second contact information are the direct responsibility of s	nipulate or copy compete any patient health ormation or personal contact information iness of Passion Home Health Care Services, riod of employment. Misuse of PHI or ation and report with action to HIPAA al offences for gross misconduct with the
The Employee acknowledges that Passion Home reliance of this agreement provide Employee accommodate and good will. Employee agrees not to use said information on his or her own behavior own personal or monetary gain.	ess to trade secrets, customers and other s to retain said information as confidential and
The Employee agrees to not copy and to return all immediately upon termination of employment. Furthermore customers or employees of employer for any purp termination.	orther employee agrees not to solicit any of the
This agreement shall be binding upon and inure to successors, assigns, and personal representatives.	•
Signed this day of	20
Agency Employee	

AUTHORIZATION FOR USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION You may decline to sign this Authorization

I,,hereby authorize	
and	
,(hereafter collectively referred to as "Agency") to u	se
and disclose in any form or format a copy of records concerning	
but only as follows. A copy of this signed, dated	
Authorization shall be as effective as the original. Agency may use and disclose the following information:	
To:	
For the purpose(s) of (be specific):	
I specifically authorize Agency to use and disclose the following types of confidential information (initialwhere appropriate):	
HIV records (including HIV test results) and sexually transmissible diseases	
Alcohol and substance abuse diagnosis and treatment records	
Psychotherapy records	
Other: Specify:	
The undersigned does hereby release, hold harmless and agree to indemnify Agency, its employ and agents for any and all liability (including but not limited to negligence) arising out of or occurrence under this authorization. I understand that my records may be subject to re-disclosure by recipie and unprotected by federal or state law; that this authorization remains effective until Agency is actual receipt of a signed revocation or until the records retention period required under federal state law has expired and the records have been destroyed; that I have the right to revoke this authorization at any time, provided I do so in writing; that I have been given an opportunity to a questions; that I have received a copy of the signed authorization; that I may inspect a copy of protected health information to be used or disclosed under this authorization; that Passion Hom Health Care Services, LLC has not conditioned provision of services to or treatment of me upor receipt of this signed authorization; and that I may refuse to sign this authorization.	arring ent(s) s in and ask my e
By Patient: Date:	
(Print name and sign) Or:	
By Patient's Representative Date:	
(Print name, sign, and describe authority below)	

HIPAA INSERVICE TEACHING PLAN

Purpose/Goals:

This learning module is designed to provide practicing nurses with the nuts and bolts about the requirements of the Health Insurance Portability and Accountability Act (HIPAA) particularly as it relates to patient privacy. HIPAA also contains legislation aimed at reducing health care related administrative costs, eliminating pre-existing clauses and waiting periods for individuals changing insurance coverage, and increasing access to insurance for individual purchasers. Strict guidelines for maintaining privacy, confidentiality, and security of health information are also part of HIPAA legislation. The implications HIPAA has for researchers are also discussed.

Objectives:

Upon completion of this module, the learner will be able to complete the following objectives:

- 1. Explain the components of the HIPAA legislation.
- 2. Discuss how HIPAA expands availability of health care coverage.
- 3. Describe who is affected by the privacy and confidentiality requirements.
- 4. Explain what is meant by protected health information (PHI) and individually identifiable health information (IIHI).
- 5. Describe processes that must be used to assure patient information is kept confidential and secure
- 6. Describe how HIPAA influences informed consent and the use of patient data for research.

Introduction:

The Health Insurance Portability and Accountability Act of 1996 (HIPAA), also known as "Kennedy-Kassebaum", passed congress rapidly and with great bipartisan support in 1996. Many aspects of the legislation have been implemented in the ensuing years; the deadline for full implementation of the privacy and confidentiality requirements was April 14, 2003. Health care providers and organizations have strict guidelines that must be followed to remain within the law. While this module and most of our attention now is focused on the provisions of the legislation that deal with privacy, confidentiality, and security of patient records, HIPAA also contains other requirements that have an impact on employers, insurance companies, and purchasers of health insurance coverage.

HIPAA was designed to address public concerns about managed care, insurance availability, and insurance affordability. For example, HIPAA prohibits insurance companies from denying coverage because of:

- 1. preexisting conditions,
- 2. a family member's health status, or
- 3. whether or not an individual has been covered under a group policy and is seeking a personal health insurance policy.

Further, HIPAA ensures immediate coverage without regard to pre-existing conditions for individuals who change jobs and insurance carriers. HIPAA also established a pilot program for medical savings accounts (MSAs) that allows individuals to create a "health insurance individual account" to purchase health services and retain unspent funds rather than paying monthly premiums. Further, to encourage the purchase of long-term care insurance, HIPAA allows employers to deduct premiums and most benefits are tax-free to the beneficiary. Additionally, to facilitate purchase of health insurance by self- employed persons, the law allows 80% of the annual premiums to be tax- deductible by 2006. While many health policy analysts agree that these provisions have little impact on reducing the number of uninsured, they do, however, think these efforts are worthwhile. At this time, however, attention to HIPAA is riveted on implementing and paying for the privacy, confidentiality, and security aspects of the legislation (DiBenedetto, 2003).

In 1996, HIPAA was viewed as a way to reduce administrative costs, provide better access to health information, reduce fraud, and guaranty privacy of health information. However, the American Hospital Association estimates that it may cost between \$4 billion and \$22 billion to implement the tenets of the law. A search of the literature failed to produce specifics regarding cost; however, according to Gue and Upham (2004), the majority of costs are associated with developing and implementing software that integrates providers, payers, and governmental agencies.

As part of the HIPAA rule promulgation, the Centers for Medicare and Medicaid Services CMS mandated standardization of transaction and code sets (TSC) to reduce duplication, confusion, and non-compliance. CMS standards rely on use of ICD-9 codes for disease classification, CPT codes for procedures, and national drug codes (NOC) for medications. CMS admits that problems with these coding sets exist; new ICD-10-CM and ICD-10-PCS are thought to reduce the ambiguity and facilitate full implementation of electronic processing. The industry is working toward integrating HIPAA fully, it is just taking longer than they hoped to get the electronic interfaces coordinated (Gue and Upham 2004).

HIPAA is just the beginning of the ultimate conversion of healthcare information into an electronic health record (EHR). The Bush administration projects it will cost \$100 million a year for 10 years primarily to fund demonstration projects and trial programs aimed at achieving four major goals:

- 1. establish routine use of EHRs in clinical practice,
- 2. connect health care workers in information exchange for clinical decision making,
- 3. enhance patients' ability to choose providers based on quality, and
- 4. integrate public health surveillance systems into an interoperable network to support new research and better care (Scott 2004, p. 34).

The Basics

HIPAA contains provisions for both privacy and security. Privacy rules have been promulgated and compliance was required by most health plans by April

14, 2003; plans with less than \$5 million in annual receipts had until April 14,

2004 to fully comply. These rules have gone through several iterations, some as recently as March 2003 and refinements continue. Security rules that detail further requirements for the health care industry and patients were issued in October 2004.

A key factor for all health care providers and organizations to keep in mind is that, while HIPAA rules are strict, if state law covering the same topic is more stringent, the state law must be followed (Herrin, 2003). Health providers are well advised not to overlook state law as they accommodate HIPAA. Providers and organizations must remain up-to-date with both HIPAA and state law changes.

