

IRIS (Include, Respect, I Self-Direct) Support Services Provider Training Standards



**WISCONSIN DEPARTMENT
of HEALTH SERVICES**

Division of Medicaid Services
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I. Purpose

This document describes the purpose, standards, and required documentation for training for workers delivering supportive home care (SHC), respite, and life skills training and education in the Include, Respect, I Self-Direct (IRIS) program. These standards apply to all provider types listed under [Section III.A](#) of this document. Note that references to participants always imply the inclusion of legal decision makers.

The training standards are meant to ensure that:

- Participants receive safe, quality, and effective care from competent workers.
- Workers understand each individual participant as a whole person.
- Workers become familiar with the relevant policies and procedures of the IRIS program.

These standards balance participants' opportunities to select, train, and direct the individuals who provide their care with the State's responsibility to ensure that providers of home and community-based waiver services are qualified.

II. Definitions (for the purposes of this document)

1. **Supportive home care, respite, and life skills training and education** refers to support services provided in an otherwise non-regulated private residence and the community, as defined the approved IRIS 1915(c) home and community-based services (HCBS) waiver.
2. **Supportive home care agency, respite agency, and daily living skills training agency** refers to applicable agencies with a valid Medicaid provider's agreement to provide the waiver-defined services in the IRIS program and employ direct-care workers. An IRIS participant may purchase services from an agency. In those instances, the agency is the sole employer of the direct-care workers.
3. **Fiscal employer agent (FEA)** means an entity that performs payroll functions and other employer responsibilities required by federal and state law on behalf of the participant.
4. **Co-employment agency** means an agency that functions as the legal employer of participant-selected workers and performs necessary payroll and human resource functions, while the participant functions as the co-employer or managing employer of the workers.

5. **Participant** means an individual enrolled in the IRIS program who is self-directing their supports and services.
6. **Participant-Hired Worker (PHW)** refers to an individual worker that is hired, trained, and managed by the participant directly.
7. **Provider-controlled settings** refers to a setting in which participants who are not related to the provider or operator reside and receive support and services above the level of room and board, and:
 - a) The provider has a direct or indirect financial relationship with the property owner but does not lease or own the property, or
 - b) The property owner or provider has influence over which service providers the participant uses, or
 - c) The provider has influence over whether a participant is accepted for residency, or
 - d) The provider holds the lease or title to the home in which the participant resides.
 - e) A setting in which participants who are not related to the provider or operator reside and received support and services above the level of room and board.
8. **Vulnerable or high-risk participant** means a participant who is dependent on a single caregiver, or two or more caregivers, all of whom are related to the participant or all of whom are related to one another, to provide or arrange for the provision of nutrition, fluids, or medical treatment that is necessary to sustain life and does not utilize IRIS Self-Directed Personal Care (SDPC) services. At least one of the following applies to the participant:
 - a) Is nonverbal and unable to communicate feelings or preferences
 - b) Is unable to make decisions independently
 - c) Is clinically complex, requiring a variety of skilled services or high utilization of medical equipment
 - d) Is medically frail

III. Employment models

A. Three models

1. **Agency-based services:** A participant may choose to purchase services from an applicable service agency provider. The provider agency, having enrolled with Wisconsin Medicaid, provides services to the participant. The agency employs workers to provide services to the participant. A participant may have choice among agency workers and may change agency providers. The participant does not have an

employer-employee relationship with the worker. In that situation, the agency remains responsible for all employer functions.

2. **Agency/Participant co-employer (Agency of choice):** A provider organization serves as the primary or legal employer of participant-selected workers, while the participant serves as the secondary or managing employer.
3. **Common law employer:** The participant serves as the employer of individually hired staff, known as participant-hired workers. The participant is responsible for all employer functions, such as hiring, training, and managing staff.

B. Responsibility for compliance

Compliance with these requirements is required for all participants receiving SHC, respite, and/or life skills training and education in a non-regulated private residence and the community. Ensuring compliance for a vulnerable or high-risk participant requires the entity or entities (indicated below) to collaborate with the participant's IRIS consultant agency (ICA) to employ heightened diligence around participant-focused health and safety needs.

