



## Agreement for Provider-Consumer-PCA and Qualified Professional

### Personal Care Assistant Services

This Agreement is made this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between ***Bella Mente Inc. located at 1418 E US Hwy 169, Grand Rapids, MN 55744***, an enrolled PCA Choice provider with the State of Minnesota, and

\_\_\_\_\_, hereby referred to as consumer, and \_\_\_\_\_, hereby referred to as personal care assistant and remains in effect until any party chooses to terminate this agreement in writing.

### Purpose

We enter into this agreement to provide personal care assistant services for the consumer.

### Consumer Roles and Responsibilities

As a consumer using Bella Mente Inc. as my PCA Choice provider, I, or my responsible party, agree to the following responsibilities:

1. Accept responsibility for my health and safety, meaning I will find staff or supports that ensure my health and safety needs are met.
2. Develop and revise, as needed, a service care plan that details my health, safety and care needs and schedule based on my physician's statement of need and public health nurse assessment. This plan may be developed and revised with the assistance of my doctor and/or Qualified Professional if I choose to have one.
3. Recruit, interview and hire my own personal care assistant (PCA) staff. All staff must pass a criminal background check, facilitated by Bella Mente Inc., to ensure they have no prior criminal record that disqualifies them from being employed as a personal care assistant.
4. Ensure that PCA staff hired can adequately perform the tasks and care that I need.
5. As a joint employer with Bella Mente Inc., enter into a written agreement with each of my PCAs before I receive their services.
6. Refer individuals to Bella Mente Inc. to fill out necessary forms to be paid as my PCA.
7. Ensure that I have adequate backup staff or support in case a regularly scheduled PCA is unable to fulfill their duties as scheduled.
8. Provide orientation and training to my PCA staff. I can have my Qualified Professional assist me if I choose to have one.

9. Recruit, interview and hire my own Qualified Professional if I would like assistance in orienting, supervising, training, and/or evaluating my PCA staff or developing my service plan based on my doctor's recommendations and my public health nurse assessment. I understand that the Qualified Professional must be a Registered Nurse (RN), Licensed Social Worker or Mental Health Professional as defined by the state of Minnesota and must pass a criminal background check, facilitated by Bella Mente Inc., to ensure they have no prior criminal record that disqualifies them from being employed as a Qualified Professional.
10. Verify and provide documentation of the credentials of my chosen Qualified Professional if I choose to have one.
11. Provide ongoing supervision and evaluation of my PCA staff with assistance, as needed, from my doctor or Qualified Professional if I choose to have one.
12. Schedule my PCA staff.
13. Manage the use of my PCA allocated hours/units to ensure I do not use more than the allocated hours/units in my service plan.
14. Abide by Department of Labor regulations regarding overtime. I will make every effort to manage my PCA schedule to avoid the payment of overtime. If I will need to pay overtime, I will contact the Program Coordinator in advance for approval or alternatives.
15. Monitor, ensure accuracy and verify time worked by my PCAs. Sign verified time cards for my PCA staff. PCAs must indicate services provided during the hours worked. Time cards are submitted to Bella Mente Inc. weekly and must be received at the office by noon on Wednesday to ensure payment occurs on schedule. See Payroll Schedule for Payroll dates. Time cards may be submitted by U.S. Mail or delivered in person to either the Grand Rapids or Virginia office.
16. Coordinate with Bella Mente Inc. to notify the county public health nurse, waiver service coordinator or otherwise appropriate individual when it is time for a reassessment of my need for PCA services or if there is a change in condition or change in the level of services that I need. I will inform them of my intent to use a PCA Choice provider.
17. Notify Bella Mente Inc. of my hospitalization dates throughout our service agreement.
18. Terminate my PCA staff if necessary. I will immediately notify Bella Mente when termination occurs and the effective date of that termination. I will notify Bella Mente if assistance is needed in terminating an employee.
19. Contact the Program Coordinator in the event of a billing or payment complaint. Bella Mente Inc. is committed to providing a timely response to all inquiries.
20. Notify Bella Mente Inc. in writing if I want to terminate this agreement at any time.

## **Provider Roles and Responsibilities**

As your PCA Choice provider, Bella Mente Inc. agrees to perform the following responsibilities:

1. Enroll and meet all standards as a PCA Choice provider with the Minnesota Department of Human Services, including passing a criminal background check.
2. As a joint employer with the consumer or responsible party, enter into a written agreement with each PCA and/or Qualified Professional the consumer chooses to hire before services are provided to the consumer.
3. Obtain releases, request and secure background checks according to the State of Minnesota Human Services Licensing Act for all PCAs and QPs referred.
4. Bill the Minnesota Department of Human Services or appropriate health care plan for personal care assistant and Qualified Professional (if applicable) services rendered.
5. Pay the personal care assistant(s) at the rate determined by the consumer as provided on the PCA Pricing Schedule.
6. Pay the Qualified Professional (if applicable) at the rate determined by the consumer as provided on the Qualified Professional Pricing Schedule.
7. Administer the applicable benefits for personal care assistants and Qualified Professionals that are arranged for between the consumer, PCA/QP and Bella Mente Inc. Program Coordinator. See the PCA and QP Pricing Schedules for specific benefit rates.
8. Withhold and remit all applicable state and federal taxes from personal care assistants' and Qualified Professional's paychecks.
9. Arrange for and pay the employer's share of payroll taxes, unemployment insurance, Workers' Compensation insurance and liability insurance for all staff.
10. Issue paychecks every two weeks according to the payroll schedule.
11. Keep records of the hours worked by personal care assistants and Qualified Professional (if applicable).
12. Assist consumer in terminating PCAs and QPs if requested to do so by the consumer.
13. Assess an administrative fee for the provision of PCA Choice provider services. Refer to the PCA and Qualified Professional Pricing Schedules for current administrative fees.
14. Ensure Bella Mente Inc. is not related to the consumer, Qualified Professional or personal care assistant.
15. Ensure arms-length transactions with the consumer and personal care assistant.<sup>69</sup>

## **Qualified Professional Roles and Responsibilities**

If the consumer chooses to hire a Qualified Professional, they agree to the following responsibilities:

1. Hold the appropriate credentials to serve as a Qualified Professional by being either a Registered Nurse, Licensed Social Worker or Mental Health Professional.
2. Provide documentation of their credentials as a Registered Nurse, Licensed Social Worker or Mental Health Professional to the consumer.
3. Enter into a written agreement with the consumer and Bella Mente Inc., as joint employers, before providing services to the consumer.
4. Complete all required forms and provide necessary information to Bella Mente Inc., including criminal background check verification, prior to providing services to the consumer.
5. Pass a criminal background check, a requirement of eligibility to be a Qualified Professional.
6. Visit the consumer face-to-face in the consumer's home at least once annually.
7. If requested by the consumer, assist the consumer in developing and revising a care plan to meet the consumer's needs, as assessed by the public health nurse.
8. Based on the public health nurse assessment, determine which tasks are to be supervised by the QP or physician and which tasks can be safely supervised by the consumer or responsible party. Health-related tasks are required to be under the direction of a QP or physician.
9. If requested by the consumer, assist the consumer in the orientation, training, supervision and/or evaluation of their PCA staff.
10. Accurately document time worked and services provided for consumer by promptly completing and signing time sheets. Submit time sheets to Bella Mente Inc. bi-weekly to be paid every two weeks according to the payroll schedule. Time sheets can be submitted via U.S. Mail or delivered in person and must be received in the office by 5:00 pm each Monday.
11. As a matter of courtesy, give the consumer a minimum of two weeks' notice if I want to terminate employment as their Qualified Professional.
12. Report any suspected abuse, neglect, or financial exploitation of the consumer to the appropriate authorities.

### **Personal Care Assistant Roles and Responsibilities**

As a personal care assistant employed by the consumer and Bella Mente Inc., I agree to the following responsibilities:

1. Enter into a written agreement with the consumer and Bella Mente Inc., as joint employers, before providing services to the consumer.
2. Complete all required forms and provide necessary information to Bella Mente Inc., including criminal background check verification, prior to providing services to the consumer.

3. Pass a criminal background check, a requirement of eligibility to be a personal care assistant.
4. Obtain training from the consumer, with assistance from a Qualified Professional (if applicable), to ensure I can satisfactorily perform all responsibilities in the consumer's plan of care.
5. Work at scheduled times as determined by the consumer, notifying the consumer of changes as early as possible to arrange for backup assistance.
6. Provide and document personal care services for the consumer as specified in their plan of care, following written and oral directions from the consumer.
7. Assist with activities of daily living (ADLs) as directed.
8. Inform the consumer about all visible bodily changes that may need medical attention.
9. Keep consumer's personal life confidential and adhere to data privacy.
10. Observe and stay alert to ongoing instructions by the consumer.
11. Respect the privacy of the consumer's personal property.
12. While working within the consumer's home, maintain respect as a professional and focus on job-related activities. Perform duties in an ethical matter, preserving and respecting the rights and dignity of the consumer.
13. Be present when working with the consumer in their service environment, and leave only when the shift is completed.
14. Communicate respectfully and directly to the consumer regarding services.
15. When assisting with the transportation of the consumer, request that seat restraints are used properly and consistently.
16. Follow safety procedures and work to identify my safety needs and those of the consumer.
17. Support the consumer when they participate in community activities, relationships and involvement with others.
18. Comply with policies, procedures and training provided by the consumer and/or Bella Mente Inc.
19. If I am unavoidably going to be late for a scheduled work shift, I will make every attempt to notify the consumer.
20. Accurately document time worked for consumer and cares given by promptly completing and signing time sheets. Submit time sheets to Bella Mente Inc. weekly to be paid every two weeks according to the payroll schedule. Time sheets can be submitted via U.S. Mail or delivered in person and must be received in the office by noon each Wednesday.
21. As a matter of courtesy, give the consumer a minimum of two weeks' notice if I want to terminate my employment as their PCA.