The intent of HIPAA is to protect patients from unauthorized or inappropriate use and access to their health information. Further, the rules protect patients by giving them access to their health information, so they know what has been documented about their health status. Proposed by-products of HIPAA are to improve quality of care, restore trust in the health care system, and improve the efficiency and effectiveness of information dissemination by building on existing legal frameworks. HIPAA also contains an administrative simplification section designed to improve the efficiency of health information coding to facilitate digital transfer of information between and among health care providers, payers, and health plans.

HIPAA creates safeguards so that only those people or entities having a real need to know health information will be able to access it (Calloway and Venegas 2002). The HIPAA rules complement other standards that protect patients' rights. Compliance with privacy rules promises to be a cornerstone of future JCAHO and Medicare/Medicaid surveys. Remember, compliance is mandatory, not voluntary.

WHY HIPAA IS NEEDED

Health care professionals have long realized the need to protect patients from unauthorized use of their health information; at the same time, they want to have access to needed information when treating a patient. Widespread use of electronic data is facilitating the rapid transfer of information and the Institute of Medicine has urged the creation of standards so electronic records can be available (Follansbee, 2002).

Similarly, the public is greatly concerned about the privacy of their medical records. Prior to the electronic medical record, patient information was maintained in paper form and neatly locked away, accessible only to those who had authorized access. With computerized records information can be accessed, changed, distributed, and copied with far less regard for appropriate authorization (Follansbee, 2002).

Serious breaches of record confidentiality have occurred. An employee of the Hillsborough county health department was able to carry home a disk with the names of 4000 HIV positive patients. People have purchased used computers that contained prescription records of patients; Eli Lilly recently sent out an email with the names of patients taking Prozac; the University of Montana inadvertently placed the medical records of some 62 people on the internet.

Consequently, patients, health care providers, and other health care entities are very concerned about confidentiality, restoring the public trust, and protecting themselves from lawsuits.

Yet, the ability of multiple providers to access a patient's record can significantly improve the overall quality of care. Think about the chronically ill individual who receives care from more than one or two specialist providers. If each provider has access to the most recent treatment plan, it stands to reason that care will be more coordinated, efficient, and effective.

UNDERSTANDING HIPAA -WHAT IS INCLUDED IN THE LAW

HIPAA describes those affected by the law as "covered entities". Included under this umbrella are health care providers, health plans, health care clearinghouses, and business associates.

Health care providers are defined as anyone who is paid for health care services or bills for services provided. The list is all inclusive: physicians, licensed health care providers, hospitals, outpatient physical therapists, social workers, certified nurse midwives, technicians administering X-rays done at home, home health agencies, pharmacists, providers of home dialysis supplies and equipment, nursing homes, nurses, and nurse administrators. This list means that any hospital or health facility worker who may see confidential patient information is included.

A health plan is any individual or group that pays for health care services. Included are health maintenance organizations (HMOs), insurance companies, Medicare/Medicaid, self-insured plans, employee group plans, federal plans such as CHAMPUS, military, veteran's administration, and Indian health services.

Clearinghouses are those entities that receive health information from providers and health plans. They typically are responsible for standardizing the information to improve claims processing. Included in this group are third-party administrators, billing services, and re-pricing agencies

The **business associates** category covers a broad range of professionals and services. Included are attorneys, consultants, auditors, accountants, billing firms, data processing companies, and practice management firms. Nurses working as independent contractors, i.e., case managers, legal nurse consultants, and educators are included and subject to compliance with HIPAA law. A contract between the business associate and hiring agent must be in place before the associate can see any patient information.

WHAT HEALTH INFORMATION ISPROTECTED?

HIPAA created two new phrases to describe information protected by the legislation. The medical record is now referred to as protected health information (PHI). This includes all information that is created by any covered entity. All forms of the information are part of protected health information, i.e., paper, electronic, video tapes, photos, audiotapes, and any information that has been duplicated, discussed, read from a computer screen, or shared over the internet.

The other new HIPAA phrase is individually identifiable health information (IIHI). Included in this category is any information that could reasonably be linked to a specific patient, such as a photo, name, address, date of birth, next of kin or responsible relative, medical record identifier, social security number, driver's license number, health beneficiary, account number, employer, finger, or voice prints.

The law specifies that some information that is not individually identifiable can remain. Age that is reported as 60+ if the patient is older than 60, zip code if the patient lives within a zip code with greater than 20,000 people in it, race, gender, ethnicity, marital status, and the year only of the health care occurrence are not considered individually identifiable information and these data may be used in the aggregate.

All facilities must limit access to information only to those who have a need to know. A nurse who seeks information about a patient not under her care is violating the HIPAA rules. Similarly, health information can only be used for health purposes. Employers cannot use the information to screen candidates for hire or promotion. Financial institutions may not use it to determine lending practice. Only the patient can explicitly authorize employers, banks, and individuals to have access to his/her medical information.

HIPAA also established the "minimum necessary rule" which stipulates that only the minimum necessary information may be shared, even with the patient authorization. A classic example would involve treatment for a case of child or domestic abuse; the provider would, rather than providing an entire medical record, furnish the pertinent data furnished in the form of an abstract outlining the information that is necessary to provide treatment and protect the victim(s). The abstracted information could be provided to legal and law enforcement entities.

Health providers involved in the treatment of patients are not subject to the minimum necessary rule and can have full access to all information that is needed to provide patient care. Health information that has implications for the public health and safety can be shared without consent. There are several situations where medical information can be shared: In Emergency 911 situations, when communicable diseases are involved, when law enforcement agencies participate, or if national defense or security is a factor.

The public health department is deemed a legitimate recipient of certain personal health information and providers may, in fact in some instances, must report some findings to the proper public health agency. Included are:

- 1. cause of death even when the patient dies at home
- 2. reportable communicable diseases
- 3. child abuse
- 4. reporting an adverse drug reaction to the Federal Drug Administration
- 5. occurrence of cancer in a state with a cancer registry
- 6. meningitis, and
- 7. immunizations for children.

These examples are thought to be important to the health of the public (Campos-Outcalt 2004).

PATIENT CONSENT ANDAUTHORIZATION

HIPAA makes a distinction between informed consent and patient authorization. Patients are entitled to know exactly how an entity plans to use the information.

Informed consent is signed at the first encounter the patient has with the provider/health care facility; the consent covers treatment, payment, and other health care information. The meaning and use of the patient's consent must be carefully explained to the patient. Facilities must explicate their disclosure process in a document called Information Practices. The American Hospital Association published a sample consent and explanation document that was 10 pages long. The document explains patient rights, as well as a description of how patient information is collected and used. Facilities must decide how and when the information concerning consent is presented to patients and how patients can use their right to revoke consent. Patients must also be advised about Passion Home Health Care Services, LLC 's policy that covers conditions for admission that are related to consent.

Patients may also sign authorizations. These are required when information is used by Passion Home Health Care Services, LLC for purposes outside of treatment. Agencies must assess their policies and procedures to assure that they are always using an authorization when it is needed; some agencies may not realize that information sharing policies violate the patient's right to restrict release of data (Cichon, 2002). Patients must be fully informed about the way agencies use a signed authorization and are entitled to receive a free accounting every twelve months describing how their health information has been used.