1. **Agency-based services:** The agency is responsible for ensuring its workers meet these training and must provide a signed attestation to verify. The agency may, but is not required to, provide opportunities for participants to provide the required worker training where the participant is willing and able to do so.
2. **Agency/Participant co-employer:**
 - a. The co-employment agency and the participant shall jointly determine the appropriate division of responsibility for assessing worker's training needs and providing or obtaining that training.
 - b. The participant may decline this responsibility and compliance with these requirements shall then be the responsibility of the co-employment agency.
 - c. If the participant assumes this responsibility, the co-employment agency shall document that any participant assessment of worker's training needs is reasonable, and that any participant-provided training is adequate.
 - d. If the co-employment agency believes that the participant's assessment of worker training needs or participant-provided training is inadequate to ensure participant's health, safety, welfare, service quality, or compliance with waiver requirements, the co-employment agency shall, with the

participant's agreement, assume these functions. In these instances, the agency needs to document this decision and its justification.

- e. The co-employment agency shall ensure that any needed worker training not provided or obtained by the participant is provided to the worker. In the event the participant objects to this training, the agency should document this and must work to address the participant's training concerns before moving forward.
3. ***Participant as common law employer:*** The participant is responsible for ensuring that the participant-hired worker has received sufficient training and education, and that it complies with minimum training standards listed in [Section VII](#).

IV. Types of Support Services

Training requirements within these standards cover the entirety of SHC, respite, and life skills training and education service categories, including SHC sub-categories routine services, companion services, and chore services. Workers who provide these services must comply with the standards described in this document.

V. Agency worker training standards

Agency workers who provide SHC, respite, and life skills training and education services must receive training on the following subjects (unless waived per [Section VI](#)):

1. ***Policies, procedures, and expectations*** for workers, including Health Insurance Portability and Accountability Act (HIPAA) compliance and other confidentiality requirements; ethical standards, including respecting personal property; restrictive measures; refrain from influencing participant to either enroll, or not enroll in, or to disenroll from Medicaid programs; safely providing services to participant; electronic visit verification (EVV) requirements for workers providing routine SHC services; and procedures to follow when unable to keep an appointment, including communicating an absence and initiating backup services.
2. ***Billing and payment process and relevant contact information***, including recordkeeping and reporting; contact information, including the name and telephone number of the primary contact person at the agency, the participant, and co-employment agency, if applicable. Providers of routine SHC services must also comply with EVV requirements.

3. **Recognition of, and response to, an emergency**, including protocols for contacting local emergency response systems; prompt notification of the agency and the participant's co-employment agency, if applicable; and notification of the contacts provided by the participant and ICA.
4. **Participant-specific information** including individual needs, functional capabilities, relevant medical conditions, strengths, abilities, participant preferences in provision of assistance, service-related outcomes and coordination, and the IRIS consultant (IC) contact information. (Per [Section III.B.3](#), the participant may provide this training component in whole, or in part.)
5. **Providing quality homemaking and household services**, including understanding good nutrition, special diets, and meal planning and/or preparation; understanding and maintaining a clean, safe, and healthy home environment; respecting participant preferences in housekeeping.
6. **Working effectively with participants**, including appropriate interpersonal skills; understanding and respecting participant direction, individuality, independence and rights; procedures for handling conflict and complaints; cultural differences and family relationships. This component should include training on behavioral support needs, if applicable.

Note: While all six areas of this section must be addressed in the training of SHC, respite, and life skills training and education workers, the type and depth of information provided may not need to be as extensive for those providing solely chore services.

VI. Waiver of agency worker training requirements

1. **Waiver.** Some or all of the required training may be waived based on knowledge, credentials, and/or skills attained through prior experience (for example, as a personal care worker for a Medicaid-certified personal care agency or certified nursing assistant). Responsibility for making, completing, and maintaining documentation of such a waiver shall be based on the protocols in [Sections III.B.](#) and [VIII](#). When a waiver is granted, the responsible entity or entities must ensure that a worker performing medically oriented tasks is competent in performing these tasks with the specific participant.

Note: Notwithstanding any waiver under Subsection 1. of this section, such workers will likely need agency and participant contact information, information on billing, payment, documentation, and any other relevant administrative requirements, protocols for emergencies, and participant-specific information.

2. **Documentation.** For workers waived from some or all of the training requirements under Subsections 1. of this section, the responsible entity (pursuant to [Section III.B.](#)) making the waiver decision shall maintain copies of credentials or other documentation of their existence, or a written rationale for waivers based on experience, signed and dated by that entity. The documentation shall meet the requirements in [Section VIII.](#)

VII. Individual worker (PHW) training standards

Participants assure that individual workers or PHWs who provide SHC, respite, or life skills training and education services have the ability and qualifications to provide this service, and meet the following training and credentialing standards:

Experience requirements, including a minimum of two years of experience with the target population in providing this service or similar services. Additionally, the individual worker or PHW may be provided with person-centered training by the participant, as necessary.

