

KANSAS AUTHENTICARE CALLING INSTRUCTIONS TA WAIVER

TO CLOCK OUT:

- 1. Dial 1-800-903-4676 FROM THE CUSTOMER'S PHONE number that is registered with ILRC:
 - If you call from a phone number not registered with ILRC for the customer, you will NOT BE ALLOWED TO CLOCK IN/OUT, YOU WILL HEAR THE SYSTEM ASK FOR A CLIENT ID.
 - The customer must register all of their phone numbers with ILRC for the Kansas Authenticare system.
 - Workers' phone numbers are not allowed to be registered.
- 2. Enter your ID number ______ followed by the pound (#) sign.
- 3. To clock out PRESS 2
- 4. You will hear the name of the customer you are working for. If it is correct PRESS 1.
- 5. Enter your activity codes followed by the pound (#) sign. Activity codes are listed on the next page. The system will ask you to confirm the code is correct and prompt you to enter the next code. Once you have entered all the codes **PRESS 8** to continue.
 - For TA ENHANCED CARE SERVICES (ECS) there are no codes to enter, Press 8.
- 6. If you have NO observation codes to enter, **PRESS 8**. If you observe a new condition, contact the customer's Care Coordinator with the insurance company.
- 7. The system will verify your clock out with you. If the information is correct **PRESS 1**. The system will verify your clock in was successful and give the time of day.
- 8. PRESS 2 to end the call.

To check your hours, call 1-800-903-4676, listen to the automated system which gives you the options below to check your hours.

- To check hours worked this week <u>PRESS 3</u>
- To check hours worked today PRESS 4



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ACTIVITY CODES FOR TA WAIVER

Parameter San	The state of the s		
Service	Activity*	Includes	Code
T1019	Lifting	Lifting/Body Mechanics/Transfer/Position	41
T1019	Personal Care	Dressing/Bathing/Hair/Oral/Skin/Nail	42
T1019	Nutrition	Diet/Nutrition Prep/Clean-up	43
T1019	Toileting	Toileting/Diapering/Personal Adjustment	44
T1019	Housekeeping	Housekeeping/Laundry	45
T1019	Ambulation	Ambulation Technique Assistance	46
T1019	Medication	Medication Administration	47
T1019	Oxygen	Oxygen Administration	48
T1019	CPR/First Aid	SAME	49
T1019	Emergency	Emergency Procedures	50
T1019	Tracheotomy	SAME	51
	Care		
T1019	Seizure Control	SAME	52
T1019	Infection Control	SAME	53
T1019	Suction	Suction Machine Use	54
T1019	Glucometer	Glucometer Use (blood sugar monitoring)	55
T1019	Vital Signs	Vital Sign Monitoring (Temp, BP, Pulse, Pulse Ox,	56
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T1019	NG	NG/GT/NJ Feeding and Care	57
T1019	Catheter	Catheter Care/Recording Input & Output	58
T1019	Enema	Enema/Suppository Insertion	59
T1019	Range of Motion	Range of Motion Exercises	60
T1019	Documentation	Documentation/Record Keeping	61
T1019	Recreation	Recreation/Socialization	62
T1019	Transportation	SAME	63
T1019	Hearing	Hearing Impaired Assistance	64
T1019	Visual	Visually Impaired Assistance	65
T1019	Communication	Communication Technique Assistance	66
T1019	Behavior	Behavior Modification Technique Assistance	67
	Modification		
T1019	Other	OTHER	68





July 14, 2014

Effective August 1, 2014 the following changes will be made concerning Payroll Services with Independent Living Resource Center.

All Consumers will be limited to 6 clock in or out corrections in a month on behalf of their workers. As in the past, failure to clock in or out in the same day will count as 2 corrections. Once the threshold of 6 corrections in a calendar month has been exceeded, you will receive a warning letter. Upon the 2nd violation of more than 6 corrections in a month, a second letter will be sent stating that you have exceeded the monthly limit for the 2nd time. At that point, after the 2nd month of excess corrections are corrected, you will no longer be eligible for corrections of time for any reason. Any errors or clock in omissions will not be paid once you have workers who have exceeded the monthly maximum in 2 separate months.

Please note that an operational phone is a requirement to receive payroll services from Independent Living Resource Center and nonfunctioning phones are not a valid excuse. A backup phone is a very good idea in case of emergency.

We are taking these steps to become in stricter compliance with State of Kansas HCBS regulations, policies, and procedures which require the use of Authenticare. As a self-directed Consumer of services or representative of a consumer, it is your responsibility to make sure all workers are using the mandated Authenticare call in system correctly and that the proper number of hours are being called in. Failure to use the system correctly is a failure to accomplish a mandatory job function that will result in unpaid shifts if errors persist. As always, Authenticare training is available at ILRC for anyone who requests it.

Thank you,

ILRC Payroll Services



3033 WEST 2ND STREET NORTH WICHITA • KANSAS • 67203 TELEPROPERTY 316 • 942 • 6300

CLAIM CORRECTION FORM

ATTN: CLAIM CORRECTION FORMS MAY NOT BE USED FOR BOTH A CLOCK IN AND CLOCK OUT. AT LEAST ONE TIME ENTRY MUST BE DONE THROUGH ATHENTICARE FOR THERE TO BE A VALID SHIFT.

DO NOT LIST MORE THAN ONE (1) DAY ON THIS FORM, IT WILL NOT BE PROCESSED. IF THIS FORM IS MISSING ANY INFORMATION IT WILL RESULT IN YOUR CLAIM BEING DENIED. BE CERTAIN THAT ALL FIELDS PERTAINING TO YOUR SHIFT ARE COMPLETED BELOW BEFORE SUBMITTING THIS FORM.

