

# SELF-DIRECTION PARTICIPANT GUIDE

**Version 2 Active as of May 2022**

## **Abstract**

This guide is not meant to replace support or guidance from your FI but to be a reference and review point for our process', regulatory restrictions and provide updates regularly.

If you have questions, please connect with your Fiscal Intermediary Coordinator.  
If you are unsure who to reach email [SelfDirect@pccsny.org](mailto:SelfDirect@pccsny.org)



*“We are a not-for-profit organization creating social change within communities by supporting people with disabilities on their search for identity and acceptance.”*

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## DIRECT SUPPORT PROFESSIONAL (SELF-HIRED STAFF)

### Hiring Self-Hired Staff

While the participant/designee is responsible for selecting and conditionally hiring employees, Person centered Care Services (PCCS) is the employer of record and must comply with all state and federal mandates. As the employer of record, PCCS conducts background checks to clear the SHS before beginning to work.

Once a Self-Directed Participant is interested in hiring a new staff, they must send a completed [Self-Hired Staff Information Sheet](#) to their assigned Fiscal Intermediary Coordinator.

**SIDE NOTE:** Please ensure you are reviewing your Self-Direction budget regarding the hours, rate, and department you have within the budget to utilize. If you would like to change this information, please consult with your Support Broker.

After the candidate has completed a Self-Direction Application [www.pccsny.org](http://www.pccsny.org) a member of the Human Resources Department will contact the candidate to start the hiring process.

The HR designee will send a Contingency Letter e-mail that references the position and salary offered, as well as request the following documentation/information to run background checks in accordance with OPWDD and PCCS regulations:

- Completed Background Forms (*attached to the Contingency Letter e-mail*)
- Two (2) Forms of ID (*Page 7 on Background Forms packet lists acceptable forms of ID*)
- Fingerprint availability
- Copy of transcript or diploma or GED (*this is not required, but we would like to keep it on file if available*)
- Status of COVID-19 Vaccine Card

Once the candidate has provided HR with all required documentation, HR will start running background checks, which include Fingerprinting with Identigo. HR designee will e-mail candidate all information related to their scheduled fingerprint appointment, including the date, time, location, and form of ID required.

Please note that background checks can take up to two (2) weeks to be completed, sometimes longer depending upon the CBC.

Once the background checks have been completed, HR designee will contact the prospective Self-Hired Staff with mandatory tasks that need to be completed within 30 days:

- Checklist(s) assigned in Paycom
- Job Description(s) assigned in Paycom

**Paycom Login Information:** HR designee will provide SHS with their username and password

Please note that prospective SHS who have not completed their tasks within **30 days** will be moved to a **Not Hired** status and will have to reapply and start the background process again.

Once all mandatory tasks have been completed, HR designee will send SHS their Official Offer Letter, DOL at Hiring form, and additional information to begin their role at PCCS, some of which include:

- Signing the DOL at Hiring Form and e-mailing it back to HR Designee
- Providing a photo of themselves from the neck up to be sent via email to the Fiscal Intermediary Support Coordinator so it can be uploaded into Paycom.
- Downloading the eVero mobile app. They will receive an e-mail from [noreply@evero.com](mailto:noreply@evero.com) with their username and instructions on how to set their password (make sure SHS check their spam/junk folder)
- Signing up for Direct Deposit; Completing their EEO information; Changing their username

Once all has been completed, HR will assign Self-Hired Staff the ‘SHS New Hire Orientation’ in Relias. This will occur every other Tuesday starting on **Tuesday April 12<sup>th</sup>, 2022**.

- **Relias Login Information:** SHS will receive an e-mail from [no-reply@alerts.reliaslearning.com](mailto:no-reply@alerts.reliaslearning.com) with their login credentials. Make sure SHS checks their spam/junk folder.
- **SHS New Hire Orientation (4 Hours) includes:**
  - Course 1: New Hire Orientation (2 hours):
    - ✓ New Hire Video – Exam
    - ✓ New Training Manual – acknowledgment
    - ✓ 2022 Annual Training Manual – Exam
    - ✓ EVV Training – Acknowledge
  - Course 1: New Hire Orientation (2 hours):
    - ✓ Sexual Harassment Training – NY Mandatory (Relias Owed)

Self-Hired Staff should provide the Training Certificate to the assigned FIC to ensure payment is made in a timely fashion. The SHS New Hire Orientation are paid trainings once cleared by FISC and will be billed indirect training hours against Self-Directed Self-Hired Budget.

After completion of SHS New Hire Orientation and completion of the Relias, the Fiscal Intermediary Support Coordinator will send e-mail to all parties to inform SHS is able to start working.

This training should be completed within **48 hours** of being completed. If Self-Hired Staff fail to complete within that timeframe, they will be placed **inactive** until completion. They will be given **30 days** to complete once placed inactive, and failure to do so will lead to possible termination.

**Self-Hired Staff should not start working until the e-mail by the FISC is received, clearing the SHS to work with you!**

### Salary:

Person centered Care Services Fringe Rate is 28%. As of 4/1/21, for self-hired community habilitation in the five boroughs of NYC, Nassau and Suffolk, the highest you can pay a CH-SHS is \$33.75 per hour. For SHS-

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Respite, is \$22.03 per hour. The minimum wage that can be paid to a SHS is \$15.00 per hour. For more information, visit the [NYS Reimbursement Rate Reform website](#).

## Hiring Family Members

There are specific restrictions regarding SHSs that are related to the participant. Relatives can be paid as the SHS as long as the following criteria are met. The SHS:

1. Must be 18 years or older.
2. Must not be parents, legal guardians, spouses, or adult children of the participant.
3. Performs a function not ordinarily performed by a family member.
4. Provides a service that is necessary, authorized, and would otherwise be provided by another qualified provider of waiver services.
5. Does not reside in the same residence as the participant.

## Hiring Self-Hired Staff (NON-Family Members)

1. Must have at least a High School Diploma or in the process of receiving one.
2. If they are under 18 years old, understand there is certain rules one must follow according to the Dept. of Labor. See website: [Hours of Work for Minors | Department of Labor \(ny.gov\)](#)
3. Provides a service that is necessary, authorized, and would otherwise be provided by another qualified provider of waiver services.
4. Does not reside in the same residence as the participant.

## Required State Training for the SHS

All SHSs must complete state mandated training at hire and annually. The course content includes topics that are set forth by OPWDD Requirements.

- Principles of Human Growth and Development.
- Characteristics of The Persons Served
- Promoting Relationships and Safe Environments.
- Laws and Regulations and Policies/ Procedures Governing Protection from Abuse.
- Agency Safety and Security Procedures Including Fire Safety.
- Corporate Compliance.
- Incident and Abuse Reporting and Processing.
- Infection Control and Bloodborne Pathogens.
- PCCS Corporate Compliance Plan 2021
- Sexual Harassment

Failure to complete all training at hire and as requested annually will result in suspension or termination of employment. FIC will notify the Self-Directed Participant/Designee, Support Broker, and Self-Hired Staff via e-mail. Whereas HR will notify Self-Hired Staff through our Relias system. Training which is specific to the individual is conducted by the participant, family and/or the Planning Team.

## SHS Optional Trainings

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Self-Hire Staff also have the option to take optional trainings. The designee or participant can contact their FIC to inquire about optional trainings for their SHS. The SHS can also request for training but this request will need to be approved by participant and/or designee as training hours will need to be deducted from the SD budget.

## When in Need of Staffing?

At times you may find yourself in need of staffing and your Broker may also be struggling to support you with finding a staff. Please reach out to your Fiscal Intermediary Coordinator as they will assist you with potential resumes from our resume pool. Upon request, your FI Coordinator will provide you with resumes for your review. Upon interviewing the candidate, please inform your Fiscal Intermediary Coordinator of the outcome as to help you move forward with hiring the candidate or placing the resume back to the resume pool.

## Payable Hours

Hours worked are classified as billable and non-billable and both will be paid. It is important that time is properly differentiated between the two. Billable hours occur when the SHS is providing a service directly to the participant such as working on the participant’s goals or providing a relief to the caregiver. Non-billable hours occur when the SHS is working but not providing a direct service to the participant such as during a medical visit, Circle of Support Meeting, Planning Team meeting, or training.

The SHS cannot work and get paid if an individual is admitted to a hospital. The SHS may work with the individual in the Emergency Room and during transport to and from the hospital. This is a Medicaid law to prevent double billing. Dates of hospital admissions must be reported to the entire Circle of Support Team, which can include but not limited to, Fiscal Intermediary Coordinator, Support Broker, and Care Manager.

## SHS Pay

PCCS pays the SHS directly. Payroll is processed bi-weekly. Worked hours are to be entered through Empower. If Self-Hired Staff fails to enter their work hours or document services on the eVero app, then they must contact the assigned FIC within 24-hours. The Self-Directed Participant/Designee must submit an “eVero template,” so the FIC can manually correct in eVero. All hours Self-Hired Staff worked MUST be approved by the Self-Directed Participant/Designee. Any timesheets submitted after payroll period, will be processed for the upcoming pay period.

If eVero Templates not received within the 24-hours of when the error occurred this can result in delay of payment. It is highly recommended that Self-Directed Participant/Designee should review all Self-Hired Staff either daily or the end their staff last day worked of the week. The week runs from Sunday to Saturday.

PCCS encourages all SHSs to enroll in direct deposit or in Rapid! Pay Card. To enroll in Direct Deposit Self-Hired Staff should review the New Hire Manual, and log onto their Paycom app.

## Overtime

Overtime occurs when one employee works with only one participant more than 40 hours a week. The Department of Labor requires that anyone working more than 40 hours be paid time and a half. **Therefore, SHSs is not authorized to work more than 40 hours per week. There is to be no Overtime in Self-Direction.**



## SHS Benefits

SHS are entitled to benefits if they work with one family for 30 plus hours a week. SHS working with multiple families for a total of 40 hours a week will not be eligible for Benefits. These includes medical coverage, paid time off, disability, and worker’s compensation.

Eligibility based on hours worked is as follows:

Empire Medical	Empire Vision	Empire Dental	Empire Basic Life Insurance **
Eligibility 30+ hours	Eligibility 30+ hours	Eligibility 40 hours	Eligibility 40 hours
Bi-weekly deductions based on a sliding scale	\$2.46 bi-weekly deduction, single person plan.	Bi-weekly deductions based on a sliding scale	Complimentary *No Charge to you*

Should your Self-Hired Staff be entitled to benefits HR will provide more information.

## Core Competencies Evaluation

The participant/designee is required to submit a SHS evaluation form for each SHS within the first 3 months of the SHS hire date and then annually through their eVero portal. If assistance is needed to complete the evaluation, please contact your designated FIC and they will help in completing.

## Pay Raises

Should you want to give your Self-Hired Staff a raise we require this still be submitted via. paper. We will need this document prior to submitting any CNBA or Budget Amendments to the DDRO for final approval. The raise will not be done retroactively.

For more information: [Regional Centers for Workforce Transformation | Code of Ethics & Core Competencies for Direct Support Professionals](#)

## SHS Transporting a Participant

If required, Self-Hired staff can transport Participants in their vehicle to goal related activities outlined in their Habilitation Plan/Staff Action Plan. When completing the Self Hired staff information form, you must indicate whether Self Hired Staff will transport Participants in their vehicle. If Self Hired staff are involved in an automobile accident, they are responsible for any damages that incur to their vehicle. Since the driver is not driving an agency vehicle, their personal insurance will cover damages/losses or the insurance of the other driver.

SD participants and designees also have the option of having their Self-hired staff placed in DMV’s License Event Notification Service (LENS) through PCCS. The LENS program alerts PCCS with moving violations and license suspensions.

A moving violation occurs whenever a traffic law is violated by a vehicle in motion. Some examples of moving violations are speeding, running a stop sign or red light, and driving under the influence. LENS can quickly identify problem drivers and focus efforts to improve safety and decrease vulnerability.



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If the Participant/Designee or their Self Hired staff is injured in the automobile accident while on shift, the self-hired staff can then file a worker’s compensation claim.

## **Disciplinary Actions/ Resignations/ Terminations**

There may be times that the participant/designee has concerns regarding a SHS’s performance. Performance issues include, but are not limited to absences, not completing necessary documentation, not completing tasks as required or other concerns. Please call your FIC to help handle these concerns.

If an employee resigns, please let your FIC know immediately so that PCCS may complete the necessary documentation to process the resignation. Similarly, if an SHS needs to be terminated, notify your FIC immediately so that PCCS may follow the necessary protocols to terminate the employee from the system. Sample form provided below.

## **Incident Reporting**

PCCS is mandated by New York State to report certain incidents, abuse and neglect. Each SHS is required to report incidents as they occur or are observed. All SHS are required to assist and engage at all levels of an investigation if needed. For questions regarding incidents or to report an incident please contact you FIC as so they can help provide the appropriate supports and help you report the incident.

## **Corporate Compliance**

The Corporate Compliance Hotline provides an anonymous, confidential way for you and your employees to report violations of regulatory and organizational standards. These violations may include, theft, mistreatment of members, fraud, misuse of property or other violations of laws, regulations or Organization policies and procedures. The compliance officer accepts calls and provides reports to the board of directors of PCCS.

Employees may call the Hotline at (917) 831-9037 or via email [DotheRightthing@pccsny.org](mailto:DotheRightthing@pccsny.org) , 24 hours a day, 7 days a week. There is no need for Sd participants, designees, and self-hired staff to identify themselves during a call and there is no retaliation against any employee who reports a violation in good faith.

For further information about the Hotline, please contact your Fiscal Intermediary Coordinator

# **REIMBURSEMENTS**

## **Submitting reimbursement**

A W-9 needs to be submitted for each vendor receiving reimbursements from PCCS. A W-9 is needed for every vendor whether the vendor will be paid directly. W-9’s will be kept in a secure file on our data base. It is not necessary to submit a W-9 which is already on file.

**\*\*Please note that all services and items must be approved prior to utilization and prior to submission of reimbursement requests. If an individual chooses to purchase an item or access a service without prior approval, reimbursement is not guaranteed.**

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All requests for reimbursement for OTPS, IDGS and Family Reimbursed Respite must be submitted onto eVero by the 10<sup>th</sup> of the following month of service. For example, if a service was provided in February, the reimbursement request must be entered by the 10<sup>th</sup> in March.

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All receipts/invoices must be itemized and clear. Non-itemized or unclear receipts/invoices will not be rejected until corrected. All receipts/invoices must include the date(s) of service. Every expense must be approved by the participant/designee. Reimbursement request are to be submitted through the eVero Family Portal.

## **Individual Directed Goods and Services (IDGS)**

Individual Directed Goods and Services (IDGS) are services, equipment or supplies not otherwise provided through OPWDD’s HCBS waiver or through the Medicaid State Plan that address an identified need in a participant’s Life Plan. As the FI we request you give us the information to review prior to approval process.