HIPAA privacy regulations also mandate specific patient rights that include the following:

- 1. Right to privacy notice requires disclosure and reasonable effort to assure that the patient understands Passion Home Health Care Services, LLC 's policy concerning privacy of information.
- 2. Right to request restrictions means that patients may specify health information that cannot be released and/or, they may restrict to whom information can be released.
- Right to access of PHI means that patients must be allowed to inspect and copy information contained in Passion Home Health Care Services, LLC 's record.
- 4. Right to know what disclosures have been made means Passion Home Health Care Services, LLC must track all information released and be able to provide documentation to the patient.
- 5. Right to amend the PHI means that while patients may request amendments to the PHI and Passion Home Health Care Services, LLC must allow amendments, Passion Home Health Care Services, LLC may deny some requests.

All covered entities are required to comply with certain procedural rules. Most have had to develop new policies and procedures to address the many aspects covered under these rules. The following are some of the rules:

- 1. Agencies must appoint a privacy officer who will monitor and audit compliance.
- 2. Agencies must develop an internal compliance process that will assure no patient rights are violated, complaints are addressed and investigated, and that a process for remediation is inplace.
- 3. Training must be provided to employees to assure that they are informed about patient rights and disclosure of information.
- 4. HIPAA requires that agencies document any and all violations and that sanctions parallel other disciplinary policies.
- 5. Agencies must have a process for mitigating any harmful effect of disclosure.
- 6. All forms of communication must be addressed in administrative safeguards.
- 7. Agencies must agree and have policies that specify no retaliation for an employee or consumer who files a complaint.

ME Limited English Proficiency (LEP) Policy

Passion Home Health Care Services, LLC will have procedures in place to assess, on a regular and consistent basis, the LEP status and language assistance needs of current and potential customers, as well as mechanisms to assess Passion Home Health Care Services, LLC' capacity to meet these needs in accordance with 55 PA Code Chapter 52.11 (a)(5)(xii).

Passion Home Health Care Services, LLC will first assess the population of LEP individuals that need to be served in the area. Passion Home Health Care Services, LLC will make LEP persons aware that they have a choice to use a family member or friend as an interpreter, if that choice is consistent with good care and ensures meaningful access.

Passion Home Health Care Services, LLC will provide language assistance services to participants at no extra cost and if any concerns about competence, confidentiality, appropriateness or conflict of interest are present, interpretation services will still be provided.

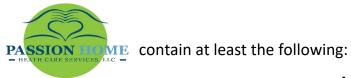
Passion Home Health Care Services, LLC will establish a plan for the agency to address the needs of the LEP population who needs language assistance. Training will be given to staff on how to respond to the LEP population especially when they call on the phone for support. Passion Home Health Care Services, LLC will also look for federal grants and other free resources to assist LEP individuals.

Quality Management Policy

January, 2023- March 31, 2023 Quality Management Plan

Passion Home Health Care Services, LLC, an educator and employer, takes its responsibilities very seriously. Passion Home Health Care Services, LLC follows state and federal policies, guidelines and procedures that aim to maintain the quality of our operations and also to make certain we treat staff, students, and clients as fairly as possible. Passion Home Health Care Services, LLC has in place strategies for ensuring the appropriate management of academic quality and standards, promoting good practice and customer service.

Passion Home Health Care Services, LLC will create and implement a QMP to ensure it meets the requirements of 55 PA Code Chapter 52.24 and Chapter 1101. The QMP will



Measurable goals to ensure compliance with

Shartan 53, 24. Chartan 1101 and

Chapter 52.24, Chapter 1101 and

other chapters in this title under which the provider is licensed.

Passion Home Health Care Services, LLC defined success by Measurable goals which include surveys given to each participant to aim at a 90 percentage or more of the client satisfaction. To measure the success ratio, the QMP team will meet quarterly to discuss implementation of an action plan to keep a quality success rate ongoing. The action plan will include:

- (a) The Administrator follow up with phone calls to participants and inquire about their satisfaction of services;
- (b) The Administrator contacting the family member or legal guardian to discuss their opinion of the client satisfaction with services;
- (c) In-service Education;
- (d) Change in Personnel if necessary, to please the client;
- (e) Review and Redesign if necessary, the process which will lead to improved processes and performance by Passion Home Health Care Services, LLC
- (f) Design a new process leading to innovation and improvement strategy.
- (g) Data-driven outcomes to achieve compliance with this chapter, Chapter 110I and other chapters in this title which the provider is licensed.

Mason Weh will be responsible for the development, implementation and quarterly review of the plan. The reviews will be conducted in the months of March, June, September, and December. The areas that will be used to determine the Quality Management goals and outcomes will be the clinical documentation, completing charts correctly, personnel requirements, In-Service Education, hiring requirements, etc. The data will be reviewed by Mason Weh and a written report will be submitted to the Administrator, Governing Body, and Professional Advisory Committee.

Annual monitoring and evaluation of each indicator and analysis of logs will be performed to ensure effective resolution. If the problem is not resolved or improvement is not apparent, the actions taken will be reassessed and further changes will be

formulated.

Areas to be considered in prioritizing a process for improvement will include, but not be limited to:

- (1) The degree to which the process, function of service is consistent with Passion Home Health Care Services, LLC 's mission, vision and philosophy.
 - (2) Concerns related to consumers' health and safety.
 - (3) Concerns of Passion Home Health Care Services, LLC 's customers and staff relating to process, design, function or service.
 - (4) Impressions of experts.
 - (5) Findings in comparative data bases.

The listing of priorities will provide a basic set of performance expectations that can be measured, assessed and improved over time. Once data has been turned into information by summarizing and organizing it, the information is evaluated.

- The current Department-approved CAP, if applicable.
- Passion Home Health Care Services, LLC may add additional items to the
 QMP to address self-identified areas of quality improvement
- The QMP will be updated at least annually by Passion Home Health Care Services, LLC
- The Department may request Passion Home Health Care Services, LLC to update the QMP if the company receives a CAP.
- Passion Home Health Care Services, LLC shall submit a copy of the QMP to the Department upon request.

The Agency's focus area is the level of care and competency of Home Health Aides. The overall Quality Management measurable goals and outcomes that are identified by Passion

CONTINUOUSly monitored, evaluated and improved based on feedback and observations made during the 60-day visits.

Passion Home Health Care Services, LLC will review the Service Order or the Internet Service Provider and other intermittent communication with either the consumer or caregiver. If there are any requested revisions to the Service Order or ISP it will be communicated to the Service Coordinator.

Passion Home Health Care Services, LLC Quality Management outcome is that it evaluates and references the Service Order or ISP to determine the service requirements.

These documents are reviewed on a quarterly basis or, if necessary, more frequent.

Passion Home Health Care Services, LLC will ensure that adequate staffing is available always. If staff including contract staff is inadequate to meet the needs of the individual's or cannot assure that the service is being provided at the frequency and duration established in the individual's ISP, Passion Home Health Care Services, LLC will notify the Support Coordinator and/ or the physician and the primary caretakers and refer the

individuals to another agency.

