

AGED AND DISABLED WAIVER RECIPIENT USER GUIDE

Program Overview

Aged and Disabled Waiver Program (ADW): ADW is a program offered by West Virginia Medicaid. The program provides home and community-based services to West Virginia residents who are determined to be eligible to participate in the program. A person must be at least 18 years of age and choose home and community-based services rather than nursing home placement. Participants must have the need for a “nursing home” level of care or the same type of needs as someone living in a nursing home. You do not have to go into a nursing home to receive Waiver as you cannot receive Waiver services in a nursing home. Services are only provided in your home or to places outside of your home such as the pharmacy, the grocery store, etc. (as indicated in the Medicaid policy).

Eligibility

Eligibility: You must have both financial and medical eligibility before receiving any services in the ADW program. Medical and financial eligibility must be evaluated and determined every year.

Referral – First, you must have a referral from your physician. Once the Utilization Management Contractor (UMC) receives this referral they will send you a letter with instructions on determining financial eligibility.

Financial eligibility- You will need to go to your local Department of Health and Human Resources (DHHR) office to determine financial eligibility upon application and every year after. If you have a Case Manager, it is your Case Manager’s responsibility to assist in this process. Ask your Case Manager for help.

Medical eligibility- A nurse from the Utilization Management Contractor (UMC) will come to your home to evaluate you upon application and once per year. You must first have a referral from your physician each year as you re-apply. You will receive a notice in the mail regarding the decision on your medical eligibility. If you have a Case Manager, your Case Manager will help you with the referral every year.

Person Centered Services

Person-Centered Planning: Person-centered planning (PCP) is a way to help you plan what services you want, along with who will help you with those services. The person-centered plan is your plan, written to address your needs, goals and preferences.

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Person-centered (PC) planning has four steps:

- Your assessment
- Your ADW service planning meeting
- Writing your ADW service plan
- Reviewing your ADW service plan

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

Person-centered service planning meetings- This is the meeting with you and about you. You can invite anyone you want. In the meeting, you should talk about the kinds of services you want, where you want them, and who you want to have provide them. Your choices should include the services along with who you want to live with and where you want to live. You can ask for a meeting to change or update your person-centered service plan.

Writing your ADW service plan– Your plan should have the following:

- Where you choose to live and get your services.
- Your strengths, what you like best, and what you need.
- The supports you need, both paid and informal.
- Goals you want to meet, along with how you will know the goals were met.
- Any problems you might have and plans to deal with them.
- A plan for making sure you are doing the things you need to do that are on your service plan.
- Your plan should be written so you understand what it says.
- After you understand and agree to what is in the plan, you and the other people who came to the meeting, will sign your plan. Everyone gets a copy of the plan.

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Reviewing your ADW service plan-Your plan should be reviewed at least every six months. If you need to change how you are getting help or services, or something in your life changes, you can ask for a meeting to review your plan at any time and a meeting will be held.

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

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

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

Service Delivery Model Options

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Program Options: There are two (2) options for services in the ADW program: Traditional or Personal Options.

Traditional: All services are provided by an agency. The staff are employees of the agency. Many agencies honor requests for specific staff and try to match staff to your requests. At times, it is hard to match specific staff with your requested characteristics so it is important to let the agency know if you have alternatives.

Personal Options: You self-direct your services. In this program, you may hire your own staff. Your staff may be either a family member or friend (you cannot hire a spouse). You may choose services and staff based on a budget that fits your medical needs. A fiscal employer agent will help you with the personnel and payroll activities. You are given a budget and you choose the services you need within the budget. You may also have Case Management Service while on the Personal Options program.

With either service delivery model, you are entitled to Case Management services (at no cost to you) via an agency you select. You are not required to utilize Case Management services with Personal Options but you are required to have it with Traditional Services.