The services, equipment or supplies must:

- Are related to a need or goal identified in the person-centered careplan/Individualized Service Plan.
- Are for the purpose of increasing independence or substituting for human assistance, to the extent the expenditures would otherwise be made for human assistance.
- Promote opportunities for community living and inclusion and/or increase the participant’s safety and independence in his/her home environment.
- Are able to be accommodated without compromising the participant’s health or safety.
- Are provided to, or directed exclusively toward, the benefit of the participant.

## **Camp**

Funding may be requested for the cost of summer camp if:

- The individual does not live in a certified setting.
- The camp is located in New York State.
- The dates of the camp are between Memorial Day and Labor Day.
- The camp has a Department of Health permit which certifies that the camp is in compliance with Subpart 7-2 of the State Sanitary Code.
- There is a flyer or a website describing the camp.
- Camp may be focused to supporting individuals with disabilities or open to the public.
- There is a valued outcome in the LP directly related to attending camp.
- The reimbursement does not exceed published fees. The cap is \$4,000.
- The camp is not an OPWDD provider of respite.

## **Community Classes**

Classes must be available to the general public in any subject area that relates to a person's valued outcomes (Art, Dance, Exercise, Cooking, Computer training). Classes:

- Must relate to a habilitative need in the LP and not just for recreational purposes.

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- Must be non-credit bearing.
- Must result in active engagement and participation in an integrated community setting.
- Must have published fees.
- Must be open to the public.
- May not be taught by staff or run by an agency that provides OPWDD services.
- May not be located on the grounds where OPWDD services are normally provided.
- May not take place in a setting that is certified by OPWDD.
- Cannot be restricted solely to those with an intellectual or developmental disability.
- Cannot duplicate any Medicaid State Plan or HCBS Waiver service or be conducted by an entity that delivers such services.

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Community classes must be provided in a group setting. One-on-one lessons can only be approved if they are related to an integration goal within the LP. The private lessons must result in increased integration in the community and all other IDGS/Community class criteria must be met.

Reimbursement may not exceed the published fees as outlined in the entity’s published course fee structure. The fees must be published on the internet, in a circular, publication, flyer or in a newspaper.

### Community Class Request

When interested in attending a Community Class they should reach out to your assigned Fiscal Intermediary Coordinator (FIC). The FIC will provide you with the [Community Class Form](#), to have vendor complete and provide a flyer/Brochure/website for further review.

Once the form has been completed and you have obtained a flyer, brochure or website, you must then submit to your Fiscal Intermediary Coordinator for review. Your Fiscal Intermediary Coordinator will review to ensure the class meets the Life Plan and Valued Outcomes. After review, the community class will either be approved or denied. If the class has been denied, your Fiscal Intermediary Coordinator will work with you to get the class approved or find an alternative community class.

If you are interested in virtual community classes, the class will still have to undergo the approval processes as stated above. All community classes have to be related to a Value Outcome stated in the Life Plan and Staff Action Plan.

**DO NOT pay for a class and expect to be reimbursed without getting prior approval for the community class.** Please review the Q&A on how to get a Community Class approved.

### Coaching or Education for Parents

IDGS funding for coaching/education is for a parent/spouse/advocate to attend/participate in educational opportunities that assist the participant and those close to the participant in achieving goals established in the individual’s LP. Coaching/education within the participant’s self-directed services are applicable if:

- It cannot be covered by other public programs.
- The self-directing individual is over 18 years old.
- Is applicable to the participant’s diagnosis.

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- Registration and conference fees are included in the reimbursement only, not lodging and travel.
- The individual does not live in a certified setting.
- A flyer or brochure explaining the training is submitted.
- Reimbursement is only up to FET reimbursement levels.

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**The maximum expenditure for this service is \$500 annually.**

## Clinical Non-Direct Service Provision

Clinical Non-Direct Consultants/Independent Contractors are clinical specialists hired to:

- Evaluate an individual’s Staff Action Plan.
- Train and support the self-hired Comm Hab staff in implementing the Staff Action Plan.
- Evaluate the effectiveness of the self-hired Comm Hab staff in carrying out the services in the Staff Action Plan and make recommendations.
- Provide an annual update of progress/provision of service and need to continue.

The clinician’s discipline must be authorized under Article 16 clinic regulations (psychology, PT, OP, SLP, social work, nursing, nutrition/dietetics, rehabilitation counseling). Clinical Non-Direct Consultant/Independent Contractors are not permitted to provide direct therapy to the participant. Clinical Non-Direct Consultants/Independent Contractors cannot replicate any service available through a third-party insurer, the Medicaid State Plan or HCBS Waiver service.

For approval of the service:

- Submit a written outline of services from the consultant.
- Submit a copy of the consultant’s clinical license from the NYSED Office of the Professions.
- Show that the service they are providing cannot be replicated through a third-party insurer, Medicaid State Plan or HCBS waiver services.

To determine a clinician's pay rate, please review the appendix of the IDGS Chart and consult with your assigned FIC.

## Clinical Direct Service Provision

There are only a handful of specialized direct therapies that can be built into a Self-Direction Budget. Approved therapies are:

- Hippo Therapy
- Therapeutic Riding
- Aquatic Therapy
- Art Therapy
- Massage Therapy
- Play Therapy

To determine a clinician's pay rate, please consult with your FI Coordinator.

Speech, Physical Therapy and Occupational Therapy are not therapies that can be built into a Self-Direction Plan. These types of therapies can be accessed through Medicaid State Plan Benefits card or other primary

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insurance carriers. Should you want more information please consult with your assigned Care Manager and CCO.

## Hippo Therapy

Hippo therapy is a medical treatment, not a recreational program of teaching a progressive riding and horsemanship skill. Hippo Therapy is a treatment strategy by physical therapists, occupational therapists, or speech language pathologists that is incorporated into the professional’s plan of care to achieve functional outcomes. Hippo therapy may be requested in a self-directed plan if:

- The participant has cerebral palsy or other neurological disorders that permanently affect body movement and muscle coordination.
- The clinician providing hippo therapy is a NYS licensed Occupational, Physical or Speech Therapist; if he/she is an Assistant in one of those categories (OTA, PTA) then he/she must be supervised by a licensed OT or PT.

## Therapeutic Riding

Therapeutic Riding and equine-assisted activities address and contribute positively to the cognitive, physical, emotional, and social well-being of individuals with special needs. Therapeutic riding and equine-assisted activities are taught by a PATH International Instructor to individuals five (5) years old and older. A PATH International Instructor must carry a certification business card with an annual expiration date and must re-qualify each year to be certified.

## Aquatic, Art, Massage, Music, Play Therapy

Funding for these therapies may be included in a self-directed plan when the service has been prescribed by the individual’s medical doctor to ameliorate a specific medical diagnosis/condition for which these therapies have recognized efficacy. Funding is not available to support vague goals such as "promote well-being," "reduce stress," or “promote relaxation.” There must be a corresponding valued outcome in the individual's Life Plan.

Funding for music therapy may be included in a self-directed plan only if there is a specific communication or audiological requirement for the service as stated in the Life Plan and a corresponding valued outcome. A justification must be submitted from the individual’s medical doctor or licensed clinician.

### Prior to ALL Clinical Direct Service Provision:

- There must be a prescription written and signed by the participant’s MEDICAL doctor. The prescription must state the diagnosis and the goal of the treatment.
- Submit a copy of the clinical license from the NYSED Office of the Professions (<http://www.op.nysed.gov/opsearches.htm>).
- Clinician must complete the necessary paperwork prior to the delivery of any service: Conduct an initial assessment and submit a written summary of the findings from the assessment.
- Write up a treatment plan which:
  - o Is signed by the medical doctor who prescribed the therapy
  - o Acknowledges the participant’s personal goals and therapeutic activities (along with frequency and duration).
  - o Supports a specific valued outcome from the Life Plan.

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Once services are approved:

- Ongoing services must be supported by the treatment plan.
- Signed session notes including the therapeutic service(s) provided, duration, dates of service and response to treatment must be submitted to the FI for each session in order to receive payment/reimbursement.
- The treatment plan needs to be reviewed, modified as necessary and signed by the medical doctor every six months. This must be submitted to the FI.

### **Health Club/Organizational Memberships**

Funding for a gym, a health club, or other organizational memberships may be included in the self-direction budget for reasons of health, fitness or community integration in accordance with the participant’s valued outcomes.

- Membership is for the individual only and must be in his or her name. Please note that many vendors do not provide individual memberships for minors.
- The club/organization must offer open enrollment to the public. It cannot be a private club with a closed membership where membership is available by invitation only.
- The annual cap is \$1500 per year.
- Payment may not exceed the entity’s published membership dues/fees specified.

### **Household Related Items and Services**

The service or item must help the individual live more independently in a safe way (e.g. a microwave oven for someone who cannot safely use a stove or an oven).

- The service or item must benefit the individual and be related to a valued outcome stated within the Life Plan and be related to health and safety.
- This item cannot be funded through any other funded program.
- There is an annual cap of \$1500.
- Household service (cleaning, minor maintenance, snow removal, lawn mowing) is only for individuals not living in the family home.

### **Paid Neighbor**

A paid neighbor is a person hired by a participant that is living independently through a housing subsidy in the Self Direction budget. This person:

- Can be available in an emergency situation.
- Cannot be related by blood or marriage of the individual.
- Must go through a criminal background check and other required screenings of New Hire Self-Hired Staff.
- Must live within 30 minutes of the participant.
- Will be paid a monthly stipend (maximum \$800) automatically.

There must be a paid neighbor contract in place signed by the participant/designee, paid neighbor, and PCCS with the details of the responsibilities of the paid neighbor.

Should a Paid Neighbor get called on shift they MUST punch in eVero just like a Self-Hired Staff would and document services.



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### Self-Directed Staffing Support

Self-Directed staffing support assists with scheduling self-hired staff and assists the participant to complete/review staffing related paperwork such as time sheets, DSP evaluations, monthly summary notes, etc.

This person:

- Cannot be a DSP (e.g., respite or community habilitation staff).
- Cannot be a family member of the individual or someone actively involved in the planning team.
- Cannot be an employee of a not-for profit organization.
- Must go through a criminal background check and other PCCS required screenings.
- The maximum reimbursement is \$20 per hour.

### Transportation

Funding may be requested for transportation that is directly related to valued outcomes, safeguards and services identified in the Life Plan and approved in the Self Direction budget. In order to make the determination whether IDGS transportation costs may be reimbursed, the questions to be asked are:

1. What valued outcome/safeguard (from the Life Plan) is this activity in support of?
2. What service (from the Self Direction budget) was this transportation related to?

Transportation costs are not reimbursed through the Self Direction Budget for transportation to and from OPWDD funded services for which transportation costs are included in the price developed and paid for the service.

Mileage may not be reimbursed for medical appointments as this duplicates a State Plan service.

Mileage, Taxi, tolls, and MTA are reimbursable. The IDGS transportation reimbursement form must be completed in its entirety. It must clearly state that the transportation was used to go to a service paid for with the budget or to do a valued outcome in the Staff Action Plan, when the service is comm hab. Transportation that was not for services related to the self-directed budget or to the Staff Action Plan is not reimbursable through IDGS.

**\*\*Self-Hired Staff are not to be used as a Taxi/Uber service!**

For additional information on Individual Directed Goods and Services (IDGS), refer to the [IDGS Chart](#).

### Telehealth Services

Appropriate use of remote service delivery for a specific service can be provided upon being determined by the Circle of Support Team and through the person-centered planning process. The person and/or designee must state their preference and justification for remote services. If the remote service is deemed appropriate, the remote service delivery will need to be added to the Life Plan and Staff Action Plan confirming the provider's Staff Action Plan (SAP) allows for the safe and effective remote delivery of services via technology. For more information: See the [ADM on Ability to use Technology to Remotely Deliver Home and Community-Based Services \(HCBS\)](#)



## ITEMS THAT CANNOT BE FUNDED THROUGH IDGS

This following is a list of items not funded through IDGS.

- Academic tutoring. This service should be pursued through the school district or college setting. Academic tutoring/homework is not an appropriate task for a DSP.
- Automatic pill dispenser/medication system. This is available through Assistive Technology outside of the person's Self Direction Budget.
- Cell Phones/Telephones. The SafeLink Wireless program is available to eligible individuals in New York State who receive Supplemental Security Income (SSI). The SafeLink service in New York State allows for a cell and limited free minutes for a person who has a diagnosed developmental disability and receives social security benefits under SSI.
- Computer Hardware.
- Computer Programs/Software. Software may be available through Assistive Technology outside the person's Self Direction Budget.
- Leased Vehicles.
- Health Related Services, Equipment and Supplies. Health related supplies such as food and beverage thickeners, disposable bed pads, supplemental medications are funded through the State Plan only, not through IDGS funding.
- Parents' Activity Fees. Expenses and meals incurred by parents when they accompany an individual to an activity are not reimbursed with IDGS funds and must be paid for by the parents.
- Participants' Activity Fees. Expenses and meals incurred while participating in an activity related to the Self Direction Plan are not reimbursed with IDGS funds and must be paid for by the individual or his family.
- Personal Monitoring Systems. These systems are available through State Plan Funds.
- DSP activity fees, expenses and meals incurred by the DSP supporting individuals. These are not reimbursed with IDGS funds but may be funded through OTPS.
- Direct Clinician service delivery and Therapies: Physical Therapy, Occupational Therapy, Speech Therapy, Psychology. These therapies are funded through the individual's State Plan Medicaid Card or if the individual is school aged, through the local school district. These therapies are not allowed even when they are providing a specialty within their field which is not provided by the school or Medicaid.
- Experimental Therapies. These are not reimbursable in any clinical category with IDGS and are not a permitted expense in the OTPS payment category.

### Live-In Caregiver (LIC)

PCCS does not provide Live in Caregivers. Live-In Caregiver is an HCBS waiver service that allows a person that is not related to the participant to reside in the same household as the waiver participant and provide as needed support. Support must address the participant's physical, social or emotional needs so the participant can live safely and successfully in his or her own apartment. When an individual chooses to have a LIC they must ensure the following:

- LIC is not blood or marriage related
- MUST go through the same process as Self-Hired Staff
- A contract between the Self-Directed Participant/Designee, LIC, and FI must be established.

**Acceptance**

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**Other than personal Services (OTPS)**

Other Than Personal Services (OTPS) are services utilizing 100% State funds to help pay for items that are not funded through Medicaid or through any other source. The maximum in this category is \$3,000 annually. Goods and services purchased with OTPS funds must relate to a valued outcome in a person's Life Plan and increase independence or the ability to live safely in his or her home.

**Allowable OTPS Expenses**

The following are allowable expenses under OTPS:

- Phone service – Landline\* or cell phone (13years).
- Internet\*- OTPS can be used for phone and internet only and not for the cable portion.
- Software related to the person's disability
- Staff activity fees to cover admissions and other costs incurred by the self-hired Comm Hab staff when providing support to the participant.
- Staff advertising
- Staff training
- Personal Use Transportation
- Clothing\* capped at \$250 annually
- Board stipend\* - reimbursement for food expenses.
- Utilities\*
- Other Goods and Services that Increase Independence
- Other Goods and Services Related to Health and Safety

\*Only for individuals 18 years or older.