Passion Home Health Care Services, LLC will provide verification that the service is provided during a change in staff, such as shift changes, staff call outs, staff no-shows or changes in staffing patterns. Passion Home Health Care Services, LLC's Administrator will ensure that the service being provided will be consistent with and as established in the individual's ISP. The Administrator will schedule staff members to provide services that will reflect the frequency and duration directed by the ISP. To ensure the consistency of care, and no disruptions to the duration and frequency of services provided to participants, all staff shifts are scheduled to overlap by 15 minutes. If a staff member

contact the Administrator who will then advise the current staff member to remain on shift until the next shift is covered. All shift changes will be documented for trending any continued issues. A qualified supervisor will be available always to provide supervision and assistance to the on-call nurse and/or coordinator. The on-call coordinator and/or nurse will be responsible for documenting all calls received and the action taken. Passion Home Health Care Services, LLC will monitor on-call activity. An on-call log will be maintained. This is done to ensure tracking and monitoring of after-hours activity, to provide consistent case management to our individuals with an on-call system, and to determine handling of after-hours needs relating to individuals care.

An on-call log will be maintained which will itemize all calls received after hours. This log will include, but not be limited to the following information:

- 1. Date and time of call
- 2. Nature of call (e.g., general)
- 3. Person receiving call
- 4. Name of individual
- 5. Person who calls (if other than the individuals)
- 6. Action taken
- 7. Appropriate notations will be made in the respective individual's record, as indicated.
- 8. On-call logs will be reviewed by the agency Administrator, or designee, and the Quality Assessment and Performance Improvement Committee will be considered as part of the Passion Home Health Care Services, LLC 's process.

Passion Home Health Care Services, LLC also ensures that Home Health Aides are properly trained to care for Office of Long Term Living consumers and they will be provided with annual in-services.

The Objective of Passion Home Health Care Services, LLC is to ensure that the service provided meets the needs of the consumer, maintains the 60-day home visit schedule, decreases staff call outs, and to get feedback from consumers with regards to services received, attentiveness, punctuality, compassion, and professionalism. Passion Home Health Care Services, LLC 's Director will analyze the performance measures/data sources by reviewing the number of grievances made to Passion Home Health Care Services, LLC on a quarterly basis. The Director will review the remedies and outcomes satisfied and not satisfied in order to institute policies to insure the number of grievances are reduced.

To ensure overnight staff remain awake while on duty with a client and overnight shifts, random calls will be made to check in and verify that the staff member is awake while caring for a participant. These calls will be random during the shift but at least every 3 hours. If the staff member does not answer, they will have 10 minutes to return the call before another call goes out and will continue until it is verified that the staff member is awake while caring for the participant. If the staff member is found to have been sleeping, they will be retrained as to the policy and procedures of the agency to remain awake at all times while providing care to a participant.

Continued issues will result in suspension or termination.

Passion Home Health Care Services, LLC's Case Manager will review the number of changes/revisions requested by consumers and it will be determined whether changes/revisions satisfy the consumer. The Case Manager will also review the frequency of staff turnover and call outs on a quarterly basis. These findings will be reported to the Director and it will be evaluated which steps should be taken to reduce such occurrences. The focus of improvements will be on those problems that happen quite often and/or have a significant impact on resident safety when they do occasionally occur.

Passion Home Health Care Services, LLC will collect data on critical incidents for quality management purposes and analyze the data to identify trends and patterns for effective program management to ensure the safety and well-being of participants quality supports and services. This will determine the effectiveness of quality enhancement goals and activities.

Passion Home Health Care Services, LLC will have in place a system to record, respond and resolve a participant's complaint in accordance with 55 Pa Code Chapter 52.18.

Passion Home Health Care Services, LLC complaint system will contain the following:

- The name of the participant.
- The nature of the complaint.
- The date of the complaint.
- Passion Home Health Care Services, LLC actions to resolve the complaint.
 The participant's satisfaction to the resolution of the complaint.

Passion Home Health Care Services, LLC will review the complaint system at least quarterly to:

- Analyze the number of complaints resolved to the participant's satisfaction.
- Analyze the number of complaints not resolved to the participant's satisfaction.
- Measure the number of complaints referred to the Department for resolution.

Passion Home Health Care Services, LLC will develop a QMP when the numbers of complaints resolved to a participant's satisfaction are less than the number of complaints not resolved to a participant's satisfaction. This Policy's objective is to minimize damage to Passion Home Health Care Services, LLC reputation and reduce the risk of litigation by handling complaints from our consumers or prospects in a timely, effective and consistent manner. The Director of Operations is

this policy on a regular basis to ensure that it continues to comply with industry laws, regulations, guidelines and best practices. Mason Weh is also responsible to communicate this agency's policy to all employees, officers, director, representatives and advisors of Passion Home Health Care Services,

When Passion Home Health Care Services, LLC receives a complaint, an acknowledgment letter must be sent to the client within 5 business days.

Mason Weh is the person responsible for handling the client's complaint; key elements of Passion Home Health Care Services, LLC Complaint Policy; and expected delay of the outcome.

It is the policy of Passion Home Health Care Services, LLC to:

- (a) Handle complaints from customers or prospects in a timely, effective, fair and consistent manner.
- (b)To record complaints centrally in the complaint log including participants satisfaction to the resolution.
- (c)To report complaints to the company whose product is involved as well as where applicable to the company that sponsors the license.
- (d) To return all calls from participants within 3 business days of receipt.

It is the policy of Passion Home Health Care Services, LLC. to retain all participant records for at least 7 years. Passion Home Health Care Services shall retain all participant records and PHI for at least seven years.

ME Participant Complaint Management Policy

Passion Home Health Care Services, LLC will have in place a system to record, respond and resolve a participant's complaint in accordance with 55 Pa Code Chapter

52.18.

Passion Home Health Care Services, LLC's complaint system will contain the following:

- The name of the participant.
- The nature of the complaint.
- The date of the complaint.
- Passion Home Health Care Services, LLC's actions to resolve the complaint.
- The participant's satisfaction to the resolution of the complaint.

Passion Home Health Care Services, LLC will review the complaint system at least quarterly to:

- Analyze the number of complaints resolved to the participant's satisfaction.
- Analyze the number of complaints not resolved to the participant's satisfaction.
- Measure the number of complaints referred to the Department for resolution.

Passion Home Health Care Services, LLC will develop a QMP when the numbers of complaints resolved to a participant's satisfaction are less than the number of

complaints not resolved to a participant's satisfaction.

This Policy's objective is to minimize damage to Passion Home Health Care Services, LLC's reputation and reduce the risk of litigation by handling complaints from our consumers or prospects in a timely, effective and consistent manner. The Director of Operations is designated as responsible for the application of this policy, and to review this policy on a regular basis to ensure that it continues to comply with industry laws, regulations, guidelines and best practices. The Nursing Supervisor is

also responsible to communicate this agency's policy to all employees, officers, director,

representatives and advisors of Passion Home Health Care Services, LLC.

Passion Home Health Care Services, LLC

When Passion Home Health Care Services, LLC receives a complaint, an acknowledgment letter must be sent to the client within 5 business days. This letter must include the following elements:

Name of the person responsible for handling the client's complaint; key elements of Passion Home Health Care Services, LLC's Complaint Policy; and expected delay of the outcome.

It is the policy of Passion Home Health Care Services, LLC to: (a) Handle complaints from customers or prospects in a timely, effective, fair and consistent manner.