Covered Services

ADW services include Case Management, Personal Attendant Services, Skilled Nursing and Non-Medical Transportation Services:

Case Management: The Case Manager is responsible for your services, health, and safety, linking you to the services you need and developing a Service Plan to fit your unique needs. Expect to hear from the Case Manager at least monthly by telephone call. If you have the need, the Case Manager will contact you more frequently. He/she will conduct an annual assessment and a six-month review of your needs. If you need assistance, you should contact your Case Manager directly. The Case Manager should talk with you about your services and your needs. He/she may ask about the frequency your Personal Attendant (PA) comes to your home, activities he/she performs in your home, your unmet needs and changes in your medical needs. Your Case Manager may assist you with advocacy with the PA agency, accessing community resources or other things that you might need. It is important to let the Case Manager know when you need help. It is also important to tell your Case Manager when you get any letters or phone calls from the DHHR about your financial reviews. Also, if at any time you would like to transfer agencies for Personal Attendant services or for Case Management services, or to change to a different service delivery model, your Case Manager may assist you.

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Personal Attendant (PA or Worker): Your PA should come to your home to assist you with activities such as bathing, cooking your meals, grocery shopping, laundry, or other activities on your Personal Attendant Log or (PAL). Your PA must not perform activities that are not on your plan. Your nurse monitors the activities that your PA performs and trains the PA on your special needs. If you are having problems with your PA, contact the agency or your nurse. It is important to let your Case Manager know about any problems as well.

A person on the ADW must receive PA Services on a monthly basis, unless temporarily in a nursing home, hospital, or other inpatient medical facility.

Your workers should never eat your food, have dinner with you, expect you to pay for lunch or dinner, expect money or gifts from you, take your personal belongings or money, treat you disrespectfully or harm you in any way. If this happens, you should tell the agency immediately. It is very personal when a Personal Attendant comes to your home but you must remember that this person is a paid professional. He/she is not making a “social visit” so the Personal Attendant should not have the same “perks” as a friend in your home. You should expect professional behavior from the Personal Attendant while he/she is in your home.

The agency must let you know when to expect the PA. Ask the agency for a schedule. The schedule should be the PAL. It has on there what days the PA is to come and what time the PA is to show up and leave. It is important for you to report to the agency if a PA does not come to your home when scheduled or if he/she leaves your home early. Only sign documentation for times when the PA or worker is there and when he/she did the activity on the form. If the Personal Attendant watches television instead of making your meal, you should report this to the agency. Your worker is there to help you.

Skilled Nursing: A nurse will come to your home to assess your needs. Expect the nurse to do an assessment every six months. If you have new issues or needs, the nurse may assess you more frequently. The nurse will monitor your PAL after services have been provided (weekly, every two (2) weeks or monthly).

The nurse will develop a PAL specifically for you and will assist the Case Manager and you in developing the Service Plan. The plan will tell the PA what areas he/she needs to assist with and how to do it. Look at your plan to see what you need and check to see that the Personal Attendant is doing what is on your plan. Tell your nurse when you have any changes in your condition.

Non-Medical Transportation: This service provides reimbursement for Personal Attendants that perform essential errands for/or with a person receiving ADW services or community activities with a person. The PA should not travel for his/her purposes but only travel for your needs that are on your Service Plan. The transportation services are for you and no one else, not your family, friends, or pets. If you have family, neighbors, friends, or community agencies that can provide this service,

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without charge, it must be used first. You may be transported by the PA to participate in community activities or run errands as listed in your Service Plan. Mileage can be charged for essential errands and community activities related to the Service Plan. Essential errands should be completed before mileage is used for community activities to ensure your needs are met. This service may not be utilized for Medical appointments that are paid for by Medicaid. There is a cap amount on the number of miles that can be billed.

Staff and Agency Requirements

Requirements: Both agencies and the workers who come into your home have requirements to be able to provide the service.

Staff Requirements: Personal Attendants must have a Criminal Investigation Background Check (CIB) and basic training before providing services to you. If you have special needs, the PA should have separate training before working with you. It is important to ask your PA if he/she is trained. Contact the nurse at the PA provider agency if you do not feel that your PA is properly trained.