When an individual is over 18 and lives with his family, reimbursement for bills (landline, utilities, internet) is divided by the amount of people living in the home, and only the individual's portion of the bill can be reimbursed.

Any bills which are for the individual only (such as cell phone bill or utility bill for an individual who lives independently) must be in the individual's name.

Bills will be reimbursed based on current charges.

It is the responsibility of the individual/designee to pay all bills. PCCS never pays utility and cell phone bills directly to vendors; rather, PCCS reimburses paid invoices. PCCS is not responsible to pay for any late fees.

All receipts submitted for OTPS reimbursement must be itemized. For example, if clothing was purchased, the receipt is considered itemized if it lists “shirt” or “jeans.” It is not considered itemized if it states, “item 13456” or “blue round.”

**Phone Service**

OTPS funds can be used for reimbursement of phone service. PCCS will not pay the phone company directly. PCCS will reimburse the participant/designee. PCCS will only start paying for Cellphone service for those over the age of 13 years old.

### **Acceptance**

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### **Support**

For all cell phone service and for landline service when an individual lives independently, the phone bills need to be in the individual’s name.

Cell phone bills can be paid if the SafeLink Wireless program is not available to the individual. The SafeLink Wireless program is available to eligible individuals in New York State who receive Supplemental Security Income (SSI). The SafeLink service in New York State allows for a cell and limited free minutes for a person who has a diagnosed developmental disability and receives social security benefits under SSI. Lifeline is a similar program for landlines and must be explored prior to utilizing the Self Direction budget for landline costs.

### **SHS Activity Fee**

The staff activity fee applies only to the self-hired Comm Hab staff and is NOT for participants.

These activities must relate to a valued outcome in the Staff Action Plan. State funds should not be used for meal reimbursement for the DSP. Staff Activity Fee is used to assist Self-Directed Participants to work on goals within the Staff Action Plan. For example, should the SDP have a goal how to behavior appropriately in the movies. PCCS would reimburse for the movie ticket.

To be reimbursed for Staff Activity Fee one must have the following:

- Itemized Receipts
- Date and Time
- Proof of Payment

### **Personal Use Transportation**

Transportation may be covered under OTPS if it:

1. Is for personal use.
2. Is related to a valued outcome in the Life Plan.
3. Is not to a medical appointment.
4. Is not to or from school.

Mileage, Taxi, tolls, and MTA are reimbursable through OTPS. Make sure to complete the transportation reimbursement form in its entirety to support the request for OTPS transportation reimbursement. Clearly state that the transportation was used to fulfill a valued outcome from the Life Plan.

### **Board stipend**

An individual must apply for food stamps before accessing this budget category. Board stipend can be received if:

1. The individual is denied for food stamps.
- Or:
2. The amount received from food stamps is insufficient. This would need to be documented in the Life Plan.

## Family Reimbursement Respite (FRR)

Family Reimbursed Respite is a way for families to pay a person they trust to supervise their child. The family must pay the provider directly and get reimbursed from PCCS. The respite provider does not need to be a PCCS employee.

- The family designates the rate per hour. We recommend to pay the minimum amount allowed at minimum wage at \$15 and the maximum amount allowed is \$25 per hour for an individual who is providing respite.
- Comm hab, or any other Medicaid-funded service, cannot occur concurrently with Family Reimbursed Respite.
- A parent living in the same residence as the participant cannot be paid to provide Family Reimbursed Respite.
- A DSP that works with the participant can also be paid through Family Reimbursed Respite once they are clocked out through eVero.
- This can be useful if the DSP is needed for more than 40 hours in a specific week.
- Family Reimbursed Respite utilizes 100% State Funds and the annual cap is \$3,000 for the SD Budget year.

## Housing Subsidy

Self-Direction participants, who choose to live independently or share a living environment and have tenancy rights, may be able to include a housing subsidy in their budgets. Housing Subsidy is funded by 100% State Funds. The amount received is calculated based on income, the number of residents, and the Housing and Community Renewal Payment Standards. If the participant wishes to live in an apartment that costs more than the approved housing subsidy stipend, he/she is responsible to pay the difference. [Housing Subsidy Regulation ADM 2022-3](#)

In order to include a Housing Subsidy in the Self Direction Budget, the following criteria must be met:

- The participant must be at least 18 years of age.
- The participant’s name must be on the lease with the landlord or listed on the deed of the home. The individual cannot sublease an apartment.
- The participant/designee must complete the Q&A Checklist to assure that it is a safe and legal apartment.
- W-9 and direct deposit for the landlord has to be submitted.
- Evacuation plan for the apartment must be submitted.
- Complete the Participation Agreement between the Self-Directed Participant and FI.
- All other documents, such as but not limited to, SSI, Wages, Food stamps, and more.

### Important reminders about Housing Subsidy

- PCCS can only pay rent when there is a current lease on file.

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- A person with a housing subsidy cannot receive Family Reimbursed Respite or Self-Hired Respite unless there is a medical need. We would need OPWDD approval prior.
- PCCS can only reimburse one month's security, and this gets processed as part of the transition stipend.

**Shared Living Arrangements:** (See pages of 37-39 of the OPWDD SD Provider Guide – March 2022)  
[SD Provider Guide](#)

### Community Transition Stipend

The participant may request a one-time transition stipend of up to \$5,000 in their Self Direction budget when moving into an independent living situation. Transition stipend funds cannot be used for personal or expendable items. Transition funds are used to pay for:

- Furniture
- Moving expenses
- Household items

### Reimbursement for Transition Stipend Items:

In order to get reimbursed for items purchased through the transition stipend, collect all itemized receipts and submit them at once. Transition Stipend can only be requested one time so all receipts must be submitted together. Transition Stipend reimbursement request must be submitted within three months of the initial lease date or the budget approval date, whichever is later. Complete a Reimbursement Form with the Expense Description and budget line stating, “Transition Stipend” and list items purchased separately. Only itemized receipts can be accepted. For example, if “mattress” is listed on the receipt, this can be reimbursed. However, if “white 39” is listed on a receipt, it is not reimbursable. [Community Transition Services ADM 2015-02](#) and [Amendment](#)

### Transition and Services

At any time, a person moves into a certified residential setting, SD Comm Hab and Respite services will need to end and the person will need to be discharged from SD Comm Hab and Respite. Please work with your Fiscal Intermediary Coordinator and Care Manager to ensure these services are closed upon moving to a certified residential home.

### Out-of-State-Services

Self-directed services delivered outside of New York State must adhere to the requirements in [ADM 2019-02R](#): Permissible Out-of-State or Country Home and Community-Based Services (HCBS) Waiver Services Delivery.

An OPWDD authorized provider may deliver HCBS Waiver services to an eligible individual while outside NYS only under the following circumstances:

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1. The HCBS Waiver service is delivered by an authorized OPWDD provider; and ii. within the same scope, frequency and duration as when the service is typically delivered in NYS
2. The individual receives HCBS Waiver services outside NYS
3. The individual’s travel during the provision of their HCBS Waiver service delivery is derived from the individual’s Life Plan/Individualized Service Plan (ISP) following a person-centered planning process
4. Service provision does not occur in one of the following site-based locations outside of NYS: i. Site-based certified programs outside of NYS (e.g., New Jersey certified residential program); or ii. Any other uncertified congregate setting that would require certification or a permit if located within NYS (e.g., camp facility); and
5. The individual can be safely served in the Out-of-State location (including the administration of any medications).

## EMPLOYER AND LABOR LAWS

**Equal Opportunity:** No individual shall be excluded from participation in, denied the benefits of, subjected to discrimination under, or denied employment in the administration of or in connection with, any such program or activity because of...”

- Race, Color, & National Origin (Title VI, Civil Rights Act of 1964)
- Includes limited English proficiency
- Religion
- Sex (Title IX, Education Amendments of 1972)
- Includes Pregnancy and LGBTI
- Any Age (Age Discrimination Act of 1975)
- Disability (Sec. 504 of the Rehabilitation Act of 1973)
- Political Affiliation or Belief

**Pregnancy Discrimination Act:** The Pregnancy Discrimination Act (PDA) forbids discrimination based on pregnancy when it comes to any aspect of employment, including hiring, firing, pay, job assignments, promotions, layoff, training, fringe benefits, such as leave and health insurance, and any other term or condition of employment.

**Pregnancy Accommodation Law:** Pregnancy accommodation rights in the workplace are covered by the Pregnancy Discrimination Act (PDA), the Family and Medical Leave Act, and the Americans with Disabilities Act Amendments Act (ADAAA). Under these laws, employers must provide reasonable accommodations for an employee’s pregnancy or childbirth, regardless of whether the employee has a pregnancy-related medical condition. Examples of reasonable accommodation include:

- Bathroom breaks
- Breaks for water intake and eating
- Periodic rest
- Assistance with manual labor.



**Fair Labor Standards Act and Nursing Mothers:** Section 7 of the FLSA was amended by the Affordable Care Act to provide nursing employees with:

- Reasonable break time to express breast milk
- A place, other than a bathroom, that may be used to express milk
- For up to 1 year after the child’s birth

**Family and Medical Leave Act:** The Family and Medical Leave Act of 1993 (FMLA) entitles an eligible self-hired staff to job-protected, unpaid leave: 1) upon the birth or adoption of a son or daughter of the employee, or one’s placement with the employee for foster care; or 2) when the employee’s spouse, child or parent has a serious health condition and requires care from the employee. The law also gives your staff job-protected, unpaid leave for their own serious illnesses. The Family Leave Policy will be administered consistent with any applicable state or local laws governing the same or related leave categories.

For additional information on NYS Labor Laws, visit the [Department of Labor](#).

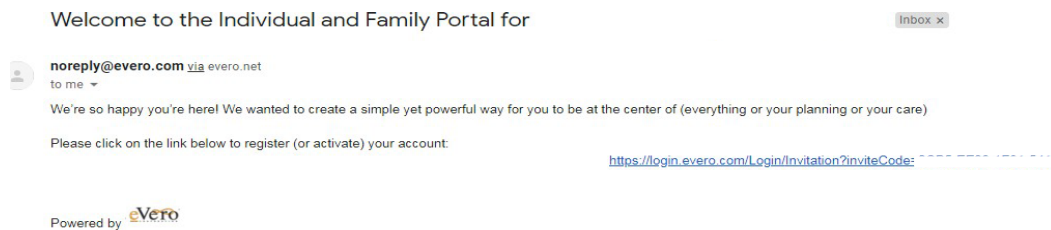
## eVero

Once all enrollments are completed the Intake Benefits Specialist will e-mail you as the Self-Directed Participant with instructions on how to get access to your eVero portal:

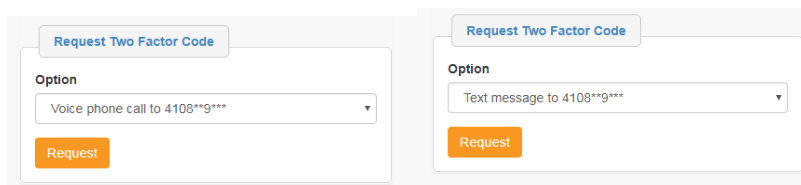


### Setting up eVero:

You will receive an e-mail from [noreply@evero.com](mailto:noreply@evero.com), please make sure to check your spam/junk mail.



Once you receive the email, you can click the link, which will prompt you to select to receive either a text or voice call to verify your identity using the matching phone number.



After selecting an option, you will receive either a text or voice call with a code. Enter the 6-digit code in the next window: This step confirms that you have the phone number associated with the



**Acceptance**

**Equity**

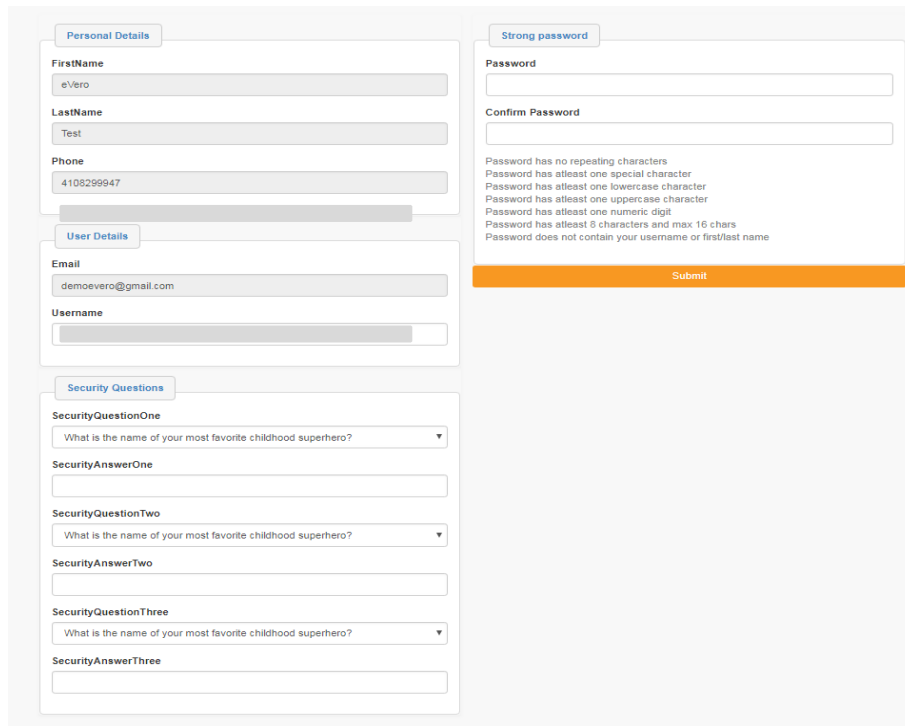
**Support**

account.

This is an important step which allows us to take your personal information seriously and ensure HIPPA compliance. The process may appear daunting at first, but please be assured it is only to allow us to make sure we have the right person requesting and entering the portal.

Now that you have entered in the code, you will find the Verify Details screen presented next. Please be sure to match the details that the FI used to create the account.

You can create your own username and password. The screen will walk you through selecting 3 security questions so that you can reset your password if you forget what you’ve selected. The password must meet some criteria which are spelled out on the screen for you. (Your phone number and email address will not be able to be altered during this process.)



The screenshot shows a web form for account creation. It is divided into four main sections:

- Personal Details:** Includes fields for First Name (eVero), Last Name (Test), and Phone (410829947).
- User Details:** Includes fields for Email (demoevero@gmail.com) and Username.
- Security Questions:** Three questions, each with a dropdown menu and a text input field for the answer. The questions are: "What is the name of your most favorite childhood superhero?".
- Strong password:** Includes fields for Password and Confirm Password. Below these fields, a list of password requirements is shown:
  - Password has no repeating characters
  - Password has atleast one special character
  - Password has atleast one lowercase character
  - Password has atleast one uppercase character
  - Password has atleast one numeric digit
  - Password has atleast 8 characters and max 16 chars
  - Password does not contain your username or first/last name

A large orange "Submit" button is located at the bottom right of the form.