- (b) To record complaints centrally in the complaint log.
- (c) To report complaints to the company whose product is involved as well as where applicable to the company that sponsors the license.



Passion Home Health Care Services, LLC

Participant Complaint Form

Date of complaint_	
Participant Name:	
Address:City/State/Zip:	
Telephone:	Fax Number:
Describe the nature of your complaint:	
Name of Participant or Personal Representative	
(PLEASE PRINT):	
Signature of Participant or	Data
Personal Representative: (If Personal Representative, include a description or	
, , , , , , , , , , , , , , , , , , , ,	A



Actions taken by Passion Home Health Care Service	es, LLC to resolve complaint:
,	
Please submit this form directly to:	
Passion Home Health 18 Berbro Upper Darby,	Avenue
epper 2 mey,	2.2.2.002
If you have any questions. please calwith Mason Weh.	ll 215-360-3682 and ask to speak
Mason Wein	
Date Received:	
Date Response Provided to Participant:	
Employee Name [Please Print]	Employee Title
Employee Signature	Date

PASSION HOME HEALTH CARE SERVICES, LLC USE ONLY:

Participants satisfaction to resolution of complaint



Non-Discrimination Policy

Passion Home Health Care Services, LLC provides an equal opportunity/affirmative action employment to all employees and prospective applicants for employment. Passion Home Health Care Services, LLC is committed to a policy of equal opportunity and does not discriminate on the basis of race, color, national origin, age, marital status, sex, sexual orientation, gender identity, gender expression, disability, religion, height, weight, or veteran status, in accordance with the Civil Rights Act of 1964. Passion Home Health Care Services, LLC complies with all applicable federal and state laws regarding nondiscrimination and affirmative action.

Passion Home Health Care Services, LLC ensures that personnel actions are administered in compliance with federal, state and local laws prohibiting discrimination on the basis of any protected status as set for in the Statement of Equal Opportunity Employment above. Preventing discrimination is the responsibility of every Employee. To carry out our policy, persons are recruited, hired, placed, trained and promoted according to individual merit. Other personnel actions such as compensation, benefits, transfers, social and recreation programs, demotion, discipline and dismissal are administered in a nondiscriminatory manner. Passion Home Health Care Services, LLC provides reasonable accommodations for qualified individuals with known disabilities or handicaps to enable such individuals to: (1) apply for employment with Passion Home Health Care Services, LLC and (2) to perform the essential functions of their jobs.

Passion Home Health Care Services, LLC will not discriminate against consumers or Medicaid recipients on the basis of race, color, religion, national origin, age, marital status, sex, sexual orientation, gender identity or expression, disability, height, weight, or veteran status.

Passion Home Health Care Services, LLC prevents any form of unlawful employee and consumer harassment based on race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, disability, or veteran status. Any interference with the consumer receiving the best care from Passion Home Health Care Services, LLC employees or employees performing their tasks will not be permitted.

Regulation Compliance Policy

Passion Home Health Care Services, LLC will have a staff member who works to ensure that personnel are aware of and take steps to comply with the relevant laws and regulations of the Commonwealth of Pennsylvania including 55 PA Code Chapter 52.22, and the United States. Passion Home Health Care Services, LLC will comply with all applicable Federal, State and Waiver regulations including but not limited to 55 Pa Code Chapter 52. Passion Home Health Care Services, LLC understands that the Department will monitor at least once every 2 years and the monitoring may be announced or unannounced.

Passion Home Health Care Services, LLC shall submit documentation as requested by the Department that it is in compliance with the following:

- This chapter.
- The MA provider agreement, including the waiver addendum.
- Chapter 1101 (relating to general provisions).
- The approved applicable waiver, including approved waiver amendments.
- A State or Federal requirement.

Passion Home Health Care Services, LLC is prohibited from making the following arrangements with other providers:

- The referral of MA recipients directly or indirectly to other practitioners or providers for financial consideration or the solicitation of MA recipients from other providers.
- b) The offering of, or paying, or the acceptance of remuneration to or from other providers for the referral of MA recipients for services or supplies under the MA Program.
- c) Will not lease or rent space, shelves or equipment within a provider's office to another provider or allow the placement of paid or unpaid staff of another provider in a provider's office. This does not preclude a provider from owning or investing in a building in which space is leased for adequate and fair consideration to other providers.
- d) The solicitation or receipt or offer of a kickback, payment, gift, bribe or rebate for purchasing, leasing, ordering or arranging for or recommending purchasing, leasing, ordering or arranging for or recommending purchasing, leasing or ordering a good, facility, service or item for which payment is made under MA.

The Compliance officer shall review, at least annually; all reported violations or incidents of misconduct and compliance and business ethics policies, and report to the Director and will adopt a Code of Business Ethics that clearly outlines expected conduct and is to be displayed in the office and included in new hire orientation. Passion Home Health Care Services, LLC will on an annual basis conduct internal audits on admissions, payments and reimbursement, accounts receivable, delinquent accounts, and staff expenses to ensure adherence to all laws, regulations, program requirements and guidelines and policies. The results of these audits are to be reported at least annually to the compliance officer for their review and recommendations to the Director.

Verifying Participant Eligibility

Passion Home Health Care Services, LLC will access the PROMISe online Eligibility Verification System (EVS) to determine a participant's Medical Assistance eligibility as well as the

participant's scope of service at http://www.dhs.pa.gov/promise/. Eligibility verification is essential to processing a claim for reimbursement.

Passion Home Health Care Services, LLC will ensure a participant is eligible to receive a service prior to rendering the service to the participant. Passion Home Health Care Services, LLC will check participant eligibility on the date of service (DOS) to verify the participant's eligibility status and covered services. The participant must be eligible on the date of service in order to be reimbursed for services provided. PCPs will also verify that a participant is assigned to them. Authorization requests will be submitted through the secure web portal and will include all necessary clinical information. Urgent requests for prior authorization will be called in as soon as the need is identified. Standard prior authorization requests will be submitted for medical necessity review at least five (5) business days before the scheduled service delivery date or as soon as the need for service is identified.

Passion Home Health Care Services, LLC will not assume that a participant is eligible for Medical Assistance because he/she has a CHC health plan ID card. Since a participant's eligibility is subject to change, it is imperative to check EVS to verify a participant's eligibility each time services are provided. Since the information in EVS is reflective of the current information that the state has available, it is important to always ask participants if they have additional coverage.

All eligibility verifications will be recorded in the billing records, as well as in the participant's record.

Notification

Passion Home Health Care Services, LLC will notify the Department at least 30 business days prior to any of the following occurrences:

- 1. Changes in the agency address, telephone number, fax number, e-mail address, agency name change or designated contact person
- 2. Creation, changes or revocation of the agency's articles of incorporation or partnership agreements, or ownership change of 5% or more
- 3. Any revisions to an agency audit previously submitted to the Department under § 52.11(a)



Revocation or provisional status of the agency license or certification

- 5. Cancellation of the following insurances:
 - a. Commercial general liability insurance
 - b. Workers' compensation insurance
 - c. Professional liability insurance if the profession authorized to provide a service requires professional liability insurance

If Passion Home Health Care Services, LLC is unable to notify the Department due to an emergency prior to a change occurring, Passion Home Health Care Services, LLC will notify the Department within 2 business days of the change.

