PAA Requirements Quick Reference Guide

This document outlines common requirements for Personal Assistance Agencies (PAA) in the service delivery of Home and Community Based Services (HCBS) including the Aged & Disabled (A&D) Waiver and Personal Care Services (PCS). **This document does not contain all the requirements** as outlined in the Medicaid Provider Agreement, Additional Terms and Idaho Administrative Procedure Act (IDAPA).

STAFF

RN Oversight

All agencies must have an RN available to perform the following:

- Ensure that assessments accurately reflect and address the participants' needs and supports
- Ensure that Service Plans reflect the participants' personal care needs as identified in the Uniform Assessment Instrument (UAI)
- Ensure that all staff understand and can implement the Service Plan
- Identify Significant Changes in the participants' needs and complete and submit Significant Change form

Source reference: Medicaid Provider Agreement Additional Terms, IDAPA 16.03.26.553.02

Quality Assurance program

A successful program should assure service delivery in accordance with applicable rules. Audits and site visits may be conducted by agency personnel, but agencies are strongly encouraged to include RN Oversight.

- **Quarterly audits** should be conducted by the agency RN or an appropriate staff member. The number of quarterly audits conducted is at the discretion of the agency and should ensure that the Service Plan is being followed
- **Quarterly site visits** should be conducted by the agency RN or an appropriate staff member. The number of quarterly site visits conducted is at the discretion of the agency. Site visits are intended to ensure that the participant's needs are being met in accordance with the Level of Care Assessment and that the Service Plan is available to the participant
- **Annual evaluation report –** conduct participant satisfaction or quality control reviews which should be available to the Department and public
- **Quarterly participant satisfaction surveys** and how to best utilize the survey data we send twice a year

Source reference: Medicaid Provider Agreement Additional Terms, IDAPA 16.03.26.554.05

Staff Training

- **Staff training** – training must follow the guidelines outlined in the Provider Training Matrix including clearly identifying the areas that are trained by the agency administration or the agency RN. Providers may elect to utilize the IDHW approved online training modules available

through Home Care Pulse or CareAcademy. Utilizing the online training modules removes the requirement for the agency RN to train staff except for special endorsements

- **Training verification** – training must be verified following the guidelines in the Provider Training Matrix Checklist. If using the online modules from IdahoCares, Home Care Pulse, or CareAcademy, training verification includes the comprehensive training certificate. The comprehensive certificate verifies that all required modules have been taken and successfully completed
- **Special endorsements** – all training of special endorsements must be completed by the agency RN as outlined by the Board of Nursing and verification must be documented

Source reference: IDAPA 16.03.26.554.03 and 16.03.26.554.05

Staff Health Screening

- All PAA employees who provide direct care services must complete a health questionnaire
- The questions identified on the questionnaire are at the discretion of the provider, however the questions must clearly address the health and wellness of the direct care service provider
- All agencies must retain the health questionnaire in their personnel files

Source reference: IDAPA 16.03.26.554.04

Criminal History

- **Criminal History** - All direct care service providers, including service coordinators, RN and QIDP supervisors and personal assistants, must participate in a criminal history check as required by Section 39-5604, Idaho Code. The criminal history check must be conducted in accordance with IDAPA 16.05.06, "Criminal History and Background Checks."

Source Reference: IDAPA 16.03.26.554.003

Electronic Visit Verification (EVV)

Electronic Visit Verification (EVV) is required for all Personal Assistance Agencies. EVV is a system that captures and validates information about a service visit to a participant's home. At minimum, the EVV system must capture the following six (6) data elements for each visit:

1. Type of service performed
2. Individual receiving the service
3. Date of service
4. Location of service delivery
5. Individual providing the service
6. Time the service begins and ends

The provider may use any compliant EVV system, however all providers must complete testing and receive production credentials to successfully submit data to the state's aggregator. As a new provider, testing and production credentials must be completed *prior to* rendering and billing for applicable services.

All visits for the following services must be captured and validated by your agency's EVV system. Data for these visits must be submitted to the state's aggregator system, Sandata, in order for your claims to process as expected.

- State Plan Personal Care Services (T1019)
- Aged and Disabled Waiver Services including:
    - Attendant Care (S5125)
    - Homemaker Services (S5130)
    - Respite *(*T1005)

Source Reference: IDAPA 16.03.26.054

PARTICIPANT DOCUMENTATION

Service Plan

Signatures

- **Signatures –** the service plan must be signed by the participant or their legal authority and all individuals responsible for the implementation and development of service delivery

Source Reference: IDAPA 16.03.26.543.01, 16.03.26.553.04 and 16.03.26.536.02

Goals and Outcomes

- All goals and outcomes must be participant centric and reflect individually identified goals and desired outcomes
    - **Goals:** Participant-centric goals should be observable and measurable having one or more objectives that lead to the outcome
    - **Outcomes**: Outcomes follow the direct intention of the goal, but elaborate on the who, what, where, why and how the goal will be achieved

Examples

- **Goal**: Decrease swelling in legs and walking more often
- **Outcome: Work** with caregiver to create a low salt diet to follow. Keep legs elevated when sitting

Source reference: 16.03.26.536.01

Backup Plan

- **Backup Plan** – a plan to identify emergency response to ensure the participant health and safety must be included in the Service Plan

Source reference: IDAPA 16.03.26.536.01

Risks & Interventions

- **Risks and Interventions** – must be clearly identified within the service plan. It is recommended that the risk and intervention for all appropriate Activities of Daily Living (ADL) be identified as well as an overall Risk and Intervention plan

Source reference: IDAPA 16.03.26.536.01

Updating the Service Plan

- **Current Service Plan –** the service plan must be revised and updated at least annually or based upon a change in the participants needs (Significant Change). An addendum to the original

service plan is acceptable if both the original and addendum that outlines the changes are available in the participants' home and the providers' location.

Source reference: IDAPA 16.03.26.543.01

Service Plan must be based on the Assessment

- The Service Plan must be based on the result of the assessment

Source reference: IDAPA 16.03.26.543.01

Progress Notes

Providers are responsible to document each visit made and service provided to the participant and must record, *at a minimum,* the following:

- **Date and Time of visit**
- **Services provided during the visit**
- **Narrative –** including an observation of the participants response to services delivered and changes in the participants' condition
- **Length of visit –** including time in and time out
- **Signatures and dates -** by the participant and/or legal guardian and the caregiver

Note: The above elements may be captured in a compliant EVV system. It is the responsibility of the provider to ensure that all requirements are captured either in the EVV system or through another mechanism.

Source Reference: IDAPA 16.03.26.543.02

Policies and Procedures

Providers are responsible for the development and maintenance of the following policies and procedures as outlined in the Aged and Disabled Waiver / Personal Care Services Additional Terms as well as a policy for EVV:

- Personnel
- Participant Acceptance
- Participant Rights and Responsibilities
- HIPAA
- Participant Choice
- Participant Grievance
- Employee Grievance
- Service Delivery
- Health and Safety
- Quality Assurance

Source reference: Aged and Disabled Waiver / Personal Care Services Agreement Additional Terms A-5

Additional Resources

For additional information and resources developed specifically for providers, including Provider Help Aids, please visit our website at Long Term Care Provider Enrollment and General Information | Idaho Department of Health and Welfare.

VERSION HISTORY

Date	Version	Comment
02/2026	v1.5	Added version history, IDAPA update
08/2026	v1.6	Added IdahoCares info, accessibility update

The information outlined herein is not new law but is an agency interpretation of existing law, except as authorized by law or as incorporated into a contract. To seek additional information or provide input on the agency guidance document please reach out to BLTCQA@dhw.idaho.gov.