**Logging In:**

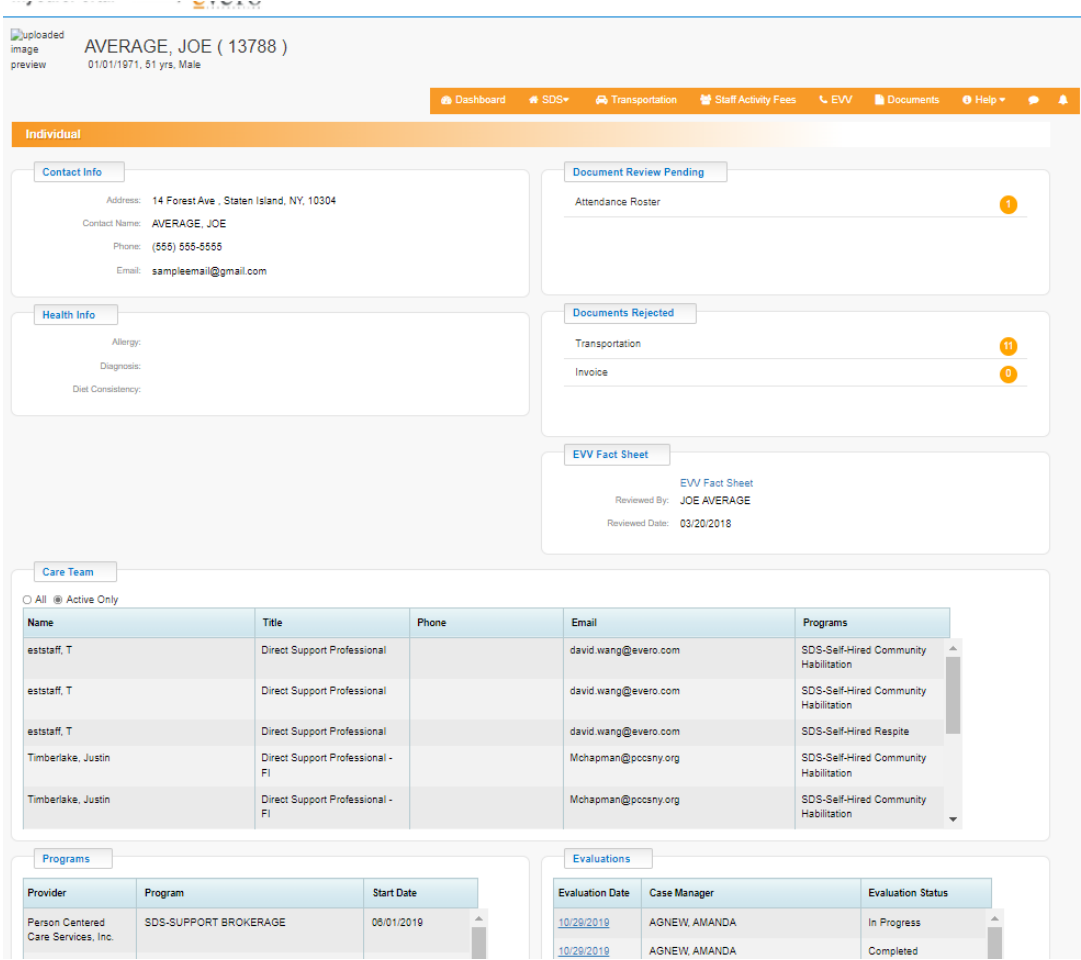
**Congratulations!** Your account has been successfully created! To log in – please go to [myeverportal.com](http://myeverportal.com)

**Acceptance**

**Equity**

**Support**

Once you



The screenshot shows a user profile for 'AVERAGE, JOE (13788)' with the following details:

- Contact Info:** Address: 14 Forest Ave., Staten Island, NY, 10304; Contact Name: AVERAGE, JOE; Phone: (555) 555-5555; Email: sampleemail@gmail.com
- Health Info:** Allergy, Diagnosis, Diet Consistency (fields are empty).
- Care Team:** A table listing staff members with columns for Name, Title, Phone, Email, and Programs.
- Programs:** A table with columns for Provider, Program, and Start Date.
- Evaluations:** A table with columns for Evaluation Date, Case Manager, and Evaluation Status.

login you

please one! a where your and

you are here – will be redirected to a

page. It's very important that enter through myeveroportal originally, so bookmark that You will this see login page you can enter new username password.

Navigation within the

**Portal:**

You've logged in, now what? The portal is a way to view all the information about your budget, staff and more from one location.

Before anything is done within the system you should create an automatic signature by the following:

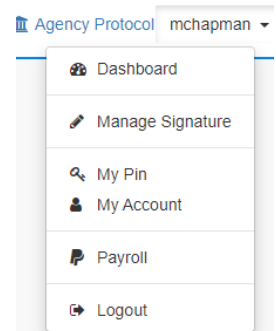


Click on Manage Signature → Change → Sign using mouse/finger → Okay.

### Main Dashboard:

The key components of the main dashboard will include basic contact information for the person supported, basic health information, care team information, program enrollment and evaluations.

- **Contact Info:** The address, phone, number, and the contact’s name for the Self-Directed Participant. If you notice something is incorrect, please reach out to your assigned FIC to correct in eVero. This is what populates on the Self-Direction Budget excel file.
- **Health Info:** Allergy, Diagnosis, and Diet Consistency would populate in this section. If you notice something is incorrect, please reach out to your assigned FIC to correct in eVero. Your entire Care Team would have this information and make sure it would be updated on the Life Plan or Staff Action Plan as well, if needed.
- **Document Review Pending:** In this section, would be documents that require your attention for you to review before the FIC can pay out for processing.
- **Documents Rejected:** Should an invoice or anything be rejected from your FIC it would show up in this section.
- **EVV Fact Sheet:** Must sign off an acknowledge that they read the Electronic Visit Verification (EVV) fact sheet.
- **Care Team information** – will include all members of the team who are connected to the person (i.e. Self-Hired Staff, FI contact, etc.) **\*\*SIDE NOTE:** If you notice that a member of your Care Team is missing or incorrect please reach out to your assigned Fiscal Intermediary Coordinator to update.
- **Programs** – this will include all programs that have been authorized as part of the person’s



**Acceptance**

**Equity**

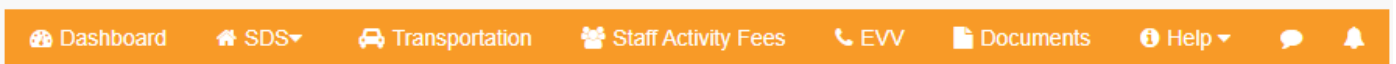
**Support**

**budget**

- Evaluations – this will be where DSP Evaluations mandated by the state can be completed for the Self-Hired Staff working with the person supported

**Beyond the Main Dashboard:**

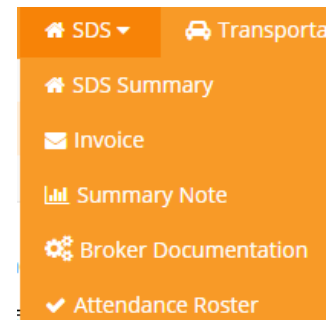
Navigation around the site can be done by using the menu bar to the right side of the window.



The SDS section will be where all information about the Self-Direction Budget and more will be available.

**SDS Summary:** The SDS Summary section will be where you can easily find the following:

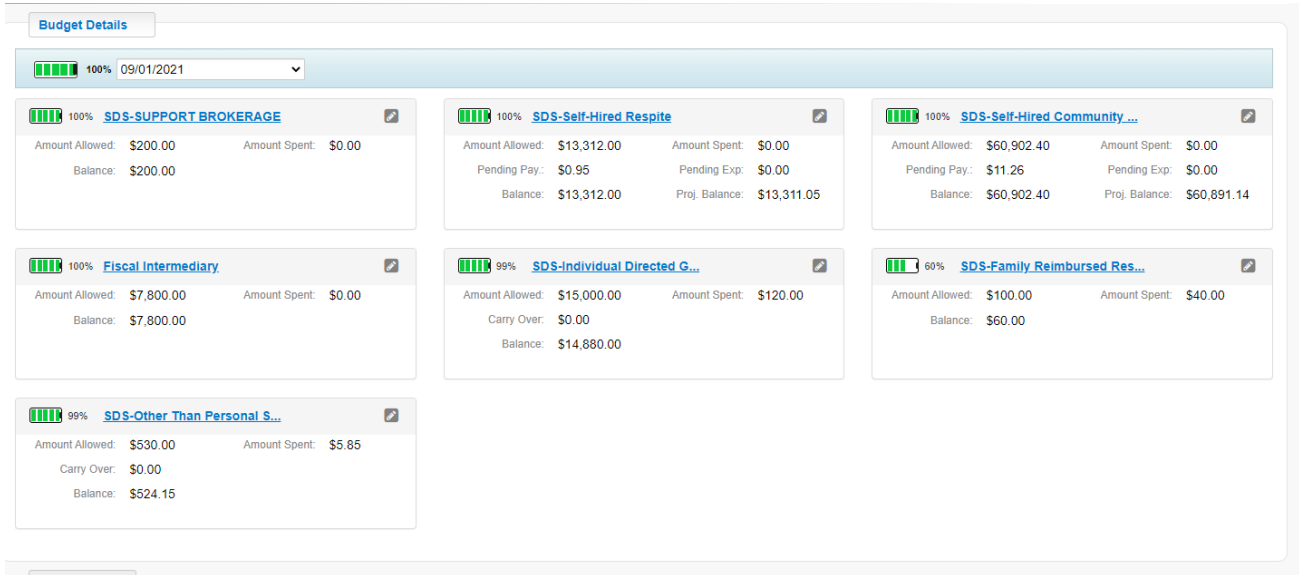
- *Budget Details:* This section will show you a year-to-date real-time balance of all allocated money in the budget. You can see the budgeted amount, amount spent and the balance. Please review to make sure that you are not overspending, and if you need monies moved consult with your Support Broker:



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**Budget Details**



100% 09/01/2021

Category	Amount Allowed	Amount Spent	Balance
SDS-SUPPORT BROKERAGE	\$200.00	\$0.00	\$200.00
SDS-Self-Hired Respite	\$13,312.00	\$0.00	\$13,312.00
SDS-Self-Hired Community...	\$60,902.40	\$0.00	\$60,902.40
Fiscal Intermediary	\$7,800.00	\$0.00	\$7,800.00
SDS-Individual Directed G...	\$15,000.00	\$120.00	\$14,880.00
SDS-Family Reimbursed Res...	\$100.00	\$40.00	\$60.00
SDS-Other Than Personal S...	\$530.00	\$5.85	\$524.15

For programs like IDGS/OTPS that have multiple categories within, you can click the icon in the top right corner of that box to show a summary of the balance of categories.

- **Budget List:** You can click into the budget by clicking the ID on the left → Preview. You can indicate that you have reviewed it by using the checkbox on the right-side.

**Budget List**

BudgetID	Effective Date	Budget Type	Authorized Amount	Calculated Amount	Status	Download Budget	Individual Reviewed
3567	09/01/2021	ANNUAL	\$114,569.00	\$90,044.00	Approved		
3147	03/01/2021	CNBA	\$114,569.00	\$90,044.00	Approved		<input checked="" type="checkbox"/>

When a Start-up Request comes back approved from the DDRO the FI will import the Self-Direction Start-up Budget. Once your Support Broker signs Person Centered Care Services – FI dept., requires you to sign the budget. After you sign, please note the Intake & Benefits Specialist so it can be officially approved in eVero. Once this is completed you can start working with your Support Broker to develop your Initial Self-Direction Budget.

The FI dept., requires all Initial, Amendments (full or CNBA) be reviewed by you before we can review and push to the Regional Office for final review. Sometimes the system requires the FI dept., to import the SD Budget and then everyone is required to preview (sign again) until that specific SD Budget can be used.

- **Service Plan:** This is where you can view the Staff Action Plans for Community Habilitation or Supported Employment (SEMP) – to view click on the effective date on the left. During the year there should be two plans (Annual and Review). These are the plans your Self-Hired Community Habilitation or Self-Hired SEMP staff should be working on. These plans come from the Life Plan you create with your Care Managers. Please ensure this is current and goals/safeguards you would still like to work on.

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Service Plan						
Effective Date	Program	End Date	Type	Status	Individual Reviewed	
04/01/2022	SDS-Self-Hired Community Habilitation		Annual Plan			
02/01/2022	SDS-Self-Hired Community Habilitation	03/31/2022	Plan Review			

- **Monthly Summary List:** In this section you can review your Self-Hired Community Habilitation Monthly Summary Notes. This should be completed by the 10<sup>th</sup> of the following service month. If you have staff work once within a month it would have to be completed. Should you have multiple Self-Hired Staff only one staff needs to be completed. If this is not completed on the 11<sup>th</sup> of the following service month Self-Hired Staff will be suspended until completion. In the monthly summary note we are looking for the following, but not limited to, days worked, progress/regression working on the goals in the plan, behaviors, and plans for the next month. If this is copied and pasted or not in detailed it will be rejected by the FIC.

Monthly Summary List: Oct 2021 - Mar 2022						
Summary Month	Summary ID	Facility Name	Program	Service Plan Date	Status	Individual Reviewed
02/01/2022	22211	MAIN OFFICE	SDS-Self-Hired Community Habilitation	02/01/2022		

- **Broker Agreement:** This is where you can view the Broker Agreement between the you and the broker. This outlines how your Support Broker can support you with your Self-Direction plan. To view click on the date link on the left. This needs to be approved by when a new broker is completed, or changes are made within the Self-Direction Budget Support Broker Tab. Without your signature your Support Broker is unable to put in and bill for services that they provided to you.

Broker Agreement						
Effective Date	Broker Name	End Date	Rate	Amount	Status	Individual Reviewed
02/01/2022			\$20.00	\$200.00		

- **Monthly Expenditure Report:** This is where each month; your FI will approve a document that shows what you have spent during the course of that month. Click on the Month/Year Link on the left to view.