YOU MAY FAX THIS FORM TO 316-942-1061, MAIL IT OR DROP IT OFF AT OUR OFFICE DURING NORMAL BUSINESS HOURS OF 8AM TO 4PM, MONDAY - FRIDAY.

IF YOU NEED ADDITIONAL CORRECTION FORMS YOU CAN PICK THEM UP AT OUR OFFICE OR REQUEST A FORM TO BE SENT TO YOU ELECTRONICALLY, PLEASE CONTACT THE PAYROLL DEPT AT 316-942-6300. YOU MAY ALSO OBTAIN FORMS ON OUR WEBSITE AT: http://ilrcks.org/programs-services/payroll-services

DA	AYTIME HOURS PCS/PAS SERVICES ONLY BELOW: TIME CANNOT EXCEED 12 HOURS IN A 24 HOUR PERIOD.			
1.	CUSTOMERS NAME (PRINT):			
2.	CUSTOMERS PHONE NUMBER:			
3.	DIRECT SUPPORT WORKERS NAME & ID # (PRINT):			
4.	DATE OF CORRECTION:			
5.	CLOCK IN TIME (AM / PM): CLOCK OUT TIME (AM / PM):			
6.	ACTIVITY CODE(S):			
7.	REASON FOR CORRECTION:			

NIGHT SUPPORT (ECS SERVICES) ONLY BELOW: TIME CAN BE NO MORE THAN 6 TO 9 HOURS PER NIGHT.				
1.	CUSTOMERS NAME (PRINT):			
2.	CUSTOMERS PHONE NUMBER:			
3.	DIRECT SUPPORT WORKERS NAME & ID # (PRINT):			
4.	DATE OF CORRECTION:			
5.	CLOCK IN TIME (AM / PM): CLOCK OUT TIME (AM / PM):			
6.	REASON FOR CORRECTION:			
cust	rections are limited to 6 per month. Any corrections in excess of this limit will result in corrective action procedures. Any tomer who has worker(s) who have exceeded the monthly limit 2 or more times will not be eligible for any corrections of or omissions for any of their worker without possible additional fees.			

By signing below, you are confirming that the information above is accurate per guidelines stated by Medicaid for your Home and Community Based Services (HCBS). Fraudulent submissions will be reported to the State of Kansas and to your MCO. NO ELECTRONIC SIGNATURES WILL BE ACCEPTED ON THIS FORM.





GENERAL PAYROLL INFORMATION

ILRC as fiscal agent is the payroll provider only, we are not the employer you do not work for ILRC, the customer receiving HCBS services from the State is your employer.

- Kansas Authenticare call-in system.
 - You must call from the customers registered phone number(s). It is the customer's responsibility as the employer to provide a phone for you to use. If the customer does not have a phone available for whatever the reason (broke phone, no minutes, lost phone etc.) do not work for them until a phone is provided for you, you will not be allowed to claim hours not called into the system, the Kansas Authenticare call in system is mandatory. If you decide to go ahead and work the customer will have to pay you out of their pocket.
 - Workers' phone numbers are not allowed to be registered.
- Our payroll weeks run Sunday to Saturday. Whatever day of the week you start to clock
 in you will be paid the following week on Thursday and every Thursday after that. On
 occasion it may be on a Friday.
- Direct Deposit: If you select this option the money will be automatically deposited to your bank account each Thursday, on occasion it may be on a Friday.
 - If you need to stop or change your current Direct Deposit method, you must do this before 4 pm Tuesday.

SAFETY

- If an accident results in injury to the Employer and the Employer has a Guardian/Designated Representative, the Caregiver must report the accident to the Guardian/Designated Representative, Care Coordinator, Targeted Case Manager and to the FMS Payroll provider as soon as possible.
- If a work-related accident results in injury to the Caregiver, the Caregiver must report such accident to the Employer as soon as possible, but no later than 24 hours after such injury.

If you have any questions, please call our office at 316-942-6300.





GENERAL PAYROLL INFORMATION

- ADP/Wisley Bank: If you select this option the money will be automatically deposited to your card each Thursday.
 - If you lose our card you may come into our office and pick up a new temporary card, YOU will have to call ADP/Wisley Bank at 1-866-313-6901 and let them know.
 - If you have issues with your pay card such as unauthorized charges or its expired, YOU need to call ADP/Wisley Bank at 1-866-313-6901.

Paystubs

- You will have access to the Employee Paystub Portal. Information will be given to you on how to use it.
- If you need a printout of your paychecks call the payroll department. There will be a charge of \$5.00 for us to print them off for you.
- Overlapping Hours.
 - Make sure when you clock in and out you are not overlapping hours with another worker. We are not able to pay time when this happens.
- Employment Verifications
 - If you need an employment verification completed you can bring the form into our office in person, email it or have it faxed to Sabrina at 316-337-5085, please make sure you do not fill out anything on the form other than your signature on the form.
- Paycheck Shortages
 - If you were not paid for all the hours, you worked. Call our Payroll
 Department at 316-942-6300. If they don't answer, please leave a message
 and they will get back to you as soon as they can.





GENERAL PAYROLL INFORMATION

- Terminated / Quit / Assignment ended.
 - Please let Sabrina know on the next business day once your assignment has ended at 316-942-6300 Ext. 1224 so your records can be updated, and if you are interested in working for anyone else.
- Backup workers in the payroll system
 - If you go 3 months without working, you will automatically be removed from the payroll and could possibly be required to do new paperwork again.
- If you are hired by another customer.
 - You will be required to complete a payroll registration packet to work for them.
 Do not start working for anyone until this has been done.
- Change of Address/Name Change
 - Any changes to your personal information that is on file. Please contact Sabrina as soon as possible at 316-942-6300 Ext. 1224.
- W-2's
 - Are mailed out annually in January by the 31st to the last known address we have on file for you.