

1302 INDEPENDENT PROVIDER PROGRAM

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3 REVISION DATE: MM/DD/YYYY 4 REVIEW DATE: 10/20/2023

5 EFFECTIVE DATE: November 9, 2022

6 REFERENCES: A.A.C. R6-6-2109

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PURPOSE

- 9 The purpose of this policy is to outline requirements for the Division's
- 10 Independent Provider Program.

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DEFINITIONS

- 13 14
- 1. "Direct Care Worker" or "DCW" means an individual who assists
- elderly individuals or individuals with a disability with activities
- necessary to allow them to reside in their home.
- 17 2. "Electronic Visit Verification" or "EVV" means a computer-based
- system that electronically verifies the occurrence of authorized
- service visits by electronically documenting the precise time a
- service delivery visit begins and ends, the individuals receiving
- and providing a service, and <u>the</u> type of service performed.
- 3. "Employer of Record" means the responsible person individual
- enrolled with the Fiscal Intermediary services as the employer.



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4. "Fiscal Intermediary" means a contracted provider that files 24 state 25 and federal paperwork required for a member Member to serve 26 as the employer and required for an Independent Provider to be 27 an employee of the member Member and that provides payroll 28 functions. 29 5. "Individual Independent Provider" means the same as Individual 30 Independent Provider as defined in A.A.C. R6-6-2101. an 31 individual who has a service agreement with the Division to 32 provide Attendant Care (ATC), Homemaker (HSK), Respite 33 (RSP), or Habilitation (HAH/HAI) and who is a DCW. 34 "Independent Provider Agreement" or "IPA" means a legally 6. 35 binding contract to provide community developmental disability 36 services and includes the following: the Independent Provider 37 Application, including service requirements/scope of work, terms 38 and conditions, and service specifications; the most current 39 Arizona Independent Provider Rate Schedule and any updates; 40

the Application and any updates; the Independent Provider



42		Agreement Award Notice; any Agreement Amendments; and any
43		terms applied by law.
44	7.	"Member" means the same as "Client" as defined in A.R.S. § 36-
45		<u>551.</u>
46	8.	"Responsible Person" means the parent or guardian of a minor
47		with a developmental disability, the guardian of an adult with a
48		developmental disability or an adult with a developmental
49		disability who is a member Member or an applicant for whom no
50		guardian has been appointed.
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52	POLICY	
53 54	A. PRO	GRAM REQUIREMENTS
55	1.	The Division shall offer members Members and their families the
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56	1.	The Division shall offer members Members and their families the ability to direct their care and give the member Member control
56 57		The Division shall offer members Members and their families the ability to direct their care and give the member Member control over assigning duties and schedules for the Direct Care Worker



61		compliance with trainings requirements through as identified in
62		the Independent Provider <u>Agreement (IPA)</u> Program and the
63		Person Centered Service Plan (PCSP).
64 65	3.	The Division shall not permit an Individual Independent Provider
66		shall not to provide more than 40 hours per week in combination
67		of all services to any combination of services for more than 16
68		hours within a 24 hour period to Members. all members
69	4.	The Division shall require an Individual Independent Provider
70		shall adhere to adhere to the Division's Medical, Operational,
71		Behavioral Supports and Provider Manuals as applicable to their
72		scope of service.
73	5. —	-The Division shall allow the member <u>Member</u> or responsible
74		person Responsible Person to change Individual Independent
75	K	Providers at any time.
76	5.	The Division shall require the Independent Provider to complete
77		the Pre-Service Provider Orientation form (DDD-0097A) prior to
78		providing services and if there are any changes to the Member's

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В.

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conditions or needs.

1. The Division shall require the member or responsible person 81 Responsible Person to shall: 82 Identify any training needs, over and above the minimum a. 83 required training by the Division, that are necessary to 84 meet their unique individual needs; 85 Select an the Individual Independent Provider from a pool b. 86 of Individual Independent Providers that are already 87 contracted by the Division; 88 Orient Inform the Individual Independent Provider to the c. 89 manner in which they want the services provided; 90 Provide feedback to the Individual Independent Provider 91

MEMBER/RESPONSIBLE PERSON RESPONSIBILITIES

e. Provide oversight and instruction to the Individual

Independent Provider to ensure they are receiving quality care;

regarding the performance and dismiss or fire if the

member Member is not satisfied with the care provided;



97		f.	Communicate regularly with the Support Coordinator about		
98			the Individual Independent Provider performance; and		
99		g.	Enroll with the Division's Fiscal Intermediary agency as the		
100			Employer of Record and verify service visits using the fiscal		
101			intermediary's Fiscal Intermediary's Electronic Visit		
102			<u>Verification</u> (EVV) system.		
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104	C. FISC	CAL I	NTERMEDIARY RESPONSIBILITIES		
105	1.	<u>The</u>	<u>Division shall require</u> the Fiscal Intermediary to: shall:		
106		a.	Maintain an EVV system as required by AHCCCS;		
107		b.	Process payments to Individual Independent Providers;		
108		c.	Manage required withholdings;		
109	C	d.	Provide tax documentation of members Members and		
110	.0		providers Independent Providers; and		
111	0)	e.	Adhere to all contractual requirements as outlined in the		
112	*		Fiscal Intermediary Management services contract.		
113	Signature of Chief Medical Officer:				