PASSION HOME HEALTH CARE SERVICES LEGALLY AUTHORIZED REPRESENTATIVE Participant Power of Attorney, Legal Guardian or Representative Policy and Procedures:

SCOPE:

To provide Passion Home Health Care Services staff with the knowledge on how to handle a participant who has a:

- Spouse
- Power of Attorney (POA)
- Legal Guardian (LG)
- Representative

Definitions

Legally Authorized Representative.

A legally authorized representative is an individual or body authorized under applicable law to provide permission on behalf of a prospective participant for the participant's participation in the Pennsylvania Home and Community Based Service Program for the purposes of this policy, a legally authorized representative includes a person appointed as a health care agent under a Durable Power of Attorney for Health Care (DPAHC), a court appointed guardian of the person, but also a representative that is determined by the participant's supports coordinator and indicated on the Pennsylvania HCBS Service Authorization Form.

Legal guardian. A person appointed by a court of appropriate jurisdiction.

Power of Attorney for Health Care

As its name suggests, a power of attorney for health care allows the person you designate as your agent to carry out decisions regarding health care in the event a participant cannot legally make those decisions for themselves. A power of attorney for health care often includes instructions concerning life support, burial, cremation, organ and tissue donation, and whether a person elects to have certain medical procedures performed, such as CPR and kidney dialysis.

Durability Feature

A general power of attorney gives your agent the power to act on a participant behalf as soon as they sign the document, but the agent loses that power upon the participant's incapacity. A power of attorney for health care is designed to allow someone to make decisions for participants upon their incapacity. Unlike with a traditional power of attorney, a durable power of attorney allows a participant's agent to make decisions while they are incapacitated. It is for this reason that the power of attorney for health care is referred to as "durable power of attorney."

Procedure:

Passion Home Health Care Services staff must review the Service Authorization to determine if there is a Power of Attorney, Legal Guardian or representative indicated.

If a power of attorney or legal guardian is indicated, the Passion Home Health Care Services supervisor shall acquire a copy of the Durable Power of Attorney or Legal Guardian/Representative is documented prior to the enrollment paperwork process.

Not all Power of Attorneys are for health care decisions. The Power of Attorney must indicate the durable power to represent the participant for health care.

When the service coordinator has indicated a Power of Attorney, Legal Guardian and/or legal representative on the service authorization, only the individual named may officially sign documentation on the participant behalf.

If any Passion Home Health Care Services personnel is informed that a participant has a Power of Attorney, Legal Guardian and/or legal representative who is not listed on the service authorization, the participant's service coordinator must be notified in writing immediately. In this case, all updates/changes shall be rightfully made with the SC and/or the Power of Attorney, Legal Guardian and/or legal Representative prior to providing services or accepting signatures from a Power of Attorney, Legal Guardian and/or legal representative.

Passion Home Health Care Services shall implement this regulation, [Legally Authorized Representative Policy] as appropriate. All staff or Direct Care Worker who is found to be a spouse, Power of Attorney, Legal Guardian, and/or Legal representative will not be paid to provide care in the Community HealthChoices Waiver Program. Caregiver/Direct Care Worker who is a spouse, power of attorney, legal guardian or legal representative cannot be paid to provide care for the participant he/she is a spouse to or legally represents in the Community HealthChoices Program.

PASSION HOME HEALTH CARE SERVICES PREREQUISITES FOR HIRING AND/OR ROSTERING OF DIRECT CARE WORKERS POLICY:

Direct Care Worker requirements/training/orientation POLICIES AND PROCEDURES:

PROVISSIONAL NEW HIRE MONITORING AND TERMINATION PROCEDURES

S 611.54. Provisional hiring.

(Employee Handbook Section: 2.18 Criminal background Check)

- (a) General rule. The home care agency or home care registry may hire an applicant for employment or referral on a provisional basis, pending receipt of a criminal history report or a ChildLine verification, as applicable, if the following conditions are met:
- (1) The applicant shall have applied for a criminal history report and ChildLine verification, as applicable, and provided the home care agency or home care registry with a copy of the completed request forms.
- (2)The home care agency or home care registry shall have no knowledge about the applicant that would disqualify the applicant under 18 Pa.C.S. 4911 (relating to tampering with public record information).
- (3)The applicant shall swear or affirm in writing that the applicant is not disqualified from employment or referral under this chapter.
- (4) The home care agency or home care registry may not assign or refer the provisionally hired applicant until that person has met the requirements 611.55 (relating to competency requirements).
- (5)The home care agency or home care registry shall monitor the provisionally hired applicant awaiting a criminal background check through random, direct observation and consumer feedback. The results of monitoring shall be documented in the individual's file.

- (6) The home care agency or home care registry shall directly supervise, or assign another direct care worker to accompany, a provisionally hired applicant awaiting a child abuse clearance who will provide home care services to a consumer less than 18 years of age.
- (7)The period of provisional hire of an individual who is and has been, for a period of 2 years or more, a resident of this Commonwealth, may not exceed 30 days. The period of provisional hire of an individual who has not been a resident of this Commonwealth for 2 years or more may not exceed 90 days.
- (b) Termination. If the information obtained from the criminal history report or ChildLine verification, or both, reveals that the individual is disqualified from employment 01' referral under
- 611.52 (relating to criminal background checks) or under ss 611.53 (relating to child abuse clearance), the individual shall be terminated by the home care agency or removed from the home care registry's roster immediately. If the individual fails to provide the ChildLine verification or criminal history report, or both, within the time period permitted for provisional hire, the individual shall be terminated by the home care agency or removed from the home care registry's roster immediately.

Cross References

This section cited in 28 Pa. Code 611.51 (relating to hiring or rostering of direct care workers).

PROCEDURES:

Passion Home Health Care Services, LLC will hire a person for employment on a provisional basis pending receipt of a criminal history check if the following are met:

- A) The provisionally hires person awaiting a criminal history check will be monitored through random, direct observation and participant feedback and the results will be documented in the persons employment file
- B) The provisional hire period will not exceed 30 days for a person who has been a resident of Pennsylvania for at least 2 years.
- C) The provisional period will not exceed 90 days for an individual who has not been a resident of the Commonwealth for less than 2 years
 - D) A provisionally hires employee shall swear or affirm in writing that he is not disqualified from employment under this chapter
 - E) Passion Home Health Care Services, LLC will not hire a person provisionally if we have knowledge that the person would be disqualified for employment under 18 Pa.c.s. 491.

If an employee is arrested for or convicted of an offense that would constitute grounds for denying employment or participation in a program, activity or service, or is named as a perpetrator in a founded or indicated report:

A) The employee must provide the administrator or their designee with written notice not later than 72 hours after the arrest: conviction or notification that the person has been listed as a perpetrator in the statewide database.

B) An employee who willfully fails to disclose information as required above commits a misdemeanor of the third degree and shall be subject to discipline up to and including termination or denial of employment

Refer to EMPLOYEE HANDBOOK HYPERLINK:

htcp://www.indlivingservices.com/employee

PASSION HOME HEALTH CARE SERVICES COMPENTENCY REQUIREMENTS & TRAINING POLICY AND PROCEDURES

§ 611.55. Competency requirements.

