

Addendum XX

Direct Care Workforce Provider Agreement Template

The MCO should use the following template language in their agreements with providers for the direct care workforce funding:

a. Definition of direct care worker

Under this section, a “direct care worker” is defined as an employee who contracts with or is an employee of an entity that contracts with an MCO to provide adult day care services, daily living skills training, habilitation services, residential care (adult family homes of 1-2 beds, adult family homes of 3-4 beds, community-based residential facilities, residential care apartment complexes), respite care services provided outside of a nursing home, and supportive home care, and who provides one or more of the following services through direct interaction with members: assisting with activities of daily living or instrumental activities of daily living, administering a member’s medications, providing personal care or treatments for a member, conducting activity programming for a member, or providing services such as food service, housekeeping or transportation to the member. Staff who would be excluded from the definition of “direct care worker” include but are not limited to: licensed practical nurses, registered nurses, nurse practitioners, nursing home staff, personal care agency staff, staff in marketing, sales, reception, finance, maintenance/plant operations and those staff who work exclusively in food service, transportation, and housekeeping and do not have direct contact with members.

b. Provider Use of direct care workforce funds

- i. <<The Provider>> shall only use the direct care workforce funds for the following purposes or to pay for employer payroll tax increases that result from using the direct care workforce funds for one of the following purposes:
1. Wage increases;
 2. Retention/longevity bonuses;
 3. Performance bonuses;
 4. Employee paid time off;
 5. Staff referral bonus;
 6. Sign on bonus.

- ii. <<The Provider>> must complete making payments to direct care workers by the following deadlines:

Quarter 1	09/14/18
Quarter 2	12/15/18
Quarter 3	03/18/19
Quarter 4	09/13/19
Final	03/16/20

- iii. <<The Provider>> may claim expenditures they made on or after January 1, 2018 as appropriate uses of the direct care workforce funding.
- iv. <<The Provider>> must distribute the direct care workforce funding to direct care workers providing services to Family Care, Family Care Partnership, or PACE members in Wisconsin.
- v. The direct care workforce payments paid to <<The Provider>> for a particular quarter shall be recouped:
 - 1. If <<The Provider>> does not complete the survey and attestation developed by the Wisconsin Department of Health Services for that particular quarter by September 13, 2019; and
 - 2. When the amount of the quarterly direct care workforce payment paid to <<The Provider>> for that particular quarter was equal or greater than \$1,000.
- vi. <<The Provider>> shall submit the signed provider agreement to <<the MCO>> within 45 days from when <<the MCO>> sent the agreement to be eligible for the initial direct care workforce payment to be distributed by the Department of Health Services by June 29, 2018; and
- vii. If <<The Provider>> submits the signed provider agreement to <<the MCO>> after 45 days the provider will only be eligible for direct care workforce funding distributed after the signed provider agreement was received by the MCO.

c. Provider Documentation and Reporting

- i. <<The Provider>>, upon acceptance of the above-referenced funds, shall do all of the following:
 - 1. Respond to the surveys developed by the Wisconsin Department of Health Services regarding the funds' use and effectiveness;
 - 2. Shall attest to the manner in which the funds were used; and
 - 3. Shall retain documentation proving the funds were paid to individual workers.

- ii. <<The Provider>> does not have to complete the Department-developed survey or provide an attestation in response to the final payment distributed by the Wisconsin Department of Health Services by December 20, 2019.
- d. Provider Ineligibility for Direct Care Workforce Funding
 - i. <<The Provider>> shall not be eligible for direct care workforce payments if it discontinues operations or enters bankruptcy.
 - ii. <<The Provider>> is only eligible for direct care workforce funding if they have a contract with <<the MCO>> to provide Family Care, Family Care Partnership, or PACE services at the time <<the MCO>> distributes the direct care workforce funding. <<The Provider>> is not eligible to receive direct care workforce funding if they do not have an active service contract with <<the MCO>>.
 - iii. <<The Provider>> will not be eligible to receive future Direct Care Workforce funding if it does not complete the Department-developed survey and provide the necessary attestation by the following deadlines:

Quarter 1	09/14/18
Quarter 2	12/15/18
Quarter 3	03/18/19
Quarter 4	09/13/19

- e. Changes in Provider Identification
 - i. <<The Provider>> shall submit documentation to <<the MCO>> anytime <<The Provider>> changes or discontinues using its unique identifying information. <<The Provider>>'s unique identifying information will be defined by the Wisconsin Department of Health Services. <<The Provider>> shall not receive direct care workforce funding from <<the MCO>> until <<the MCO>> has received written approval of the payment from the Wisconsin Department of Health Services.
- f. Calculation of Direct Care Workforce Funding by Wisconsin Department of Health Services
 - i. The Wisconsin Department of Health Services will determine the amount of direct care workforce funding <<the MCO>> is to distribute to <<the Provider>>.
 - ii. The Department of Health Services will divide the total funds allocated under Wis. Stat. §49.45(47m) into four quarterly amounts. The amounts will be weighted by the projected statewide enrollment for each claims period.
 - iii. The dates by which the Department will make Direct Care Workforce payments to each MCO and the dates of service of the encounters used to calculate each payment are shown in the following schedule:

Quarterly Payment	Payment to MCO Made By:	Dates of Service
Quarter 1	June 29, 2018	January 1 – March 31, 2018
Quarter 2	September 28, 2018	April 1 – June 30, 2018
Quarter 3	December 21, 2018	July 1 – September 30, 2018
Quarter 4	June 28, 2019	October 1 – December 31, 2018

- iv. Encounters submitted by <<the MCO>> after the Department’s data pull for the payment calculation in one quarter will be included in the data pull for the payment calculation in subsequent quarters.
- v. To calculate the amount that each MCO needs to pay each provider each quarter, the Department will:
 1. Calculate the Direct Care Workforce percentage increase by dividing the Direct Care Workforce funding allocated to the quarter in ii. by the sum of the cost of all direct care workforce encounters within the dates of service specified in iii. for the quarter and any encounters not included in prior quarterly payment calculations. The costs from encounters that span more than one quarter will be allocated between quarters based on the number of days of service which occurred in each quarter.
 2. Multiply the Direct Care Workforce percentage increase calculated in 1. by the sum of all payments the MCO made to the provider.
 3. If any provider would receive a Direct Care Workforce payment of less than \$25, the Department shall exclude expenditures from those providers and recalculate the amounts in 1. and 2.