

Provider agency/FMS provider requirements for enhanced rate or budget

Note: Effective Jan. 1, 2022, the eligibility for the enhanced/rate budget changed from 12 hours per day of PCA to 10 hours per day. This change is reflected on this page.

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Legal authority	Federally approved BI, CAC, CADI, DD and EW waiver plans, Minn. Stat. §256B.06 subd. 17a , Minn. Stat. §256.476, subd. 11 , Minn. Stat. §256B.0913	
Applicability	This page applies to workers who provide the following programs/services: <ul style="list-style-type: none">• Personal care assistance (PCA)• Extended PCA• Consumer Support Grant (CSG). For information and instructions on the enhanced budget for CDCS participants, see CDCS – Enhanced budget process .	
Background	Some PCA and CSG workers are eligible for enhanced wages or benefits if they complete qualifying trainings. Details For workers in PCA traditional, PCA Choice, extended PCA and CSG, a 7.5% enhanced rate or budget is available for work that is both: <ul style="list-style-type: none">• Provided by a worker who has completed qualifying trainings• Provided to a person who is eligible for 10 or more hours per day of state plan PCA and/or has the home care rating EN. Note Extended PCA hours do not count toward eligibility for the enhanced rate. However, if a person is eligible for 10 or more hours of state plan PCA and has a qualifying worker, the enhanced rate also applies to their extended PCA rate.	
Qualifying training	To qualify for the wage/benefit increase resulting from the enhanced rate or budget, workers need to complete qualifying trainings. The worker must submit documentation of completion of qualifying trainings on the Minnesota Direct Support Worker Training website . Tracking qualifying training PCA provider agencies and financial management services (FMS) providers should encourage workers to review DHS – Qualifying for the enhanced rate . It has information about how to register for qualifying trainings and submit documentation of completed trainings. If the worker qualifies for the wage/benefit increase using a license or certification, their eligibility expires when that license or certificate expires. The worker is responsible to submit proof of continuing eligibility (i.e., an updated certificate or license or proof they completed another qualifying training) on the Minnesota Direct Support Worker Training website before their eligibility expires in order to remain qualified. If the worker fails to remain qualified, the provider agency will no longer receive the enhanced reimbursement. The process to update the individual provider enrollment file can take up to 30 days after the DHS contractor verifies recertification. Workers should start the recertification process before their license or certification expiration date to avoid a lapse in enhanced reimbursement to the provider agency.	
Passing on the increase	PCA traditional, PCA Choice and extended PCA Starting on the date the worker qualifies, the PCA provider agency must pass on the 7.5% enhanced rate in wages and/or benefits to the specific worker who both: <ul style="list-style-type: none">• Completed the qualifying trainings• Is providing the services to a person who meets eligibility requirements. CSG FMS providers work with the person to add the additional information to the CSG	

	<p>plan to give the qualified worker(s) a 7.5% wage or benefit increase (see CSG process for FMS providers).</p>
<p>Process for PCA provider agencies</p>	<p>This section includes instructions for:</p> <ul style="list-style-type: none"> • State plan PCA not on a waiver (type B service agreement) • State plan PCA on a waiver or Alternative Care (AC) • Extended PCA on a waiver. <p>Instructions for eligible people with qualified workers</p> <p>At initial assessment or reassessment, if the person meets eligibility requirements:</p> <ol style="list-style-type: none"> 1. The assessor confirms the person's eligibility for the enhanced rate and enters the eligibility on the service agreement 2. The assessor authorizes the enhanced rate on the service agreement 3. The DHS contractor sends the worker a confirmation letter that they completed the qualifying training 4. The DHS contractor notifies DHS that the worker has completed the qualifying training, and DHS updates the worker's provider file 5. The worker shows the confirmation letter, including the expiration date, if applicable, to the provider agency 6. The provider agency bills at the enhanced rate 7. DHS pays the claim at the enhanced rate when the worker listed on the claim is a qualified worker 8. Effective the date on the worker's notification letter, the provider agency passes on the increase to the worker in wages and/or benefits. <p>Instructions for eligible people without qualifying workers</p> <p>At initial assessment or reassessment, if the person meets eligibility requirements:</p> <ol style="list-style-type: none"> 1. The assessor confirms the person's eligibility for the enhanced rate and enters the eligibility on the service agreement 2. The assessor authorizes the enhanced rate on the service agreement 3. The provider agency bills at the enhanced rate 4. DHS adjusts the claim to the non-enhanced rate.
<p>Process for FMS providers</p>	<p>People who receive CSG always have the option of working with their FMS provider to change a worker's wage (within program rules).</p> <p>At initial assessment or reassessment for CSG, if the person meets eligibility requirements:</p> <ol style="list-style-type: none"> 1. The assessor confirms the person's eligibility for the enhanced budget 2. The assessor indicates the person is eligible in the service agreement and either: <ul style="list-style-type: none"> • Enters the regular budget if the person has identified a qualifying worker and submits a request for an enhanced budget by following instructions on CBSM – PCA and CSG enhanced rate/budget MMIS instructions • Enters the regular budget if the person has not yet identified a qualifying worker. <p>If the FMS provider needs to modify an existing service agreement to include enhanced budget information, the provider must follow instructions in the modifying service agreements section.</p>
<p>Modifying existing service agreements</p>	<p>Lead agencies, PCA provider agencies and FMS providers can request changes to a service agreement to authorize the enhanced rate/budget when the person both:</p> <ul style="list-style-type: none"> • Qualifies for 10 or more hours per day of PCA and/or has the home care rating EN at their most recent assessment • Has a qualified worker. <p>In this situation, the person's current service agreement must end and a new one must be entered without completing a reassessment.</p>