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

Your Rights and Responsibilities

As a person on the ADW Waiver Program, you have certain rights and responsibilities.

You have a right to:

- Transfer to a different provider agency or to Personal Options.
- Report if you are unhappy with services from your agency or the Personal Options agency.
- Use the West Virginia DHHR Fair Hearing Process.
- Freedom from being punished when reporting being unhappy with services or appealing service decisions.
- Considerate and respectful care from your provider(s).
- Freedom from abuse, neglect and exploitation.
- Take part in your person-centered planning and service delivery process.
- Confidentiality regarding ADW services.

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- Access to all your files maintained by your agency providers and/or the Personal Options agency.

You are responsible to:

- Let the ADW Personal Attendant Agency know within 24 hours before the day services are to be provided if services are not needed.
- To let providers and/or Resource Consultants quickly know of changes in Medicaid coverage.
- Follow the agreed upon Person-Centered Service Plan.
- Cooperate with all scheduled in-home visits by being there so you will be able to meet assessment deadlines and get your paperwork turned in on time to keep your ADW slot.
- Let the ADW providers and/or Resource Consultant know of a change in address or an admission to a hospital, nursing home, or other facility as soon as possible.
- Let the ADW providers and/or Resource Consultant know of any change in medical condition or direct care needs.
- Keep your home (inside and outside area) safe for all service providers.
- Show that services were provided by initialing and signing the PAL.
- Report any problems with services to the provider agency and/or the Resource Consultant for Personal Options.
- Report any suspected fraud to the provider agency, Resource Consultant or the Medicaid Fraud Unit at (304) 558-1858.
- Report any abuse, neglect, or exploitation to the provider agency, the Resource Consultant or the WV Centralized Intake for Abuse and Neglect at 1-800-352-6513.
- Report any suspected illegal activity of staff to your local police department or other authorities as well as the provider agency and/or Resource Consultant.
- Tell your Case Manager and Resource Consultant, if needed, of any changes in your legal representation and/or guardianship and provide copies of the related documentation.
- Use Non-Medical Transportation support from family, friends, neighbors, and community agencies that can provide transportation first.
- Don't ask your Personal Attendant(s) to provide services that are not allowed by policy or not on your Service Plan.
- Let your Resource Consultant know (if utilizing the Personal Options Model) within 24 hours when you terminate an employee.

Expressing Program Concerns or Complaints

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

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Grievance Process

If you are not happy with your services you are receiving from a provider agency, you have a right to file a grievance. All ADW agencies are required to have written grievance procedures. First, it is important to try to resolve the problem with the agency staff working directly with you. They know the situation and may often help resolve an issue quickly. The Grievance process should have been explained to you during the time of the initial/re-evaluation process. You and/or your legal representative will be provided with an ADW Grievance Form. You can only grieve for the services that the agency you are dissatisfied with is providing. You may skip the level one grievance and file a level two grievance with the OA (BoSS) if you choose. The grievance process cannot be used to address decisions regarding medical or financial eligibility, a reduction in services or case closure. Those issues must be addressed through the DHHR Fair Hearing Process.

If you are experiencing unresolved problems, you may file a “first level” grievance with the provider agency by filling out a grievance form. Ask your Case Manager for a copy of the form:

A. Level One: ADW Provider

The ADW provider has ten business days from the date they receive your Grievance Form to hold a meeting, in person or by telephone. The meeting will be held by the agency director or the staff person assigned, with you (or legal representative). The agency has five business days from the date of the meeting to respond in writing to the grievance.

If the response does not resolve the problem, you may file a “second level” grievance to the Operating Agency (Bureau of Senior Services):

B. Level Two: Operating Agency (Bureau of Senior Services)

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

Medical Eligibility Appeals

The purpose of the medical eligibility review every year is to confirm a person is still medically eligible for ADW Services.

