

## INDIVIDUAL COMPANION PROVIDERS STANDARDS AND DUTIES

### Minimum Qualifications

Individual companions must meet the following minimum qualifications:

- a. Demonstrate an ability to read, write and speak English;
- b. Fully ambulatory;
- c. Capable of performing all companion care duties;
- d. Capable of following a service plan with participant and/or representative supervision;
- e. Be at least 18 years of age;
- f. Capable of following billing procedures and completing required paperwork;
- g. No known conviction of abuse, neglect, or exploitation of adults (as defined in the Omnibus Adult Protection Act, S.C. Code Ann. Title 43, Chapter 35) or of children (as defined in the Children's Code, S.C. Ann. Title 63, Chapter 7);
- h. No known conviction for any crime against another person;
- i. No known felony conviction of any kind;
- j. No known conviction of any kind concerning the misuse or abuse of any public assistance program (including, but not limited to, fraudulently obtaining benefits, engaging in fraudulent billing practices, and embezzling or otherwise misusing public assistance funds in any manner);
- k. No record of exclusion or suspension from the Medicare or Medicaid Programs;
- l. Upon request will provide references to the participant and/or representative;
- m. All Companions shall submit the results of a PPD tuberculin (TB) skin test that was administered within one year prior to the Companions Medicaid enrollment date. All Companions whose PPD skin test is over a year old at the time of actual enrollment must have a new PPD skin test to remain enrolled and to be eligible to serve participants as a companion. The two-step procedure is advisable for initial testing in order to establish a reliable baseline. (If the reaction to the first test is classified as negative, a second test should be given a week later. If the second test is classified as negative, the person is considered as being uninfected. A positive reaction to a third test (with an increase of more than 10mm) in such a person within the next few years, is likely to represent the occurrence of infection with M. Tuberculosis in the interval. If the reaction to the second of the initial two tests is positive, this probably represents a boosted reaction, and the person should be considered as being infected).

Companions with reactions of 10mm and over to the pre-enrollment tuberculin test, those with newly converted skin tests, and those with symptoms suggestive of tuberculosis (e.g., cough, weight loss, night sweats, fever, etc.) regardless of skin test status, shall be given a chest radiograph to determine whether tuberculosis disease is present. If tuberculosis is diagnosed, appropriate treatment should be given, and the person must not be allowed to work until declared noncontagious by a licensed physician.

Routine chest radiographs are not required on companions who are asymptomatic with negative tuberculin skin tests.

Companions with negative tuberculin skin tests shall have an annual tuberculin skin test. Forty-five (45) days prior to the expiration date, USC-CDR will notify active enrolled companions of the expiration of their TB test results. If the companion has not submitted the required information by the expiration date, USC-CDR will notify the CLTC Central Office. Current services of the companion will be terminated after reasonable notice (2 weeks) to participants has been given so participants can find replacement services. The CLTC Compliance Office will suspend new referrals to companions effective on the date suspension is submitted. If the companion has not submitted the information within six (6) months of the suspension date, USC-CDR will notify CLTC Central Office to initiate steps to terminate the companion's enrollment in the Medicaid Program.

New companions who have a history of positive TB skin test shall send a copy of their most recent chest x-ray and complete a signs and symptoms questionnaire, or have certification by a licensed physician or local health department TB staff prior to enrollment as a Medicaid provider that they are not contagious. Companions who are known or suspected to have tuberculosis shall be required to be evaluated by a licensed physician or local health department TB staff, and must not return to work until they have been declared noncontagious.

Preventative treatment should be considered for all infected companions having direct participant contact who have positive skin tests but show no symptoms of tuberculosis. Routine annual chest radiographs are not a substitute for preventative treatment. Companions who complete treatment, either for disease or infection, may be exempt from further routine radiographic screening unless they develop symptoms of tuberculosis. Companions with a history of a positive TB skin test will be required to complete a tuberculosis signs and symptoms questionnaire to assess for Tuberculosis annually.

Post exposure skin test should be obtained for tuberculin negative companions within 12 weeks after termination of contact to a documented case of infection.

Companions needing additional information should contact the Tuberculosis Control Division, Department of Health and Environmental Control, 2600 Bull Street, Columbia, SC 29201 (phone 803-898-0558).

- n. The companion must adhere to basic infection control procedures at all times when providing companion services.
- o. All new companion providers must complete companion/Care Call training in the CLTC area office prior to or during the first week of authorized companion services.

## Conduct of Service

1. The companion will begin services on the date agreed upon by the participant/representative, companion and case manager. This date will be the start date on the written authorization for services. Services provided prior to the authorized start date as stated on the Service Provision Form will not be reimbursed.
2. The case manager will authorize companion services by designating the authorized units of service in accordance with the participant's Service Plan. The companion must adhere to those duties. The participant/representative will self-direct the provision of care and coordinate with the companion regarding the time for service delivery and specific tasks to be performed. Services must be participant specific and for the direct benefit of the participant.
3. The unit of service is authorized in one (1) hour increments and will consist of companion service provided in the participant's home or other setting as may be appropriate to support the duties performed. The amount of time authorized does not include transportation time to and from the participant's home.
4. If the companion or the participant/representative identify companion duties that could be beneficial to the participant's care but are not specified on the CLTC Service Plan, the companion or participant/representative must contact the case manager to discuss the possibility of having these duties included on a new service provision form and the Service Plan. **Under no circumstances will any type of skilled medical services be performed by a companion.** The decision to modify the duties to be performed by the companion is the responsibility of the case manager.
5. The companion will notify the case manager immediately of the following participant changes:
  - a. Participant's condition has changed and the Service Provision form no longer meets the participant's needs or the participant no longer appears to need companion services.
  - b. Participant/representative no longer appears capable of providing supervision for the companion services.
  - c. Participant/representative no longer wants to serve as Employer of Record/representative.
  - d. Participant dies or moves out of the service area.
  - e. Participant/representative no longer wants to receive companion services.

- f. Participant becomes Medicaid ineligible or potentially ineligible for Medicaid.
6. The companion will notify Adult Protective Services if he/she has knowledge of or reason to believe that the participant has been or is likely to be abused, neglected or exploited.
7. If/when the companion determines that services cannot be provided as authorized, the companion must immediately notify the case manager and the participant/representative by telephone.
8. When two consecutive attempted visits occur, the companion must contact the local CLTC office. An attempted visit is when the companion arrives at the home and is unable to provide the assigned duties because the participant is not at home or refuses services.
9. The companion is responsible for verifying the participant's Medicaid eligibility each month.
10. The companion will notify the case manager or USC-CDR immediately if the companion wishes to terminate as the provider.
11. The companion is responsible for giving participants a written description of the state law concerning advance directive in accordance with the Patient Self Determination Act. USC-CDR will assist companions in meeting this requirement.
12. The companion shall adhere to all SCDHHS policies, procedures and Medicaid provider manuals including policies regarding billing, claims adjustments, Fiscal Intermediary requirements, etc.
13. The companion must comply with all Care Call requirements.

### Record Keeping

The companion shall maintain an individual participant record for each participant. The participant record is subject to the confidentiality rules for all Medicaid providers and shall be made available to CLTC upon request. This record shall include the following:

1. Current and historical Service Provision/Termination Forms specifying units and duties to be provided.