PCA not on a waiver

The PCA provider agency uses [PCA Technical Change Request form, DHS-4074A \(PDF\)](#) to request the enhanced rate from DHS. On DHS-4074A, the provider agency should:

- Select "other" under request type
- Complete the "recipient information" and "provider agency information" sections
- Enter "Request for enhanced rate on SA #[insert number]" and the effective date the person and the worker met all criteria in the "additional information" section
- Submit the form by following the instructions on DHS-4074A.

DHS will verify the person's eligibility and take the following steps:

- Coordinate dates/units, as needed, with the PCA provider agency (and other home care providers on the service agreement, if applicable) to end the service agreement
- Enter a new service agreement that indicates eligibility for the enhanced rate and any other services from the previous service agreement
- Generate a new service agreement letter through MMIS.

The service agreement span from the original assessment will remain the same.

The PCA provider agency can begin billing at the enhanced rate once all steps are completed.

PCA on a waiver or AC

The PCA provider agency and/or the person notifies the case manager of a qualified worker. The case manager will verify the person's eligibility and take the following steps:

- Coordinate with the person, PCA provider agency and other providers to end the current service agreement on a future date, to avoid claim takebacks
- Enter a new service agreement that indicates eligibility for the enhanced rate, with PCA line items using the enhanced rate and code, as well as any other services from the previous service agreement.

The service agreement and waiver/AC span from the original assessment will remain the same.

The PCA provider agency can begin billing at the enhanced rate once all steps are completed.

CSG

If the a qualifying worker is identified after the assessor enters the service agreement:

1. The DHS contractor notifies the worker that they completed the qualifying training

2. The worker shows the notification to the person who receives CSG

3. The person who receives CSG gives the notification to their FMS provider

4. The FMS provider uses [PCA Technical Change Request form, DHS-4074A \(PDF\)](#)

request the enhanced budget from DHS. On DHS-4074A, the FMS provider should:

- Select "other" under request type
- Complete the "recipient information" and "provider agency information" sections
- Enter "Request for enhanced budget on SA #[insert number]" and the effective date the person and the worker met all criteria in the "additional information" section

	<ul style="list-style-type: none"> • Submit the form according to instructions on DHS-4074A <p>5. Once DHS receives DHS-4074A, DHS will check to see if the person who receives CSG is eligible, update the eligible person's budget and generate a service agreement letter through MMIS</p> <p>6. The person and FMS provider will add the additional information to the plan to give the qualified worker(s) a 7.5% wage or benefit increase.</p>
<p>Additional information</p>	<p>Stipend A worker who completed qualifying trainings qualified for up to two \$500 stipends when they worked with a person who is a participant in PCA Choice, CDCS or CSG. Note: Stipend funding has been exhausted, and stipends are no longer available.</p> <p>Questions from workers Workers might ask the provider agency or FMS provider for clarification about:</p> <ul style="list-style-type: none"> • Whether the people with whom they work are participating in PCA Choice, PCA traditional, CDCS or CSG • Whether a person meets eligibility requirements • The worker's Unique Minnesota Provider Identifier (UMPI). <p>Information for providers who work with MCOs Providers working for a person who receives PCA or CDCS through a managed care organization (MCO) must check with the MCO about how it manages the enhanced rate or budget.</p> <p>Related information CBSM – PCA and CSG enhanced rate/budget MMIS instructions (information for lead agencies) CDCS – CDCS enhanced budget process (information for lead agencies, participant FMS providers and workers) DHS – Self-directed service options</p>