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You must have a referral from your physician every year as you re-apply for Medical Eligibility. Your Case Manager or Resource Consultant will help you with the referral every year.

The nurse from the Utilization Management Contractor (UMC) will then come to your home to evaluate you around the same time every year for medical eligibility. After the evaluation is completed you will then receive a notice in the mail regarding the decision on your medical eligibility evaluation.

The notice will inform you of the results of the medical evaluation that was completed by the Nurse that came to your home, and will identify what you need, how much you need, and how long you may need it.

If the results of your medical evaluation determine that you are not medically eligible or that you went down in level of care or deficits from what you received in the previous year you will be entitled to a Medicaid Fair Hearing or Pre-Hearing conference. If it is determined that you are not medically eligible, you and /or legal representative and your Agency will receive a **Potential Denial** letter informing you that the medical eligibility standard has not been met. If the review of supplemental information determines that you are still **NOT** medically eligible, a **Final Denial** Letter will be sent to you and provide information that explains why you are no longer medically eligible.

What to do now: After receiving your Final notice of decision and not receiving the desired outcome, you will need to do this:

Contact your Nurse/Case Manager to assist you in getting supplemental information from your Doctor that may provide a change in the results of your evaluation. The supplemental documentation must be submitted within 14 days of the date of the letter you received.

If you elect to appeal the decision your benefits will continue at the current level only if the request for a Medicaid Fair Hearing is received by BMS within 13 calendar days of the date of the **Final Denial** letter you received.

Transfers

Transfers: You may choose to transfer to another agency in your area. You may speak with your Case Manager if you wish to change. The Case Manager will ask you to complete transfer forms and decide upon the new agency. The existing agency must continue to provide your services until the transfer. You will receive a letter from the Bureau of Senior Services with a start date for the new agency. It is the responsibility of the new agency to begin the services on the start date. You may also contact the Bureau of Senior Services directly regarding help with a transfer and the Transfer Coordinator will assist you.

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Discontinuation of Services

The following requires a Request for Discontinuation of Services Form:

- No Personal Attendant services have been provided for 180 continuous days.
- Your home is an unsafe environment.
- You are often non-compliant with the Service Plan.
- You no longer want services.
- You no longer need services
- You can no longer be taken care of safely in the community.

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

Keeping My Services

1. What do I need to do to keep my services?

- Keep all your papers (or letters) together from DHHR.
- Keep all meetings with DHHR.
- Keep all meetings with your Case Manager, Resources Consultant or PA agency Nurse.
- Call your Case Manager or Resource Consultant when you get a letter you do not understand.
- Keep all meetings with the Nurse from KEPRO.
- You may ask others to be with you at your meeting with the Nurse from KEPRO. It could be a family member, your Medical Power of Attorney (guardian or other legal representative), your Case Manager, your Nurse or your Resource Consultant. Sometimes, it is good to have another person at your meeting to help you.
- Report any changes in your income or finances to DHHR.
- For Personal Options members, you will receive the physician form and the Resource Consultant can assist you with this.
- Be available every month for Personal Attendant services. If you go out of state for more than 30 days or if you refuse Personal Attendant services for any reason for more than 30 days, your services can be ended and your slot for the ADW program lost.

2. What should I do if I do not receive my Medicaid card?

- Call your Case Manager or Resource Consultant for assistance.
- Call your local DHHR office to ask why you did not receive your card.

Keeping You Safe

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1. What do I do if I think someone has taken something from me? It could be money, credit card, food stamp card, jewelry, clothes, prescription pills or other things.

- Call my Case Manager, Nurse or Resource Consultant.
- Call the police to make a report.
- Call your bank (for checks, debit cards, credit cards, or other money funds).
- Call the WV Centralized Intake for Abuse and Neglect (1-800-352-6513).
- Make a list of everyone who comes into your home. Give that list to your agency (Case Manager or Nurse) or Resource Consultant.
- Find safe places for your valuables (such as a box or closet or cabinet that locks).
- Keep your medicine locked up in a lockbox that only you have access to. Call your pharmacy or your doctor to report missing medicines. You may need to get medicines to take the place of the ones that are missing. Letting them know may keep it from happening again.