Monthly Expenditure Report : Oct 2021 - Mar 2022			
Summary Date	Total	Status	
Feb 2022	\$0.00		
Jan 2022	\$0.00		

- **Brokerage Billing Summary:** This section will show you the billable services provided by the Broker in a set period. Click the Billing period on the left to see all documented information. This will be deducted from the budget from the brokerage section. For the Support Broker to be paid for services this might be reviewed and signed by you. We review invoices every Wednesday of the month, and Support Brokers are

**Acceptance**

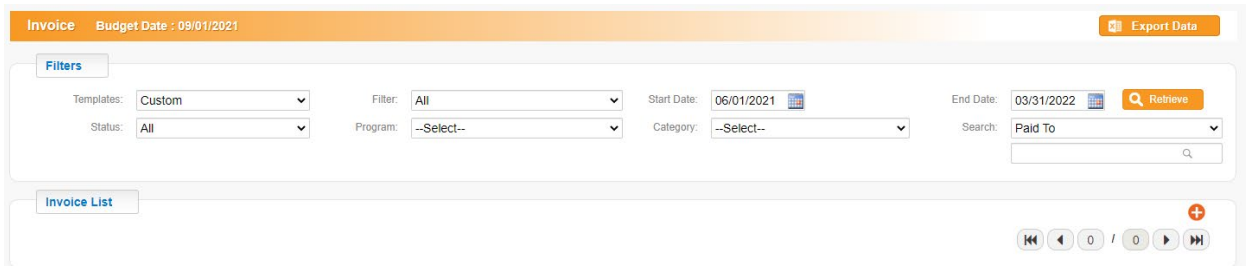
**Equity**

**Support**

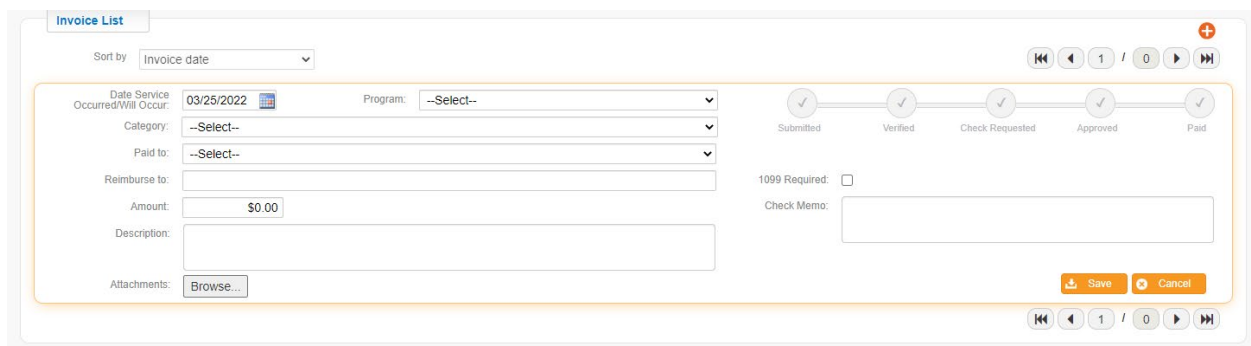
supposed to put in by the 10<sup>th</sup> of the following service month. Should you have any questions about services provided to you please reach out to your assigned Support Broker. As the FI we have 90 days to bill Medicaid for services and pay your Support Broker. *SIDE NOTE: If not signed by you in a timely fashion we are unable to bill and pay for services to your Support Broker.*

Billing Period	Broker Name	Actual Duration	Billable Duration	Hourly Rate	Invoice Amount	Payment Status	Summary Status	Individual Received
02/01/2022- 02/28/2022	[REDACTED]	7 hrs 0 mins	7 hrs 0 mins	\$40.00	\$280.00	Paid		
01/01/2022- 01/31/2022	[REDACTED]	2 hrs 45 mins	2 hrs 45 mins	\$40.00	\$110.00	Paid		

**Invoice:** The invoice tab will take you to the invoice section where you can view and see all requested reimbursements, etc. against all categories in your budget. You will notice that the Invoices are entered individually, so that the FI Team can be sure they have all the information necessary to reimburse/pay the appropriate person, and bill efficiently.



➤ **Entering an invoice:** To enter in a brand-new invoice request, you will locate the orange + in the right-hand corner. Click the button and a new empty box will open up:



Select the Date the Service Occurred/Will Occur: This should be the last date of when the service will occur or has occurred.

Date Service Occurred/Will Occur:

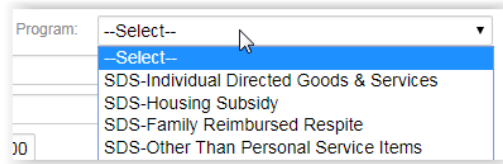


### Acceptance

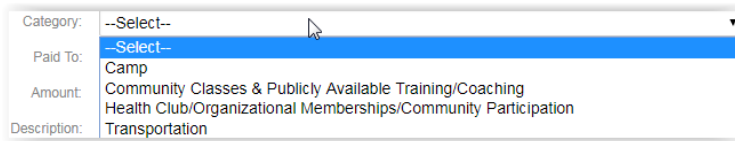
### Equity

### Support

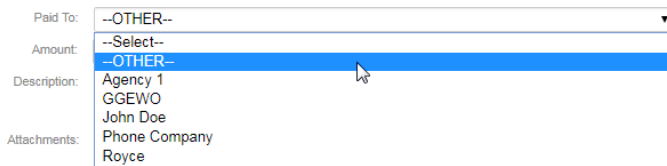
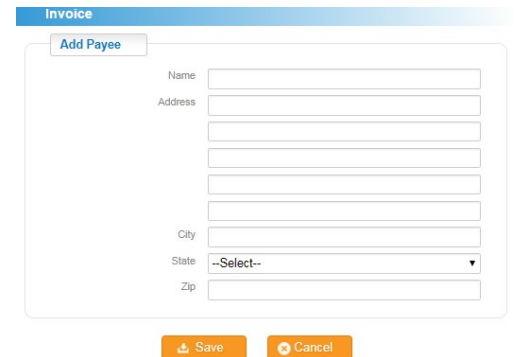
Select the program from the drop down. Please note that only programs authorized in the budget will be available in the drop down.



Select the Category appropriate for the requested invoice. The system will limit your request based on the amount remaining in your budget, so it will be best to be as accurate as possible. Your FI Team can support you or make changes to this if you are unsure. The categories will only reflect those authorized in the budget.



Select “Paid To” – this is who the check will be made out to, so it could be you, or a specific vendor (only if that vendor has been cleared by your FI Team). If you do not see the vendor in the drop down list, you can pick --OTHER-- and then click the Magnifying glass.

A Payee List will come up where you will click the Plus sign to add a vendor. Your FI will then be able to match the vendor to a list that they have or create a new vendor.

The Amount is going to be validated against the amount of money remaining in the budget for that program/category. Please be sure to check this against the receipt.



Description is a required field and should be used to indicate more details about the invoice to help the FI understand what is being requested.



### Acceptance

### Equity


### Support

Attachments: There is a browse button that will allow you to upload an attached PDF or image file. The items attached should provide proof for the invoice to be paid. Please try to be sure the image is as clear as possible.

Attachments:

When you click Browse, be sure to select the location where that file is saved. Note- it’s best to save it with a name that makes sense to help you upload to that invoice. If you have multiple pages or receipts, you can continue to select browse to add more until all are uploaded.

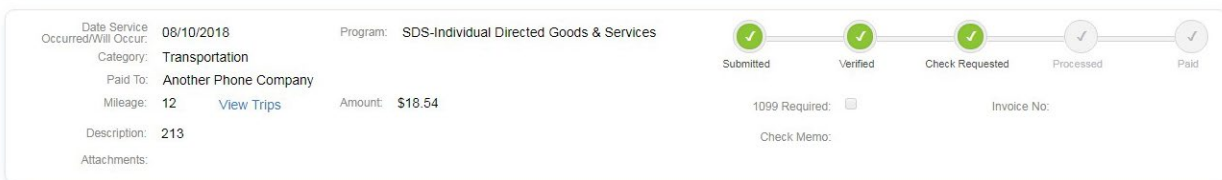
*The 1099 Required, Invoice No, and Check Memo are all the responsibility of the FI Team and should be left as is.*



1099 Required:  Invoice No:   
 Check Memo:

Once complete, click the on  Save button the bottom right.

- **Understanding the Green Checkboxes:** The green checkboxes next to the invoice will explain the workflow of the invoice, in going from you to the FI Team, to getting the check cut. You can hover over each of the green checks to see the date and time stamp of when it was moved into that category.



Date Service Occurred/Will Occur: 08/10/2018      Program: SDS-Individual Directed Goods & Services  
 Category: Transportation  
 Paid To: Another Phone Company  
 Mileage: 12      View Trips      Amount: \$18.54  
 Description: 213  
 Attachments:

Submitted    Verified    Check Requested    Processed    Paid  
 1099 Required:       Invoice No:   
 Check Memo:

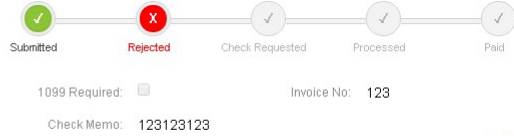
Hovering over any category will show you the date/time/user who completed the action in the workflow. **\*\*Please note that we have 30-45days to review and process invoices from the date of service. Should you invoices get kicked back the clock starts over from the date it was corrected. If you have direct deposit setup for your reimbursements, you will receive sooner than a hard check.**

- Submitted: The submitted check mark means that you have saved the invoice and it is queued up and waiting for review from your FI Team. This is the only status that you can continue to make changes to, by clicking the pencil in the bottom right-hand corner to edit and then click save.
- Verified: The verified status indicates that the FI Team has reviewed the invoice and has agreed that everything is valid. At this point they will channel through their internal processes to queue up for payment.
- Check Requested: The check requested status indicates that the FI Team has requested the check be cut and has queued up in their Finance department to do so.
- Processed: The processed status indicates that the information has been sent to the accounts system for payment to be cut.
- Paid: The Paid Status indicates that the check has been cut.
- Rejected: If an invoice is rejected for some reason, the FI Team will let you know why through notes that they write back to you. You will see this as a Red X instead of a green check.

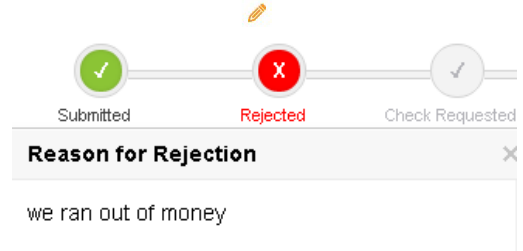
### Acceptance

Date Service Occurred/Will Occur: 07/31/2018  
 Program: SDS-Family Reimbursed Respite  
 Category: Reimbursable Items  
 Paid To: Another Phone Company  
 Amount: \$15.00  
 Description: testing  
 Attachments: [HELLOWORLD](#)

### Equity



### Support



Click on the WORD Rejected to see the comment of why the item could not be paid.

- *Reviewing Previously entered invoices:* Invoices can be checked on using the filters at the top of the page to locate them easily.

**Filters**

Templates: Custom	Filter: All	Start Date: 06/01/2021	End Date: 03/31/2022	<a href="#">Retrieve</a>
Status: All	Program: --Select--	Category: --Select--	Search: Paid To	<input type="text"/>

- Templates:
- Filter:
- Start Date
- End Date
- Status:
- Program:
- Category:
- Search:

Be sure that after selecting any filter you click on the [Retrieve](#) button to refresh the page.

**Payments:** In this section can you review all the status of reimbursements all on one page.

**Payments**

[Payment Listing](#)

Invoice from date: 01/01/2022      Invoice to date: 12/31/2022

Bill Ref. No.	Invoice #	Invoice Date	Program	Category	Payee	Check No.	Check Date	Invoice Amount	Paid Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Acceptance**

**Equity**

**Support**

**Daily Note:** In this section is a place where you can indicate progress or issues with goals, etc. The information is shared with the FI Team.

**Daily Note**

Daily Note List

Start Date

End Date

Search

+

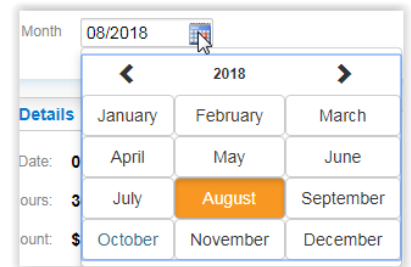
Date

Description

Save
Cancel

**Broker Documentation:**

The Broker Documentation Section is a place to review all documentation and notes entered by the broker and to get details on the amount remaining in the budget. Click the date you wish to read to review, by clicking the date link on the left side. In the FI Dept., we don't require you to review each service day since you review the entire month invoice in the SDS Summary page.



**Broker Documentation**

Month

Month

Budget Details

Budget Date: **09/01/2021**

Annual Hours: **10 hrs 0 mins**

Budget Amount: **\$200.00**

Hours Used: **0 hrs 0 mins**

Amount Used: **\$0.00**

Balance Hours: **10 hrs 0 mins**

Balance Amount: **\$200.00**

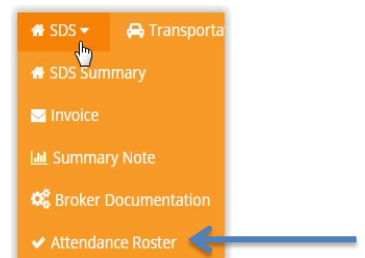
Service Documentation List

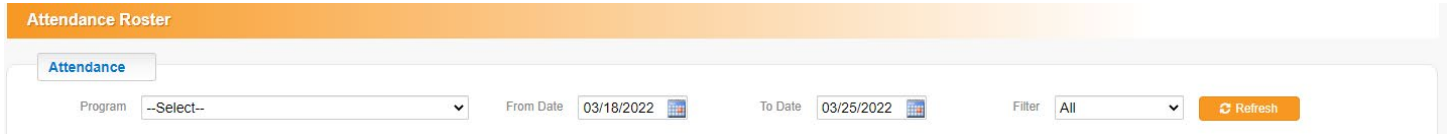
Date	Service Type	Location	Duration	Status
<b>Total Hours:</b>			<b>0 hrs 0 mins</b>	

**Attendance Roster:**

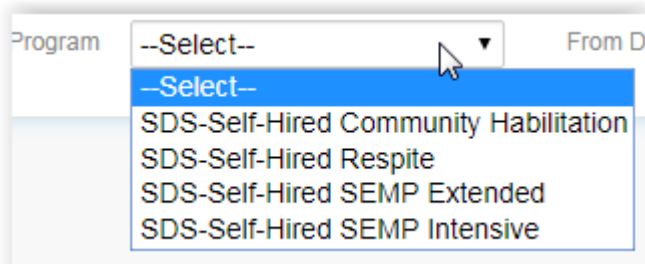
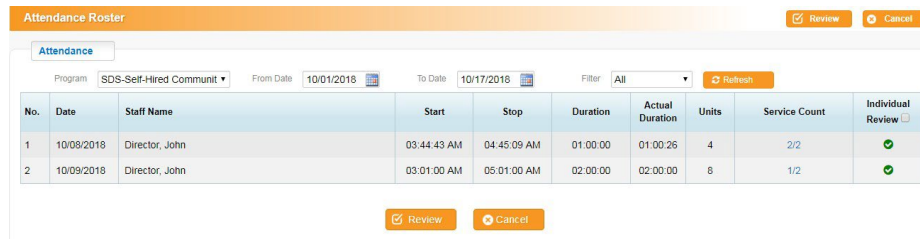
The Attendance Roster screen is to review all billable time provided by staff. Click on the category from the SDS Menu at the top of the Portal.