VIII. Completion and documentation of training

1. *Timeframes*

Training shall be completed and documented prior to providing SHC, respite, or life skills training and education services without supervision. See [Section VIII.3](#) for documentation requirements.

2. *Responsibility for creating and maintaining documentation*

- a. For agency-based services, the agency shall document the training and any waivers and maintain the documentation.
- b. For participants who are common-law employers, the co-employment agency shall document the training and any waivers and maintain the documentation.
- c. For participants who are the employers, the participant shall sign the IRIS Participant Education Manual: Acknowledgement detailing their responsibility to ensure their participant-hired workers are trained to meet all support needs. This signed document should be stored in the Wisconsin Department of Health Services (DHS) IRIS enterprise care management system.
- d. This documentation shall be made available to the ICA, FEA, or DHS when requested.

3. **Content of documentation**

- a. For agency-based services and participants who are co-employers, documentation shall list the training content and the dates such training occurred. If any waivers have been granted, this also needs to include any credentials and/or rationale that are the basis for any training waiver per [Section VI](#). Documentation that training requirements have been met through provision of training and/or waiver shall be signed and dated by the entity or entities making those decisions.
- b. For participants who are employers, documentation content and expectations are captured within the IRIS Participant Education Manual: Acknowledgement.

4. **Additional training**

The entity responsible for making and documenting training decisions shall ensure workers complete appropriate additional training, including any necessary annual trainings, if the worker's job duties change and their role requires additional knowledge or skills.

IX. General requirements

1. **Participant provider service agreements required**

Note: Provider service agreements are not required for providers who solely provide SHC chore services.

- a. When a participant selects agency-based services, the participant and agency must have a contract or written agreement in place, and it must be accessible to the participant and their ICA.
- b. When a participant is a co-employer with an agency, the participant, agency, and worker must have a three-way contract or other written agreement. Alternatively, at the discretion of the participant, there shall be separate agreements between the involved parties.
- c. When a participant is the employer, there is no contract or other written agreement required.

2. **Required content of the participant provider service agreement**

- a. **Provision of services:** Scope of services to be provided, compensation, and the amount of service authorized for the participant.

- b. **Documentation of worker trainings:** Worker training requirements and the entities responsible for ensuring workers meet them, including the determination of waivers, and the entities responsible for creating and maintaining documentation of compliance, in accordance with this document.
 - c. Emergency response protocol.
 - d. Back-up services plan(s).
 - e. Billing and payment methods.
 - f. **Term and termination:** The provider agreement specifies the start date of the provider agreement and the means to renew, terminate, and renegotiate. The provider agreement specifies the ability to terminate and suspend the provider agreement based on quality deficiencies and a process for the provider appealing the termination or suspension of decision.
 - g. **Notices:** The provider agreement specifies a means and a contact person for each party for purposes related to the provider agreement (for example, interpretations, provider agreement termination).
 - h. **Sanctions/Criminal investigations:** The provider must notify the participant of any sanctions imposed by a governmental regulatory agency and/or regarding any criminal investigation(s) involving the provider.
 - i. **Cooperation with investigations:** To the extent permitted by law, the participant provider service agreement shall require the provider to fully cooperate with any participant-related investigation conducted by APS (Adult Protective Services), DHS, the Federal Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS), law enforcement, or any other legally authorized investigative entity.
3. **Other requirements**
- a. Background check requirements (([Wis. Admin. Code § DHS 12](#) and [Wis. Stat. § 50.065](#)), as applicable.
 - b. All required documentation must be readily accessible and available to DHS, CMS, or its designees.

X. Reference materials

- [IRIS 1915\(c\) Home and Community-Based Services \(HCBS\) Waiver](#)
- [IRIS provider agreement\(s\)](#)
- [Vulnerable and High Risk Participant, P-03128](#)
- [IRIS Background Check, P-00708E](#)
- [Electronic Visit Verification \(EVV\)](#)
- [Training Workers for Electronic Visit Verification, P-02851](#)
- [Restrictive Measures Guidelines and Standards, P-02572](#)
- [ICA Toolkit for Adult Long-Term Care Provider Enrollment](#)
- [Provider Enrollment for Adult Long-Term Care](#)
- [Medicaid Standards for 1-2 Bed Certified Adult Family Homes](#)
- [IRIS Participant Education Manual](#)