(Employee Handbook Section: 2.16 Expectations, sub-Heading: Work Behaviors)

- (a) Prior to assigning or referring a direct care worker to provide services to a consumer, the home care agency or home care registry shall ensure that the direct care worker has done one of the following:
 - (1) Obtained a valid nurse's license in this Commonwealth.
 - (2) Demonstrated competency by passing a competency examination developed by the home care agency or home care registry which meets the requirements of subsections (b) and (c).
 - (3) Successfully completed one of the following:
- (i) A training program developed by a home care agency, home care registry, or other entity which meets the requirements of subsections (b) and (c).
- (ii) A home health aide training program meeting the requirements of 42 CFR 484.36 (relating to the conditions of participation; home health aide services).
- (iii) The nurse aid certification and training program sponsored by the Department of Education and located at www.pde.state.pa.us.
- (iv) A training program meeting the training standards imposed on the agency or registry by virtue of the agency's or registry's participation as a provider in a Medicaid Waiver or other publicly funded program providing home and community-based services to qualifying consumers.
- (v) Another program identified by the Department by subsequent publication in the *Pennsylvania Bulletin* or on the Department's web site.
- (b) A competency examination or training program developed by an agency or registry for a direct care worker must address, at a minimum, the following subject areas:
 - (1) Confidentiality.
 - (2) Consumer control and the independent living philosophy.
 - (3) Instrumental activities of daily living.
 - (4) Recognizing changes in the consumer that need to be addressed.
 - (5) Basic infection control.
 - (6) Universal precautions.
 - (7) Handling of emergencies.
 - (8) Documentation.
 - (9) Recognizing and reporting abuse or neglect.
 - (10) Dealing with difficult behaviors.

- (c) A competency examination or training program developed by an agency or registry for a direct care worker who will provide personal care must address the following additional subject areas:
 - (1) Bathing, shaving, grooming and dressing.
 - (2) Hair, skin and mouth care.
 - (3) Assistance with ambulation and transferring.
 - (4) Meal preparation and feeding.
 - (5) Toileting.
 - (6) Assistance with self-administered medications.
 - (d) The home care agency or home care registry shall include documentation of the direct care worker's satisfactory completion of competency requirements in the direct care worker's file. If the direct care worker has a nurse's license or other licensure or certification as a health professional, the individual's file shall include a copy of the current license or certification. Documentation of satisfactory completion of competency requirements is transferable from one home care agency or registry to another home care agency or registry, provided the break in the individual's employment or roster status does not exceed 12 months.
 - (e) The home care agency or home care registry also shall include documentation in the direct care worker's file that the agency or registry has reviewed the individual's competency to perform assigned duties through direct observation, testing, training, consumer feedback or other method approved by the Department or through a combination of methods. The competency review must occur at least once per year after initial competency is established, and more frequently when discipline or other sanction, including, for example, a verbal warning or suspension, is imposed because of a quality-of-care infraction.
 - (f) A direct care worker employed by a home care agency or rostered by the home care registry on December 12, 2009, shall achieve compliance with the competency requirements imposed by this chapter by December 12, 2011.

Cross References

This section cited in 28 Pa. Code § 611.51 (relating to hiring or rostering of direct care workers); and 28 Pa. Code § 611.54 (relating to provisional hiring).

PROCEDURES:

Passion Home Health Care Services, LLC will ensure that staff are trained in compliance with 55 PA Code Chapter 52.21 and will meet the training requirements necessary to maintain appropriate licensure or certification, or both.

Passion Home Health Care Services, LLC will ensure legally responsible individuals are not paid to provide services. Passion Home Health Care Services, LLC has a system in place to ensure the following are not paid to provide care:



- Participant's spouse
- Legal guardian
- Representative Payee
- Power of Attorney (POA)

Prior to providing a service to a participant, a staff member shall be trained on how to provide the service in accordance with the participant's service plan.

Passion Home Health Care Services, LLC will maintain documentation in each employee file for the following:

- Staff member attendance at trainings.
- Content of trainings.

Passion Home Health Care Services, LLC shall implement standard annual training for staff members providing services which contains at least the following:

- Prevention of abuse and exploitation of participants.
- Reporting critical incidents.
- Ensure staff remains awake during overnight hours.
- Participant complaint resolution.
- Department-issued policies and procedures.
- · Provider's quality management plan.
- Fraud and financial abuse prevention.

Refer to EMPLOYEE HANDBOOK HYPERLINK: http://www.indlivingservices.com/employee

Employee Screening for Exclusion Policy (LEIE, EPLS/SAM & Medicheck)

Exclusion Screening - An inspection process for minimizing risk in hiring individuals or contracting with business entities that have been involved in adverse governmental actions related to fraud, patient abuse, licensing board sanctions, license revocation/suspension/surrender, or have who have been excluded from federal healthcare programs. In addition, for employees that require specific medical/healthcare license/certification

in order to perform their duties, these credentials will be verified with appropriate licensing and disciplining authorities.

Passion Home Health Care Services, LLC will screen upon hire and make continued monthly screening for staff members and contractors to determine if they have been excluded from participation in Federal health care programs by reviewing the LEIE, EPLS/SAM and Medicheck in accordance to 55 PA Code Chapter 52.11(a)(5)(xi).

ADA Compliance Policy

Passion Home Health Care Services, LLC understands the obligation and will comply to the 55 PA Code Chapter 52.11 (a) (5) (iii) In accordance with the Americans with Disabilities Act of 1990 (ADA), the Rehabilitation Act of 1973 and subsequent regulations. Passion Home Health Care Services, LLC will make sure all employees abide by the ADA regulations and that all clients are aware of the policies. Passion Home Health Care Services, LLC will provide an employee with reasonable accommodation, who can perform the essential functions of the employment position that such individual may qualify or desires. Passion Home Health Care Services, LLC understands and accepts that no covered entity shall discriminate against a qualified individual on the basis of disability in regard to job application procedures, the hiring, advancement, or discharge of employees, employee compensation, job training, and other terms, conditions, and privileges of employment.

Passion Home Health Care Services, LLC will not discriminate against anyone with any physical or mental disability neither against any client or customer with any disability and shall provide such accommodations. Passion Home Health Care Services, LLC provides reasonable accommodation to qualified individuals with an appropriately documented disability, provided that such accommodation does not create an undue hardship. Passion Home Health Care Services, LLC determines accommodations on a case-by-case basis for students who are unable to meet program requirements due to appropriately documented disabilities. Requested accommodations initiated by the student must be reasonable, must not create undue burden, must be supported by adequate documentation, and must be requested within a reasonable time frame. Passion Home Health Care Services, LLC have read and understand and must comply with the ADA provisions Section 12101-12113.



PASSION HOME HEALTH CARE SERVICES PREREQUISITES FOR HIRING AND/OR ROSTERING OF DIRECT CARE WORKERS POLICY:

POLICY ON HEALTH SCREENING

§ 611.56. Health screening.

