

E&D Waiver PCS/IHR Designated Worksite Form

PCS & IHR Providers must serve counties no more than sixty (60) miles driving distance from the physical office, unless a supervisor has a designated worksite within sixty (60) miles driving distance of any beneficiaries served by the provider.

This form is to be completed by the Compliance Officer upon hire of the Supervisor and annually thereafter. Each field must be complete. Incomplete or inaccurate submissions will be denied.

Date of Review	
Agency Name	
Provider ID(s)	
Compliance Officer Name	
Main Office Physical Address	
Main Counties of Service *include only the counties within 60 miles of the Main Office Physical address.	
Name of Supervisor	
Service Type (PCS / IHR)	
Address of Designated Worksite	
Contact Phone	
Contact Email	
Number of staff to be supervised	
List current documentation reviewed to verify Designated Worksite	
Extended Counties of Service *Include only those within sixty (60) miles driving distance from Designated Worksite.	

Supervisor responsibilities include, but are not limited to:

1. Supervising the staff providing services within sixty (60) miles driving distance of the supervisor's designated worksite,
2. Ensuring staff timesheets and any other documents containing protected health or identifying information are securely stored while in the possession of the staff or supervisor in a manner that prevents unauthorized disclosure and are returned to the main office location within ten (10) business days,
3. Supervising no more than twenty (20) full-time staff,
4. Making home visits with staff to observe and evaluate job performance, maintain supervisory reports, and submit monthly activity sheets,
5. Reviewing and approving PCA duties on the approved service plans,
6. Receiving and processing requests for services,
7. Being accessible to staff and beneficiaries/their representatives for emergencies, case reviews, conferences, and problem solving,
8. Evaluating the work, skills, and job performance of the staff, including the completion of hands-on skills assessments,
9. Interpreting agency policies and procedures relating to the program,
10. Preparing, submitting, or maintaining appropriate records and reports,
11. Planning, coordinating, and recording ongoing in-service training for the PCA,
12. Performing supervised direct monitoring visits in the beneficiary's home while the staff is on-site and unsupervised indirect monitoring visits, which may be performed in the beneficiary's home or by phone, while the staff is not onsite, alternating on a biweekly basis to ensure services and care are provided according to the PSS, and
13. Reporting directly to the agency's Director and, in the absence of the Director, is responsible for the regular, routine activities of the program.

By signing my name below I attest that I understand the responsibilities of the Supervisor and that waiver providers must report changes in contact information, designated worksites & administrative staffing within ten (10) calendar days to the Division of Medicaid Office of Long Term Services & Supports. I further understand that any omission, misrepresentation, or falsification may be punishable by administrative actions.

Compliance Officer Signature

Date

Supervisor Signature

Date