2. What do I do when I need help and no one is helping me?

- First, you may want to ask for help when you need it. Let the agency know that your needs are not being met and you need help.
- If you feel like you are not getting help when you need it, call your Case Manager, Nurse or Resource Consultant. Make sure that the agency knows that you need help. If you think this is neglect, call the Adult Protective Services Hotline. You may want to look at the brochure “Abuse, Neglect and Exploitation” for definitions of neglect (you receive this brochure every year).

3. What happens if my Personal Attendant leaves during her/his work shift without permission?

- Call the agency right away when this happens.
- Call the Case Manager or Nurse to let them know what happened.
- Do not sign any paperwork (time sheet or worksheet) until you talk to your Case Manager, Nurse or Resource Consultant.

4. What do I do when I feel threatened or am afraid of someone?

- If you are in immediate danger, call 911 or the police to assist you.
- Call a trusted friend or family member to assist you.
- Call the Nurse, Case Manager or Resource Consultant to make them aware of what is happening and to help you. Even if your Personal Attendant is making you feel afraid or threatened, call anyway. It is important to keep yourself safe.
- If you think you are being abused, neglected or exploited, call the Adult Protective Services Hotline (1-800-352-6513).

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Making My Wishes Known

1. Do you have written directions to help someone make medical decisions for you, if you were unable to make them for yourself?

- If no, you can speak with your Case Manager, Nurse or Resource Consultant about written directions. A medical power of attorney or healthcare surrogate can make decisions for you if you are not able to make them for yourself. A living will allow your medical power of attorney or healthcare surrogate know what you want or don't want. Five Wishes is another kind of living will.
- If yes, please give copies of your written directions to your Case Manager, Nurse or Resource Consultant. Also, give a copy to your doctor and any hospital where you are admitted. They should know what your wishes are and who would be making decisions if you couldn't.

If you would like more information about medical power of attorney or living will, please visit the following website, <http://www.wvendoflife.org/Home>, or call 1-877-209-8086. For Five Wishes, visit <http://www.agingwithdignity.org/five-wishes.php>. You can also call the Bureau of Senior Services, 304-558-3317, for a free copy of the medical power of attorney, living will and Five Wishes living will forms.

2. Can I still make my own decisions, even if I have written directions for someone to make decisions for me?

- Yes, you can make your own decisions as long as you are able to do so. These written directions do not take effect unless a doctor says you are not able to make decisions for yourself.

Family and Friends Serving As My Personal Attendant

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

- During work hours (on the clock), she/he is a professional employee of the agency. She/he must follow the rules of the agency and the Aged and Disabled Waiver Program.
- The Personal Attendant (or employee for Personal Options) must follow the Personal Attendant Log (PAL). Your family member or friend serving as your Personal Attendant must do the same things that any other agency Personal Attendant would do for you.
- If you are not sure what your family member can or cannot do, call your Nurse, Case Manager or Resource Consultant.
- During working hours, she/he must provide the care for YOUR needs and **not** his or her own needs. Your Plan might include help with bathing, transportation, meal preparation, grocery shopping, going to the pharmacy, doing laundry, etc.

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- The family member or friend must work the hours listed on the Personal Attendant Log (PAL). The Personal Attendant (or employee) must be there at the times outlined on your Personal Attendant Log (PAL).
- If the Personal Attendant or employee “does not show” at the home, call the agency or your Resource Consultant. Let the agency or Resource Consultant know if you would like to have a substitute worker.
- Let your Nurse or Resource Consultant know immediately if your needs change or you need different hours
- Transportation Services must be provided during working hours as outlined on your Personal Attendant Log (PAL).
- If your family member becomes unavailable to work for you for over 30 days, be aware that you could be in danger of losing access to the ADW program by refusing a substitute Personal Attendant.