(Employee Handbook Section___ IMMUNIZATION AND PPD TESTING PROGRAM)

- (a) A home care agency or home care registry shall insure that each direct care worker and other office staff or contractors with direct consumer contact, prior to consumer contact, provide documentation that the individual has been screened for and is free from active mycobacterium tuberculosis. The screening shall be conducted in accordance with CDC guidelines for preventing the transmission of mycobacterium tuberculosis in health care settings. The documentation must indicate the date of the screening which may not be more than 1 year prior to the individual's start date.
- (b). A home care agency or home care registry shall require each direct care worker, and other office staff or contractors with direct consumer contact, to update the documentation required under subsection (a) at least every 12 months and provide the documentation to the agency or registry. The 12 months must run from the date of the last evaluation. The documentation required under subsection (a) shall be included in the individual's file.
- ©. A direct care worker employed by a home care agency or rostered by the home care registry on December 12, 2009, shall achieve compliance with the health evaluation requirements imposed by this chapter by June 10, 2010.



Annual Tuberculosis Screening Questionnaire to be Completed by Direct Care Worker

Name:							
Date:							
Please answer	the following qu	estions:					
	B evaluation, have		positive for TB?		Yes		No
Have you ever h	ad close contact	with anyone wh	o was sick with T	B? □	Yes		No
Since your last TB evaluation have traveled in any of the countries Yes No listed below? (If yes, please CIRCLE the country.)						No	
If you did travel, have you ever had close contact with anyone who Yes □ No was sick with TB? (If yes, please □ CHECK the country/ies.)							
Have you ever b	een vaccinated v	vith BCG?			Yes		No
* The significance of a fghanistan	travel exposure should Cook Islands	be discussed with a Kenya	n health care provider a Niger			Republic	
Algeria Angola Argentina Armenia Azerbaijan Bahrain Bahrain Belarus Belize Benin Bhutan Bolivia (Plurinational State of) Bosnia and Herzegovina Botswana Brazil Brunei Darussalam Bulgaria Burkina Faso Burundi Cambodia Cameroon Cape Verde	Côte d'Ivoire Croatia Democratic People's Republic of Korea Democratic Republic of the Congo Djibouti Dominican Republic Ecuador El Salvador Equatorial Guinea Eritrea Estonia Ethiopia French Polynesia Gabon Gambia Georgia Ghana Guam Guatemala Guinea Guinea Guinea Guinea Guinea Guyana	Kiribati Kuwait Kyrgyzstan Lao People's Democratic Republic Latvia Lesotho Liberia Libyan Arab Jamahiriya Lithuania Madagascar Malawi Malaysia Maldives Mali Marshall Islands Mauritania Mauritius Micronesia (Federated States of) Mongolia	Nigeria Pakistan Palau Panama Papua New Guinea Paraguay Peru Philippines Poland Portugal Qatar Republic of Korea Republic of Moldova Romania Russian Federation Rwanda Saint Vincent and the Grenadines Sao Tome and Principe Senegal Serbia Seychelles Sierra Leone	Repul of Mac Timor Togo Tonga Trinida Turke Turke Ugan Ukrai Ukrai Ukrai Urugu Urugu Vanua Venezu	and rmer Y blic cedoni -Leste a ad and sia ey nenista lu da ne I Repul ania uay kistan atu uela (B blic of) Nam	Tobago n blic of	
Central African Republic Chad China	Haiti Honduras India Indonesia	Montenegro Morocco Mozambique Myanmar	Singapore Solomon Islands Somalia South Africa	Zamb Zimba			

If the answer to all of the above questions is NO, no further testing or further action is required. Please sign the assessment paperwork and submit same to your supervisor.

If the answer is YES to any of the above questions, Passion Home Health Care Services Agency requires that your health care provider complete a tuberculosis screening exam. Please have your Health Care Provide complete the paperwork, sign it and submit it to your supervisor.

Tuberculosis (TB) Risk Assessment to be Completed by Health Care Provider

Does the student have signs or symptoms of active tuberculosis disease?				
If No , proceed to 2 or 3. If Yes , proceed with additional evaluation to exclude active tuberculosis disease including tuberculin skin testing, chest x-ray, and sputum evaluation as indicated.				
Tuberculin Skin Test (TST) (TST result should be recorded as actual millimeters (mm) of induration, transverse diameter; if no induration, write "0". The TST interpretation should be based on mm of induration as well as risk factors.) Date Given: Date Read:				
Result: □mm of induration □Interpretation: positive □negative				
<u>OR</u>				
Interferon Gamma Release Assay (IGRA)				
Date Obtained:				
(specify method): ☐ QFT-G ☐ QFT ☐ GIT ☐ other				
Result: Negative: □ Positive: □ Intermediate: □				



Health Care Provider Signature

Chest x-ray: (Required if TST or IGRA is positive	e)		
Date of chest x-ray:	Result:	Normal: □	Abnormal: □
 **Interpretation guidelines >5 mm is possible. Recent close contacts of an individual persons with fibrotic changes on a person disease. Organ transplant recipients. Immunosuppressed persons: taking taking a TNF-α antagonist. Persons with HIV/AIDS. 	ial with infectorior chest x	-ray consistent	·
 Persons born in a high prevalence of significant* amount of time History of illicit drug or tobacco use History of resident, worker or volunte Persons with the following clinical control control control control failure, leukemias and low body weight (>10% below ideal) malabsorption syndromes 	eer in high-r onditions: sil lymphomas	isk congregate licosis, diabete s, head, neck o	e settings es mellitus, or lung cancer,
>15 mm is positive:Persons with no known risk factors f	for TB disea	se	
Employee Signature		Date	
Health Care Provider Name		 Date	



Bed Bug Policy

Scope All Employees

Policy

It is the policy of Passion Home Health Care Services to outline the steps that should be followed to assist the participant and staff members in identifying safety issues resulting from infestation of bed bugs.

Procedure:

Wavier and program regulations require Direct Care Worker to complete visits at the participant's home per the authorized dates and times. The Office of Long-Term Living Participant Information Material Packet states that "it is the responsibility of the participant to not engage in behaviors that puts you or others at risk- if you put your health and safety or the health and safety of other at risk, you may lose your services.';

It is the responsibility of the participant in a bed bug contaminated residence to notify the Service Coordinator (SC) of the concern. However, if the Direct Care Worker notices signs of bed bugs while providing care, it is his/her responsibility to notify his/her Staffing Program Manager/Supervisor/Safety Mentor immediately. The Program

Manager/Supervisor will then contact the appropriate SC of the infestation, who will provide the participant with a list of local exterminators as needed. It is the responsibility of the participant to reach out to their landlord, property manager or residence-owner to explore community resources available to cover the cost of bed bug treatment and extermination.

The Quality Management Team will examine the situation for a health and safety risk of both the participant and the Direct Care Worker to determine if services should be placed on hold until the situation is resolved by extermination. If the participant's home is considered a risk for the Direct Care Worker to provide services- the Supervisor will immediately notify participant that Direct Care Worker services will be placed on hold until the situation is resolved. The Supervisor will contact the SC to confirm whether completion of extermination has occurred prior to resuming services.

All Direct Care Workers are expected to use universal precautions as required in the home and community. When a Direct Care Worker determines he/she have been in an infested home, he/she should not return to the any office until contaminated clothing has been changed. The Direct Care Worker is expected to contact his/her supervisor immediately to inform them of the situation. The Supervisor will make the HR department aware. It is recommended to remove clothing including shoes in a neutral location such as a garage. Place contaminated articles into a bag and either discard in the trash or wash them immediately in extremely hot water. Shower immediately to ensure there are no bed bugs in your hair or on your body.