Select the program from the drop down and adjust the date range you wish to review.





Only programs the person is currently enrolled in will show in the drop down.

No.	Date	Staff Name	Start	Stop	Duration	Actual Duration	Units	Service Count	Individual Review
1	10/08/2018	Director, John	03:44:43 AM	04:45:09 AM	01:00:00	01:00:26	4	2/2	<input checked="" type="checkbox"/>
2	10/09/2018	Director, John	03:01:00 AM	05:01:00 AM	02:00:00	02:00:00	8	1/2	<input checked="" type="checkbox"/>

Click the Refresh button to refresh the information, once you make your selections.

The information indicated includes:

- Date of Service
- Staff who provided the service
- Start Time
- Stop Time
- Duration (real time)
- Billable Duration
- Number of Units
- Services – you can click the link to view comments and responses
- Individual Review Column – check the box if you agree with services provided

Once you check the boxes for the dates you agree with, click the button  to confirm.

If you notice that an error was made, please complete an eVero e-mail template (See appendix) and send to your FIC within 24-hours of the error so they can manually correct within eVero. If not submitted within this timeframe it can result in delay in payment.

All hours **MUST** be approved by you, the Self-Directed Participant/Designee, in order for Self-Hired Staff to be paid in a timely fashion. It is highly recommended that Self-Directed Participant/Designee should review all Self-Hired Staff either daily or the end their staff last day worked of the week. The week runs from Sunday to Saturday. If hours are not approved by the Sunday 11:59PM of a pay week it will result in your Self-Hired

**Acceptance**

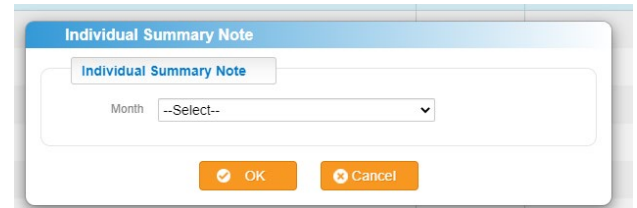
**Equity**

**Support**


Staff not being paid for hours worked on time.

**Individual Summary Note:**

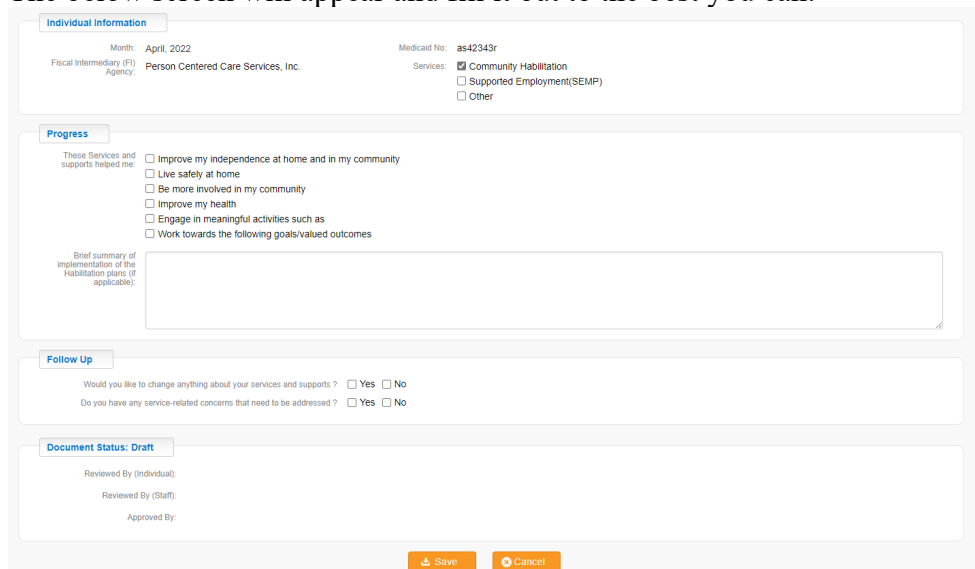
The individual Summary Note (Monthly Summary) must be completed by the Self-Directed Participant/Designee by the 10<sup>th</sup> of the following service month. This should be completed regardless of if you are submitting invoices for reimbursement or have Self-Hired Staff on board working. This is required to show that a Self-Direction plan is being used to support a person.



Individual Summary Note						
Individual Summary Note						
Summary ID	Summary Month	Program	Change in Services	Concern on Services	Status	
417	06/01/2019	Community Habilitation	No	No		
433	08/01/2019	Community Habilitation	No	No		
450	09/01/2019	Community Habilitation,fr	No	No		
1394	10/01/2019	Community Habilitation	No	No		

In order to complete you would click on the  and select the month you are looking to complete and then press okay.

The below screen will appear and fill it out to the best you can:



**Acceptance**

**Equity**

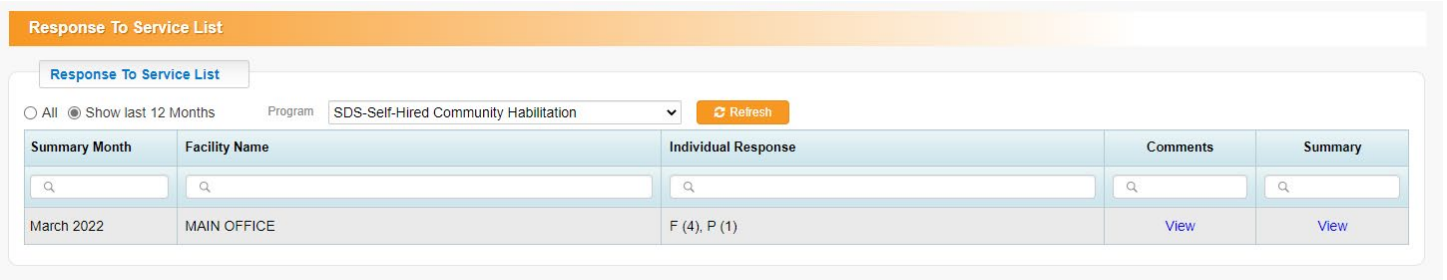
**Support**

Once all is completed you will press  then  to sign the document.

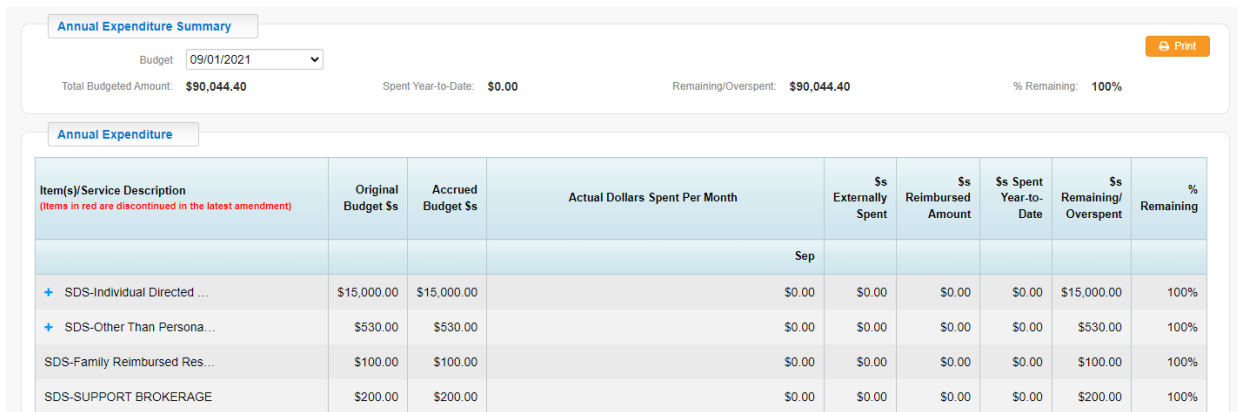
For the FIC to review your reimbursements this needs to be completed and signed. If not, it can result in your invoices being rejected until completion or a delay in processing.

**Response to Service:**

This is a good tool to see how a Self-Directed Participant is improving towards a valued outcome. This tool should be used to better support you with developing your Staff Action Plan on goals.

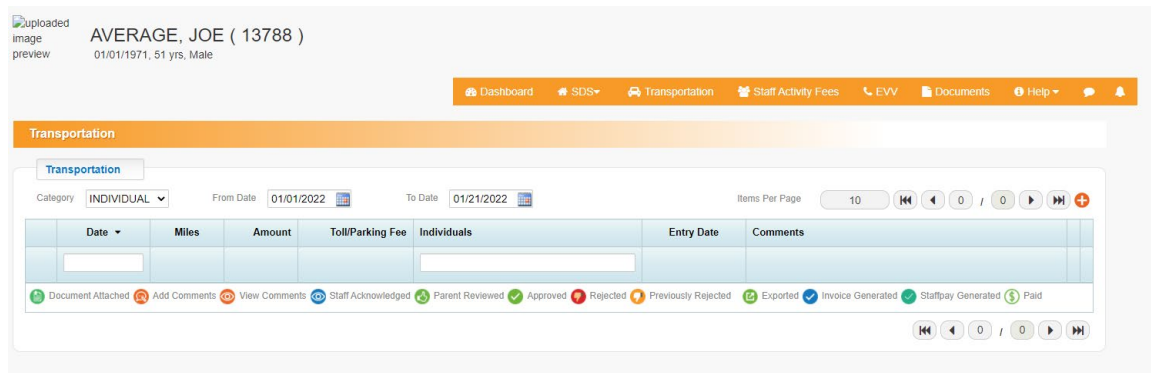


**Yearly Expenditure:** On this screen you can see how much you are using your Self-Direction budget within a year.




**Transportation:**

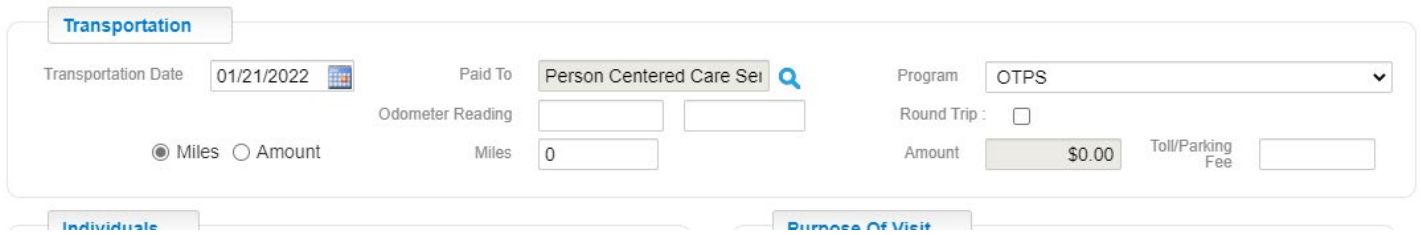
The **transportation tab** will take you to the Trips section where you can view and see all requested reimbursements for travel expenses. This will include travel authorized in the budget.






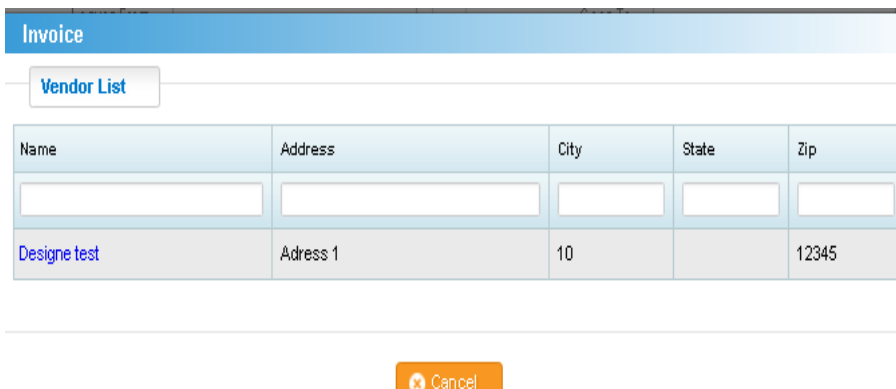
➤ Entering in Transportation Reimbursement for a Self-Directed Participant/Designee

Transportation cost for Individual Directed Goods and Services (IDGS) and Other Than Personal Services (OTPS) will be entered through the “Transportation” tab on your main screen. You can then select the  in the upper right-hand side to begin entering in your transportation costs.



Begin by entering the date the service occurred. The date will default to the current date, but can be changed by manually entering the date, or clicking the calendar and navigating to the date. The “Paid To” section will be defaulted to the identified person in the budget but can include the individual’s Designee(s) as well. Additional payees can be set up by the FI team.

To change the “Paid To” section, click the  icon. This will open the current Designee list. Select the name to make the change and return to the trip screen.



Name	Address	City	State	Zip
Designe test	Adress 1	10		12345

**Acceptance**

**Equity**

**Support**

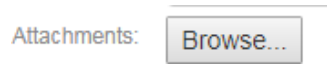
Select the program to be billed by selecting the drop-down arrow. You can enter only what has been authorized in the budget. Do not worry if you are unsure which program transportation is billed against. You can consult with your Fiscal Intermediary Coordinator.





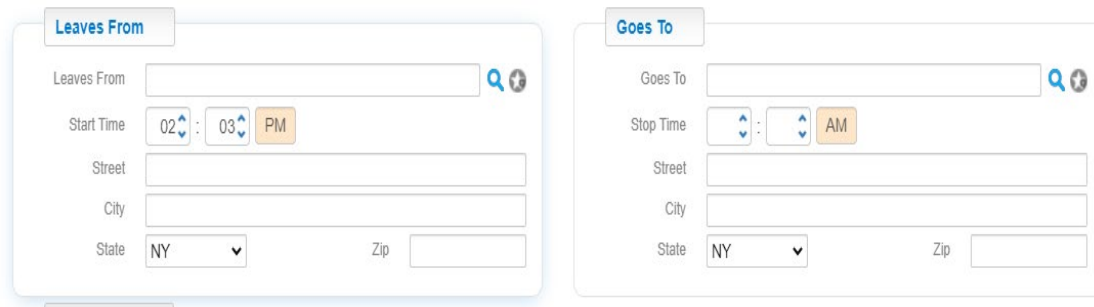
You can enter the cost based on amount of miles driven, or amount paid for transportation costs (Taxi, Uber, Train Bus, etc...). Whichever category you select will limit what you can enter in the following fields. For Miles, you enter the total amount of miles traveled, and it will automatically calculate the amount based on the FI's reimbursement rate. If amount is selected, you will enter the total dollars spent on transportation. Either option will allow you to enter Toll/Parking fees if applicable. You can also click "Round Trip," if this applicable.

An additional requirement when claiming Amount reimbursement is the receipt.

When you click Browse, be sure to select the location where that file is saved. Note- it's best to save it with a name that makes sense to help you upload to that invoice. If you have multiple pages of receipts, you can continue to select browse to add more until all are uploaded



The following section will be your From and To destinations. These sections are free type, and you can enter the address of both locations accordingly. If you click  you can save the address for future use. You can then use the  to search for the address needed.