Crossing The Line

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

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

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

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

Directing My Services

1. Should I tell my Case Manager, Nurse or Resource Consultant when I want my services and what types of help I need?

- Yes, you should let your Case Manager or Resource Consultant know when you meet with her/him what hours you need the service, what services you need and activities with which you need help.

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- Let your nurse or Resource Consultant know at the Service Plan meeting what activities you will need help with during the day. Examples are bathing and dressing. The nurse or Resource Consultant will use this information to develop the Personal Attendant Log (PAL).
- This also includes when you need to go to the grocery store, pharmacy or community activities. Be specific about the community activities you would like or need to do.

Dealing with Problems

- 1. What do I do when my Personal Attendant is not following my Personal Attendant Log (PAL) or the rules of the Program?**
 - Call the Nurse and the agency to let them know about the problem. If your Nurse isn't there, leave a message and ask the Nurse to return your call as soon as possible. If it is really important, tell the person who answers the phone that you need something right away.
 - Tell your Case Manager.
 - In the Personal Options Program, discuss issues with your employee with the Resource Consultant.
- 2. What if my worker says something I do not like or makes me feel uncomfortable (calls me "honey" or by my first name, etc.)**
 - First, talk about it with the Personal Attendant or employee in a positive way (if you feel that you can discuss it with the Personal Attendant or employee).
 - If not, call your Case Manager, Nurse or Resource Consultant to tell them about the problem, so they can help you. They cannot make it better if they do not know about it
 - For Personal Options, refer to the Employer Handbook.
- 3. What do I do when my Personal Attendant or employee brings personal problems to work and it gets in the way of my care?**
 - You may politely ask the Personal Attendant or employee if he or she could concentrate on your care.
 - If you prefer, you may ask your Case Manager, Nurse or Resource Consultant to help you with the problem.
 - For Personal Options, refer to the Employer Handbook.
- 4. What do I do when my Personal Attendant or employee is talking, playing games or texting on her phone? What if she is using my phone or computer?**

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- Refer to the answer to question number three.
5. **What do I do when my Personal Attendant or employee brings her/his children, other family members, or friends to my home?**
- The Personal Attendant or employee is not allowed to bring anyone to your home. This is out of respect for your privacy and confidentiality.
 - The Personal Attendant or employee is to provide care for you and not for anyone else. This includes his/her grandchildren, children, spouse, etc.
 - If you need assistance with these problems, call your Case Manager, Nurse or Resource Consultant.
 - For Personal Options, refer to the Employer Handbook.
6. **What do I do when the Personal Attendant or employee is eating my food, asking for gas money, or asking to borrow money?**
- Do not give the Personal Attendant or employee money, food, medications or any personal belongings. This can be considered financial abuse of you by the Personal Attendant. It is not permitted for the Personal Attendant to eat your food, ask for gas money, etc.
 - The Personal Attendant or employee must not take anything that belongs to you. If this happens, report this to the Case Manager, Nurse or Resource Consultant. You may want to call the Adult Protective Services Hotline at 1-800-352-6513.
 - For Personal Options, refer to the Employer Handbook.
7. **What do I do when my Personal Attendant or employee cannot take me to my appointment?**
- Tell family or friends who may help.
 - Call the agency or Resource Consultant. Ask for resources for transportation to the appointment.
 - Ask about a substitute Personal Attendant.
 - Ask about other transportation services such as MTM for medical appointments.
 - Think about putting off the appointment until a later date (depending on how urgent the appointment is). You may want to talk with your Nurse or Doctor first.
8. **What do I do when my Personal Attendant or employee wants to sell me something?**
- This is a professional relationship. Your Personal Attendant cannot sell you anything. If a Worker tries to sell you something, you should never feel forced to buy anything from her/him.

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If you are asked to buy anything from your Personal Attendant, you should report it to your Case Manager, Nurse, or Resource Consultant immediately.