The purpose of visit is a required element that helps identify why the travel occurs, and ties back to an individual's goal/valued outcome. This can also help identify which billing

**Acceptance**

**Equity**

**Support**

category (IDGS or OTPS) the travel falls under.

**Purpose Of Visit**

In the individual section you want to ensure that it will be coming out of the correct individual Self-Direction budget, which the assigned mileage rate.

**Individuals**

		Mileage Rate
<input checked="" type="checkbox"/>	AVERAGE, JOE	\$0.56

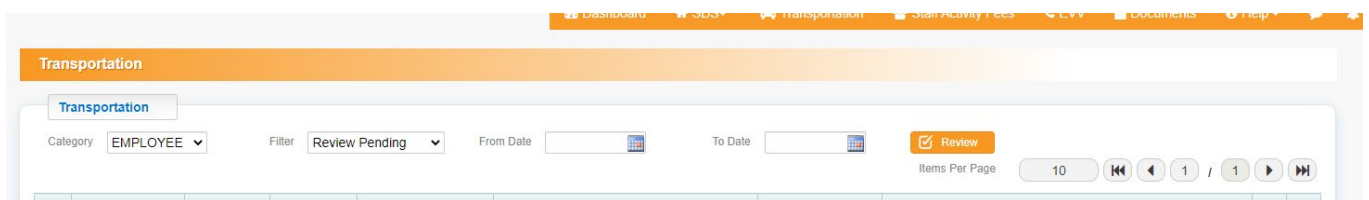
**+ Save and New**

When complete, you can hit

**Close**

travel costs or to return to the Trips screen.

➤ **How to approve Transportation for Self-Hired Staff**



When approving Transportation for Self-Hired Staff please make sure to change the category from Individual to Employee. With the filter “Reviewing Pending,” and the corresponding dates you may be wanting to review.

When clicking on the date you can review the information associated with the trip taken.

<input type="checkbox"/>	Date	Miles	Amount	Toll/Parking Fee	Individuals	Entry Date	Comments		
	08/05/2021	3.6 <small>Aids</small>	\$2.02		AVERAGE, JOE	08/05/2021	shopping		
	08/04/2021	7.8 <small>Aids</small>	\$4.37		AVERAGE, JOE	08/05/2021	snacks		
	04/13/2021	4.9 <small>Aids</small>	\$2.74		AVERAGE, JOE	04/15/2021	Socialization at friends house		

Document Attached 
 Add Comments 
 View Comments 
 Staff Acknowledged 
 Parent Reviewed 
 Approved 
 Rejected 
 Previously Rejected 
 Exported 
 Invoice Generated 
 Staffpay Generated 
 Paid

**Transportation Entry**

Transportation Date: 08/05/2021      Paid To:      Program: IDGS

**Individuals**

<input type="checkbox"/>	Individuals	Mileage Rate
<input checked="" type="checkbox"/>	AVERAGE, JOE	\$0.56

**Purpose Of Visit**

shopping

**Leaves From**

Leaves From: 389 Melba St, Staten Island, NY 10314, USA  
 Start Time:  
 Street: 389 Melba Street  
 City: Staten Island  
 State: NEW YORK      Zip: 10314

**Goes To**

Goes To: 2665 Richmond Ave, Staten Island, NY 10314, USA  
 Stop Time:  
 Street: 2665 Richmond Avenue  
 City: Staten Island  
 State: NEW YORK      Zip: 10314

**Attachments**

---

**Current Status: Rejected**

Rejected by: CHAPMAN MELISSA , 08/05/2021 01:09 PM  
 Rejected Reason: TEST

If all information is correct, you would click , and then make a check mark in the

box  . Once all transportation is reviewed and all boxes are checked you would click

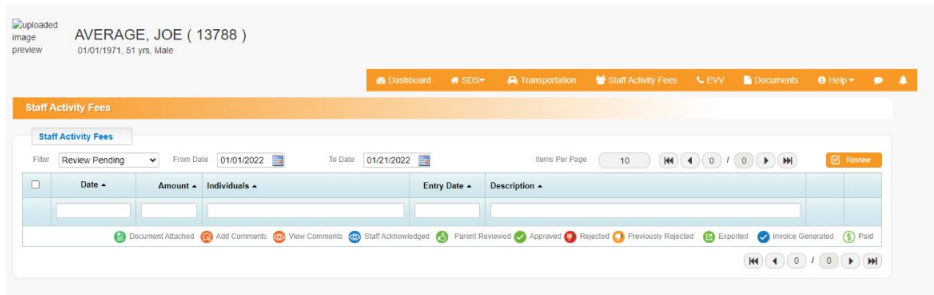


**\*\*Please make sure that before approving Transportation that Self-Hired Staff was on shift for the service otherwise this will be rejected by the FIC when reviewing invoices. Transportation is used when the individual is in the car and Self-Hired Staff is working on a goal/valued outcome listed in the Staff Action plan. Self-Hired Staff are NOT taxi/uber drivers!**

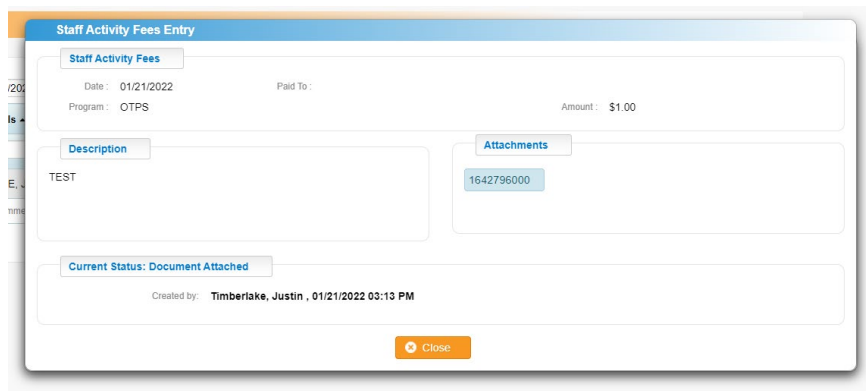
**Staff Activity Fee:**

The **Staff Activity tab** will take you to the staff activity section where you can view and approve expenses your Self-Hired Staff obtained while on shift and working on a goal/valued outcome. As the Self-Directed Participant/Designee you are unable to submit invoices through this tab. You are only able to review. If you are requesting reimbursement for Staff Activity Fee if you laid out money for staff, please continue to place in SDS – Invoice Tab.

➤ **How to approve Staff Activity for Self-Hired Staff:**



To review Self-Hired Staff Activity Fee, click on the date to review the information:



If all information is correct, you would click , and then make a check mark in the box . Once all Staff Activity Fee is reviewed and all boxes are checked you would click



**\*\*Please make sure that before approving Staff Activity Fee that Self-Hired Staff was on shift for the service otherwise this will be rejected by the FIC when reviewing invoices. Kindly ensure no tax and tip are included as well.**



*“We are a not-for-profit organization creating social change within communities by supporting people with disabilities on their search for identity and acceptance.”*

**Acceptance**

**Equity**

**Support**

**eVV:** If you are approved to use other eVV devices you would see the status listed in this section.

**EVV Devices**

Device List

All  Current  Ended

ID	Device Type	Device Code	Type	Location Nickname	Status

**Documents:** This is where you can find all documents pertaining to your services. Documents can include but not limited to, Life Plan, Level of Care, Developmental Disability Profile-2, and more.

### eVero Ed

To learn more on how to navigate in eVero, you can visit [eVero Ed](#) for videos and training.

# Fiscal Intermediary Frequently Asked Questions

## Self-Direction Process

Question	Answer
<b>What is Self-Direction?</b>	Self-Direction allows you the opportunity for you to choose an array of services to live the life you want. the person wants. Self-Direction provides you the flexibility to choose the right supports for you, the staff you want to work with and a schedule that works best for you, that gives you more control over how you manage and structure your life.
<b>How do you apply for Self-Direction?</b>	Attend a Self-Direction Information session at your local Developmental Disability Regional Office (DDRO). Register online – <a href="#">OPWDD Information Sessions</a> <ul style="list-style-type: none"> <li>▪ Your Care Manager will submit a request for self-directed services through the Front Door.</li> <li>▪ Determine your Self-Direction Budget amount by completing the DDP-2 with your Care Manager or the Front Door.</li> <li>▪ Hire a Support Broker and FI</li> <li>▪ Work with your Broker to develop your Start-up (initial) Budget</li> <li>▪ Your Broker will submit your SD Budget for approval</li> </ul>
<b>What is a Start-Up Broker?</b>	The Start-Up Broker is the person that will assist you in developing the initial budget with payment for Brokerage services capped at \$2,400. You will find a Broker through the approved certified list of NYS Brokers on the OPWDD website- <a href="#">NYS Certified Authorized Brokers</a>
<b>What is the FI and what do they do?</b>	The Fiscal Intermediary or FI, works with the person to complete billing and payment for goods and services identified in the budget. An FI manages funds, makes payments, and accounts for expenditures made on behalf of the person. The FI is responsible for; <ul style="list-style-type: none"> <li>▪ Billing and Payment of approved good and services</li> <li>▪ Fiscal Accounting and Reporting</li> <li>▪ Medicaid and Corporate Compliance</li> <li>▪ Administrative Supports</li> <li>▪ Review of budgets and amendments</li> <li>▪ Serve as “Employer of Record”</li> </ul>
<b>How do I get started in obtaining Fiscal Intermediary Services?</b>	You or your Broker will contact PCCS Fiscal Intermediary in scheduling an assessment. The assessment is scheduled to determine if you understand self-direction, what it entails and on your expectations as the self-directing participant. A letter will then be sent as to the approval or denial of acceptance at PCCS FI.
<b>What could be a reason that I would not be approved for FI services.</b>	If you do not pass the assessment, it is determined that PCCS is unable to provide services because you are unable to identify what Self Direction is and the responsibilities required in self-directing your services.
<b>What do I do if I get denied?</b>	You can attend a Self-Direction Informational session in order to gain the information required and take the assessment again.
<b>What do I do if get accepted?</b>	Upon being accepted, PCCS FI will work with the Broker and Care Manager to obtain needed documents. Your broker will develop the Start-Up budget. The FI will then review and submit to OPWDD for approval. Once the approval for the Start-Up budget has been granted. Your Broker will then work with you in developing the full SD budget.



**Acceptance**

**Equity**

**Support**

<p><b>What documents do I need to be enrolled in PCCS FI?</b></p>	<p>Documents will be requested from the Care Manager but if you have, you can submit as well. Documents required include.</p> <ul style="list-style-type: none"> <li>▪ Current Life Plan</li> <li>▪ DDP-2s</li> <li>▪ LOC</li> <li>▪ NOD</li> <li>▪ Psychological/Psychosocial</li> <li>▪ Picture of the Self-Directed Participant</li> <li>▪ Certificate of Attendance of the SD 101 with OPWDD</li> </ul>
<p><b>When could I begin self-directing?</b></p>	<p>Once you have approved for your Annual budget and after having your Launch meeting with your Circle of Support (COS) Team.</p>
<p><b>What is a COS team?</b></p>	<p>The Circle of Support (COS) is a group of advisors chosen by the self-directing person to help create a support and spending plan by identifying goals and needs. The COS is required to meet at least two times per year.</p> <p><b>A Circle of Support must include:</b></p> <ul style="list-style-type: none"> <li>▪ The person self-directing services</li> <li>▪ Broker</li> <li>▪ Care Manager (CM)</li> </ul> <p><b>Other members may include:</b></p> <ul style="list-style-type: none"> <li>▪ Family members, friends</li> <li>▪ Staff supporting the self-directing person</li> <li>▪ Anyone the self-directing person trusts to provide guidance</li> </ul>

## The Self-Direction Budget

Question	Answer
<p><b>How is the budget created?</b></p>	<p>The budget is created by your Broker. Your Broker will coordinate a Pre-Planning meeting to discuss the potentials need and services to develop the budget.</p>
<p><b>What is the budget based on?</b></p>	<p>The budget is based on the Developmental Disability Profile-2 (DPP-2) completed by your Care Manager. The DPP-2s identifies the person’s capabilities and three (3) scores are generated:</p> <ul style="list-style-type: none"> <li>▪ Behavior</li> <li>▪ Health</li> <li>▪ Adaptive</li> </ul> <p>These scores indicates the amount a person will receive in their SD budget.</p>
<p><b>What is the maximum/minimum pay rate I can give my staff?</b></p>	<p>The maximum pay for CH-SHS is \$33.75 per hour. For SHS-Respite, is \$22.03 per hour. The minimum wage that can be paid to a SHS is \$15.00 per hour. For more information, visit the <a href="#">NYS Reimbursement Rate Reform website</a></p>
<p><b>How long does it take for the Budget and the entire SD process (from Start-Up to Support) to be approved?</b></p>	<p>From start to finish, it can take between 5-7 months before being able to self-direct services.</p>

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<b>How long does it take to be reimbursed for services (FRR, transportation, mileage, etc.)?</b>	Reimbursements can take between 30-45 days after receipt of the reimbursements before checks are received via direct deposit.
<b>How long does it take for vendor invoices to be approved?</b>	Just like reimbursements, the vendor payments can take between 30-45 days from the date of submission before payments are received. It is the responsibility of the participant to upload all invoices unto eVero for the processing of payments. Invoices can be uploaded no more than 60 days from the date of service in order to remain eligible for processing and payment.
<b>Is there a list of items documented that can be submitted for reimbursements through FSS?</b>	FSS, (Family Support Services) must be placed in the SD budget under Direct Provider Purchase tab in order to be eligible for reimbursements. Receipts must be obtained and submitted to the Care Manager. The Care Manager will then submit the receipts to OPWDD for processing.
<b>How would I get a Community Class/Membership approved?</b>	The Participant/Designee would submit a community class form along with providing the dept with a flyer or a website that lists services/prices/service location etc. Once the dept receives, the information will be reviewed along with their Life Plan / Staff Action Plan to confirm there is a valued outcome that aligns with that class. Once the review is complete, the person and their support team are notified via email whether the class is approved for them specifically or not and the reason for denial if denied. The community class is then added to the <a href="#">Approved Community vendor List</a> .
<b>How would I get a CAMP approved under IDGS?</b>	As long as the correct permit is on file, and there is reference to the camp in the Life Plan (valued outcome), and of course funds in this line in the budget, the camp can be approved. If the camp cannot be funded under IDGS, it is possible for it to be reimbursed through Family Reimbursed Respite.
<b>What is a MOU? How can I work with the vendor to setup an MOU?</b>	A Memorandum of Understanding (MOU) is a contract between the Vendor and the FI agency which outlines what is needed in order to send the Vendor direct payment. The MOU is not per Participant.