9. What do I do when my Personal Attendant or employee wants to use my cash, debit card, or food stamp card to go to the store for me or pay bills?

- Your Personal Attendant or employee should not have the right to use your cards or cash if you are not there.
- You should either have a trusted person take care of your errands instead of the Personal Attendant or employee (to the grocery store, bank, to pay bills, to the pharmacy, etc.).
- Or go with your Personal Attendant or employee on essential errands.
- Ask for receipts.
- Another idea is to use a gift card with a limited amount of money on the card. Examples are Kroger, Visa, and MasterCard. These cards can be bought at local stores.
- Do not give anyone blank checks or passwords to your cards.
- If you do not have a trusted person to make your payments, contact your Case Manager. Talk with her/him about how to make sure your money is handled correctly.

10. What do I do when my Personal Attendant does not respect my personal beliefs or culture or the way I live?

- Call the Case Manager, Nurse or Resource Consultant to talk about it.
- Everyone involved in your care should be professional. They should respect your culture and beliefs and be sensitive to your needs.
- **You** must keep your home environment safe for the Personal Attendant to work. You cannot expose the Personal Attendant to any kind of illegal activity or other actions that would keep him or her from providing safe, quality services to you.

11. What do I do when I am unhappy with my agency? What if they are unable to send a Personal Attendant, aren't returning phone calls, or aren't taking care of my needs?

- You can call the Case Manager, Nurse or Resource Consultant. Ask for help in solving your problem.
- You can ask for a transfer to another agency or to the Personal Options program (self-directed services). Your Case Manager or the Bureau of Senior Services can help you.

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- You can file an ADW Participant grievance or a complaint. Your Case Manager can help you. If it is not worked out, you can file a grievance through the Bureau of Senior Services. The Aged and Disabled Waiver toll free information line is 1-866-767-1575.

Back-Up and Emergency Planning

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

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

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

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

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Paperwork

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

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

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

- Your Case Manager, Nurse or Resource Consultant will make sure that you get copies of all your Aged and Disabled Waiver paperwork. You will get your assessments, service plan, and Personal Attendant Log.

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Case Manager's Name, Agency, and Number:

Nurse's, Name, Agency, and Number:

Personal Attendant(s) Name and Agency:

Phone Number/Contact for After-Hours Scheduling

Concerns: _____

Important Things I Need to Tell My Case Manager:

Important Things I Need to Tell My Nurse:

Important Numbers and Resources

Bureau for Medical Services

Home and Community Based Services

Phone: 304-356-4913

Fax: 304-558-4398

Website: WWW.DHHR.WV.GOV/BMS

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West Virginia Bureau of Senior Services – Operating Agency (OA)

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

Fax: (304) 558-6647

Website: www.wvseniorservices.gov

KEPRO – Utilization Management Contractor (UMC)

Phone: 866-385-8920

Fax: 844-723-7811

Website: http://kepro.com/publicprograms/west_Virginia/

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

Phone: 304-988-4200

Fax: 304-988-4201

www.PublicPartnerships.com

West Virginia Aging & Disability Resource Centers

Phone: 1 – 866-987-2372

Website: WWW.wvnavigate.org

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

Web site: www.wvdhhr.org/bcf/children-adult/

In an emergency, call 911

Phone: 1-800-352-6513

This document was updated by the Bureau of Medical Services and the Bureau of Senior Services staff.

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Aged and Disabled Waiver Recipient User Guide Receipt

I, _____, acknowledge that I have received a copy of the Member User Guide on this date

Member Signature:

Case Manager or Nurse Signature:

Name of Provider Agency:

Note: *The Waiver Recipient User Guide may be provided to the Member by either the Case Manager or the Nurse. This guide is intended for distribution to members of the Aged and Disabled Waiver Program as an educational tool. Copies of the Waiver Recipient User Guide Receipt form should be forwarded to the other agency.*