## Self-Hired Staff Q&A Sheet

Question	Answer
<b>If staff was recently terminated, and I would like to rehire them. Do they have to go through the full hiring process?</b>	Yes
<b>Are staff entitled to benefits?</b>	Yes, full-time employees are entitled to benefits. Full time is considered 30+ hours. Staff who work 30-39 qualifies for only health insurance. SHS who work 40 hours employee qualifies for health, dental and vision insurance
<b>Can the SD Participant/Designee have access to Paycom?</b>	No, Self-Hired staff are only granted access to this system. This system contains sensitive information regarding staff.

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<b>How can my SHS receive a wage increase?</b>	The Support broker must amend the SD budget adding the new rate. The designee must submit a paper staff evaluation form justifying staffs new wage increase.
<b>Can my staff be paid retroactively since the budget came back approved?</b>	Staff rate changes goes into effect, the following pay period after the budget is approved by the DDRO.
<b>Will my staff be paid for attending a training?</b>	Staff will be paid for all assigned trainings.
<b>Should my staff stay clocked in if they are not assisting in a community class.</b>	Staff should be clocked in, but services must be stopped since they are not assisting the participant.
<b>Do I have to complete the community habilitation monthly summary note?</b>	No, Com Hab monthly summary notes must be completed by Com Hab staff. The SD participant/Designee completed the Individual Monthly summary note
<b>Do all my staff have to complete a Com Hab monthly note?</b>	No, only one staff must complete a monthly summary note for the month services were provided.
<b>If my staff pays out-of-pocket for an expense for the participant can staff be reimbursed?</b>	No, A self-directing person’s activity fees or related supplies for an activity cannot be reimbursed. This expense must be paid for by the SD Participant/Designee
<b>Can my staff be scheduled to work if the participant is home sick from school?</b>	Self-Hired Staff are not to work when school is in session even if the Participant is home sick. If schools are closed, Self-Hired Staff can be on shift
<b>When will my staff be paid for their late shift?</b>	Late hours submitted to the FI Coordinator will be paid out on the following pay period.
<b>Can I have multiple staff assign to the same line in the budget?</b>	Yes, as long both staff combined do not exceed the approved weekly hours in the SD budget
<b>What happens if my staff goes over the number of hours allowed in the Budget per week</b>	Your SD broker should be notified to amend the budget adding additional funds to Com Hab/Respite to accommodates staff’s schedule. ** SHS cannot work over 40 hours a week
<b>Can I increase the number of hours that my staff works per week? How?</b>	Yes, please notify your broker to amend the budget. A SHS information form must be completed and sent to your FIC reflecting staff’s new schedule.
<b>If my staff works less hours one week, can they make up the hours the following week as long as they don’t go over the total combined hours allowed in the Budget for a 2-week period</b>	Yes
<b>Can SHS work overnight respite?</b>	In the participants life plan, there must be justification documented why respite services is needed overnight.
<b>Where can my staff find their w2?</b>	Staff must log into Paycom, select Payroll, then select Year-End Tax Form
<b>How do my staff request time off?</b>	Staff must log into Paycom, select time requests, choose option request time off, in additional the time off request form must be completed by staff, signed and dated by the designee, and submitted to the assigned FIC

## Fringe Rate Q&A Sheet

Question	Answer
<b>What are fringe rates?</b>	An FI’s fringe rate are employee-related costs. They include the hiring and retaining of your employees. For example, you would like to offer your employee benefits such as medical and dental insurance or even holiday or vacation pay, that is the fringe rate. A pool of funds for employee related costs.
<b>How do I know how much I will pay in FI fringe rate?</b>	The amount you pay in fringe rates is based on two things: your chosen FI’s fringe rate and your self-hired staff’s pay rate and hours. The higher the pay rate and hours are, the higher your total fringe could be.
<b>How much is too much when it comes to fringe rates.</b>	When you’re pursuing self-direction, you are thinking about staff and community classes rather than on fringe rates. Therefore, it is still important to factor them in. If you forget to factor them in, the budget PRA might not look so great when your \$25 an hr, 40 hr work week staff has eaten up all your Self-Direction budget.
<b>Do I still have to pay a fringe rate after my budget has been approved?</b>	Yes. It is not a one-shot fee. You still must pay a fringe rate for your budget.
<b>Does the fringe rate also cover my self-hired staff’s training?</b>	Yes. SHS time spent receiving training constitutes as “time worked” and therefore paid as “time worked”. Although employee training time does not represent billable service time, the employment costs (wages + fringe assessment) associated with such training do represent a reimbursable cost of delivering the self-hired service. As such, training-related employment costs may be included in the billed service charges for the service date the employee training is attended. If there were no claimable service units for the person on that particular day (example, all of the person’s self-hired community habilitation staff attended training that day, there was no substitute staff, and, therefore, the person did not receive any billable community habilitation service units that day), the training-related employment costs may be added to the regular charges on the next day claimable service units were delivered.
<b>What is PCCS Fringe Rate?</b>	28%

## Forms

Name of Form	Link to Form	Purpose of Form
Family Reimbursement Respite Form (FRR)	<a href="#">FRR Form</a>	This form is used to request for reimbursement for Family Reimbursed Respite. If you are clicking “adding service,” then you don’t need to include this as an attachment.
Vendor Form	<a href="#">Vendor Form</a>	This form can be used should the vendor not have their own invoice with the provided information needed to be reimbursed.
Empower (eVero) Family Portal Request Form	<a href="#">eMPower Family Portal Request Form</a>	This form is used if you choose to have Support Brokers or other members of your COS gain access to your personal eVero portal account.

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SD Termination Form	<a href="#">Termination of Service (Broker/Fiscal Intermediary)</a>	To be used if you would like to switch Support Brokers, Fiscal Intermediary Agency, or Terminate Self-Direction Services completely.
Community Class Request Form	<a href="#">Community Class Request Form</a>	This form is if you are thinking of taking a new Community Class and will like it to be reviewed by the FI Team for reimbursement.
Employee Time Off Request	<a href="#">Employee Time OFF Request</a>	If you Self-Hired Staff want to take time off they would have to request in Paycom, alongside have you review, sign, and send the form to the FIC for your case.
eVero Manual Template	<a href="#">eVero Manual Templates</a>	If your Self-Hired Staff have issues with eVero punching in/out or documenting services this would be provided to the FIC for your case to manually correct in eVero for you and your Self-Hired Staff
SHS Disciplinary Action Guidance Form	<a href="#">SHS Guidance Form</a>	Should you choose to write up your Self-Hired Staff for misconduct this form would be submitted and sent to the FI dept. for the Self-Hired Staff HR file.
SHS Information Sheet	<a href="#">SHS Information Sheet</a>	This is used to hire Self-Hired Staff to inform the Fiscal Intermediary Dept. what department, wage, schedule, and more.
SHS Status Form	<a href="#">SHS Status Form</a>	This is used to inform the Fiscal Intermediary Coordinator the status of your Self-Hired Staff. If you would like to terminate, resign, on leave/inactive, or active.
Live-In Caregiver Agreement	<a href="#">Live-In Caregiver Agreement</a>	This is a sample on how a LIC contract can be written, should you choose to have this service in your Self-Direction Budget.
Paid Neighbor Contract	<a href="#">Paid Neighbor Contract</a>	This is a sample on how a Paid Neighbor contract can be written, should you choose to have this service in your Self-Direction Budget.
Written-Tool DSP Evaluation	<a href="#">Written DSP Evaluation Tool</a>	Raise ONLY: If you chose to give your Self-Hired Staff a raise, this needs to be completed alongside the CNBA or amendment your Support Broker will be completing.
New Hire Manual	<a href="#">2022-2023 NH Training Manual</a>	Self-Hired Staff Guide to work with the Self-Directed Participant & regulations/policies within Person Centered Care Services.
Vendor MOU	<a href="#">Vendor MOU</a>	A Memorandum of Understanding (MOU) is a contract between the Vendor and the FI agency

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Broker MOU	<a href="#">Broker MOU</a>	A Memorandum of Understanding (MOU) is a contract between the Support Broker and the FI agency
FIC Change Request	<a href="#">FIC Change Request Form</a>	Should you choose to work with a different FIC, this form should be completed and provided to Director of Self-Directed Supports.

## Resources

SD Provider Manual-Revised 3/2022	<a href="#">sd_guidance-final_march2022.pdf</a>
OPWDD ADMs	<a href="#">Regulations &amp; Guidance   Office for People with Developmental Disabilities (ny.gov)</a>
eVero ED	<a href="#">eVero Training Platform</a>
PCCS Website/Forms	<a href="#">» Resource Library (pccsny.org)</a>

## Regulations

ADM Date	Title	Purpose
3/10/22	<p><b>Housing Subsidy Program</b></p> <p><a href="https://opwdd.ny.gov/system/files/documents/2022/03/adm-housing-subsidy-final-3.10.22.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/adm-housing-subsidy-final-3.10.22.pdf</a></p> <p><b>Attachments:</b></p> <p><a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-a-quality-assurance-qa-expectations-checklist-11.5.2021.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-a-quality-assurance-qa-expectations-checklist-11.5.2021.pdf</a></p> <p><a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-b-participation-agreement-11.8.2021.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-b-participation-agreement-11.8.2021.pdf</a></p> <p><a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-c-opwdd-housing-subsidy-and-transition-stipend-application-reviewed-11.8.2021.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-c-opwdd-housing-subsidy-and-transition-stipend-application-reviewed-11.8.2021.pdf</a></p> <p><a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-d-housing-subsidy-budget-and-instructions-11-10-21-final-clean.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-d-housing-subsidy-budget-and-instructions-11-10-21-final-clean.pdf</a></p> <p><a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-e-pilot-program-2.8.22.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-e-pilot-program-2.8.22.pdf</a></p>	This ADM outlines information on OPWDD’s Housing Subsidy program intended to support eligible individuals who choose to live independently in the community, and who are or will be financially and legally responsible for their housing unit.
3/10/22	<p><b>Family Support Services (FSS)</b></p> <p><a href="https://opwdd.ny.gov/system/files/documents/2022/03/fss-final-adm-3.9.22_1.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/fss-final-adm-3.9.22_1.pdf</a></p>	This ADM outlines the requirements for the New York State Office for People with Developmental Disabilities’ (OPWDD) Family Support



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	<p><b>Attachments:</b>  <a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-a-family-reimbursement-application.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-a-family-reimbursement-application.pdf</a>   <a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-b-respite-verification-form.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-b-respite-verification-form.pdf</a>   <a href="#">Family reimbursement Tracker</a>   <a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-d-medicaid-services-chart.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-d-medicaid-services-chart.pdf</a></p>	<p>Services (FSS) Family Reimbursement program.</p>
3/1/22	<p><b>Levels of Supervision</b>   <a href="https://opwdd.ny.gov/system/files/documents/2022/03/adm-level-of-supervision-final-3.1.22.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/adm-level-of-supervision-final-3.1.22.pdf</a>   <a href="https://opwdd.ny.gov/system/files/documents/2022/03/attachment-1-summary-of-levels-of-supervision-final-feb-18-2022.pdf">https://opwdd.ny.gov/system/files/documents/2022/03/attachment-1-summary-of-levels-of-supervision-final-feb-18-2022.pdf</a></p>	<p>This ADM establishes consistent terminology, definitions, and factors to consider when planning, documenting, and delivering the necessary Levels of Supervision (LOS) to individuals receiving services.</p>
8/27/21	<p><b>Support Broker Authorization standards</b>   <a href="#">support-broker-adm-8.27.21.pdf (ny.gov)</a></p>	<p>This ADM outlines Support Broker Authorization standards required to meet billing, programmatic, and documentary for Brokerage services.</p>
7/28/21	<p><b>Service Documentation for Assistive Technology</b>  <a href="#">ADM 2021-04 Service Documentation for Assistive Technology, Environmental Modification, and Vehicle Modification Services Provided to Individuals Enrolled in the Office for People With Developmental Disabilities Home and Community Based Services Waiver</a>   <a href="#">Guidance and Review Sheet for AT, E-Mod, V-Mod</a></p>	<p>This ADM describes Assistive Technology (AT), Environmental Modification (E-Mod), and Vehicle Modification (V-Mod) service documentation requirements that support a Medicaid or state-payment claim.</p>
7/28/21	<p><b>Requirements for using technology to remotely deliver OPWDD services</b>   <a href="#">ADM 2021-03 Ability to use Technology to Remotely Deliver Home and Community-Based Services (HCBS)</a></p>	<p>This ADM describes requirements for Telehealth services.</p>
7/1/19	<p>Service Documentation for Support Brokerage   <a href="#">ADM #2019-06 Service Documentation for Support Brokerage Services</a></p>	<p>This ADM describes the service, program and payment standards, and service documentation requirements to support a provider’s claim for</p>



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		Medicaid reimbursement for Support Brokerage. Support Brokerage Services.
7/1/19	Service Documentation for Fiscal Intermediary Services  <a href="#">ADM #2019-07 Service Documentation for Fiscal Intermediary Services</a>	This ADM describes the payment standards and service documentation requirements to support a provider’s claim for reimbursement for Fiscal Intermediary services.
5/9/19	<b>Staff Action Plans</b>  <a href="#">ADM #2018-09R Staff Action Plan Program and Billing Requirements</a>	This ADM describes describing Staff Action Plan requirements as they relate to the Life Plan.
4/10/19	Out-of-State Waiver Services  <a href="#">ADM #2019-02R Permissible Out-of-State or Country Home and Community-Based Services (HCBS) Waiver Services Delivery</a>	This ADM describes how waiver services to be delivered outside of New York State or the United States.
5/11/16	<a href="#">ADM #2016-03 Live-In Caregiver Service Documentation</a>	This ADM describes the payment standards and service documentation requirements to support a provider’s claim for reimbursement of the Live-in Caregiver (LIC) room and board supplement when individuals self-direct their <b>services</b> .
4/10/15	<b>Individuals Goods and Services IDGS</b>  <a href="#">ADM #2015-05 Service Documentation for Individual Directed Goods and Services (IDGS)</a>  <a href="#">Individual Directed Goods and Services (IDGS) Definitions Chart</a>	This ADM describes the payment standards and service documentation requirements to support a provider’s claim for reimbursement for Individual Directed Goods and Services.
3/20/15	Community Transition Stipend (CTS)  <a href="#">ADM #2015-02 Service Documentation for Community Transition Services</a>  <a href="#">Amendment</a>	Describes the program standards, payment standards, and service delivery and service documentation requirements to support a provider’s claim for reimbursement for Community Transition Services (CTS) with current amendment.



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7/1/14	<p><b>Core Competencies and Evaluations</b></p> <p><a href="#">ADM #2014-03 Service Provider Implementation of the NADSP Code of Ethics, NUS DSP Core Competencies and NYS DSP Performance Evaluations</a></p>	<p>Describes DSPs in reference to related documents, offer assistance, and advise all service providers to the NADSP Code of Ethics, NYS DSP Core Competencies, and the NYS DSP Performance Evaluations.</p>
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*We hope this guide is helpful. If you have any questions, please feel free to reach out your Fiscal Intermediary Coordinator.*