

# Provider Transition/Transfer Plan Proposal - 2016

**Direction Home Akron Canton** (Area Agency on Aging) is seeking proposals from our provider network addressing the capacity of an agency or organization to be able to rapidly absorb a number of new consumers in the event of some other organization's sudden calamity or closure. We're updating the proposals submitted by providers in 2015 as well as welcoming proposals from other providers who hadn't previously submitted a proposal. **Proposals target the following services: Personal Care, Homemaker, Home-Delivered Meals, Adult Day Services, Skilled/State Plan/Medicare Services.**

**RATIONALE:** When DHAC had one of our providers close their doors suddenly, several agencies stepped up and offered to take the consumers that suddenly found themselves without a service provider, and we certainly appreciate that multiple providers were prepared to assist. With this in mind, we've formalized our appraisal of the capacity of our providers of the above services so we'll be better prepared if such an incident should happen again.

Such events, though unfortunate, also create the opportunity for other providers to expand their client base. With this in mind, we'd like to ask those providers who would like to be considered in the future to receive a rapid influx of consumers in such a situation to submit a proposal realistically assessing the capacity of your organization to rapidly absorb consumers and possibly direct-service staff (especially in the case of PCS/HMK).

These completed proposals will be maintained in the offices of Direction Home as a resource in the event of another agency's calamity or closure. We'll use the proposals submitted to target our efforts at locating replacement services for consumers and giving preference to providers when consumers are left in the lurch by a sudden provider closure.

## **SUBMITTING A PROPOSAL:**

Keep in mind the priorities of Direction Home:

*Assurance of the health and safety of the consumer  
Continuity of care for the consumer  
Consumer Choice*

**A WORD OF CAUTION:** If a determination is made that a block of consumers need to be rapidly transferred to another provider, and your company agrees to take on (some/all of) these consumers, your company also accepts the responsibility of assuring that you're able to comply with the priorities of Direction Home (above), as well as the Conditions of Participation and Service Specifications governing the respective service(s). Failure to do so could result in non-compliance citations and sanctions. With this in mind, providers are encouraged to be *realistic* in their self-assessment of their ability to assume responsibility for what could be a significant number of consumers on short notice. How will you mobilize your staff to do intake on a group of consumers and quickly initiate service? Again, be realistic.

**To submit a proposal, complete the attached form and submit the completed form back to [QualityAssurance@DirectionHomeAkronCanton.org](mailto:QualityAssurance@DirectionHomeAkronCanton.org) no later than March 18, 2016.**

We appreciate the efforts of our provider network in maintaining the independence of our mutual clientele and hope to continue this successful partnership well into the future. And being well-prepared is one more way we can all assure the health and safety of our consumers.

Thanks again!

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**PROVIDER NAME:**   
**DBA NAME:**   
**ADDRESS:**   
**CITY, STATE, ZIP:**

Total number of offices (branch and/or home) in the 10B region (Portage, Stark, Summit, Wayne Co.)	
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Please indicate in the table below which services you're certified for by the respective payment source. Do not check a payment source unless you have been certified by and/or have a contract with that payor.

<i>My company is certified by or contracted with - ----&gt;</i>	PASSPORT	Care Coordination	Ohio Home Care	State Medicaid	CareSource	United Healthcare	Medicare
Adult Day Serv. - Enhanced							
Adult Day Serv. - Intensive							
Chore							
Emergency Response Syst.							
Home-Delivered Meals							
Home Medical Equipment							

<i>My company is certified by or contracted with - ----&gt;</i>	PASSPORT	Care Coordination	Ohio Home Care	State Medicaid	CareSource	United Healthcare	Medicare
Personal Care							
Homemaker							
Social Work/Counseling							
Transportation							
Skilled Services (PT, OT, ST, RN)							
Other (write in)							

Looking at the service specifications for your respective service(s), please respond to the following:

Current number of direct-service staff employed and available

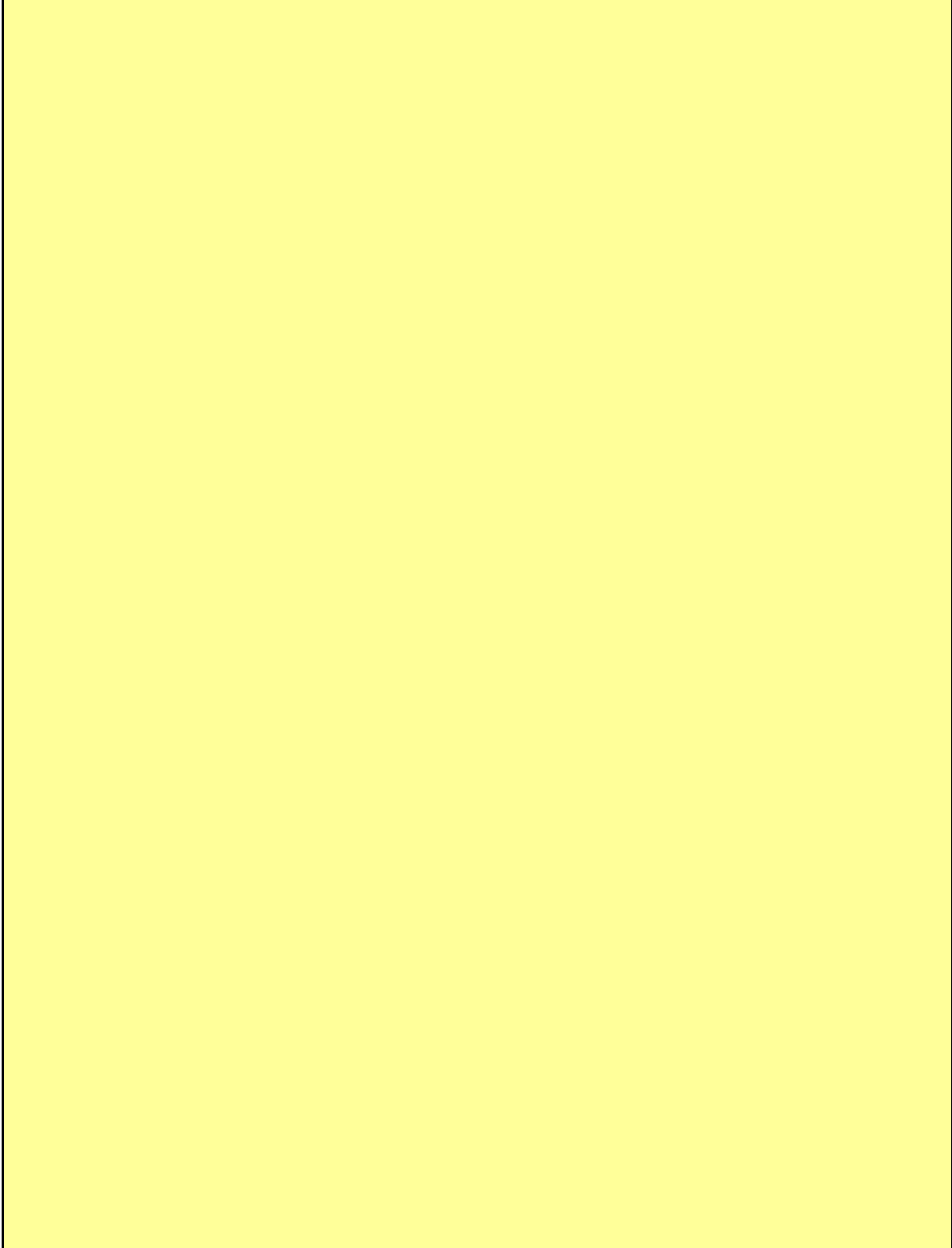
Estimated number of new cases that can be opened and started per day (maintaining compliance with regulations)

Estimated number of new staff/employees your HR department can process & hire per day (maintaining compliance with regulations) if needed/available

**Please also respond to the next four additional questions**

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- 1 If another provider of your service were to suddenly shut down and their consumers and employees suddenly became available, explain how your HR Department would rapidly process, orient, and train new employees to meet the needs of a sudden influx of consumers.



**2** Summarize your company's policy/procedure for covering shifts and assuring service delivery in the event of staff absences and call-offs.

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**3** Summarize your emergency plan, policy, and/or procedure for agency and service continuity in the event of calamities such as severe weather, including how your consumers are notified of agency closure, service suspension or cancellation.

A large, empty yellow rectangular area with a black border, occupying the majority of the page below the question. It is intended for the user to provide a detailed summary of their emergency plan, policy, and/or procedure for agency and service continuity in the event of calamities such as severe weather, including how consumers are notified of agency closure, service suspension, or cancellation.

4 Any other information that would support your ability to rapidly absorb a number of new consumers, and possibly staff, in the event another provider of your service were to suddenly close their doors and leave their consumers in need of a new service provider.

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Providers who submit a plan to Direction Home Akron Canton will be considered to receive a transfer of consumers (and possibly staff) in the event that another provider should close down suddenly. The information provided here will help us better match the consumers with providers who can meet their needs in various programs and for various payment sources, and are prepared to accept new consumers upon short notice.

**Please submit your Provider Transition/Transfer Plan by Friday March 18, 2016** to Direction Home Akron Canton at [QualityAssurance@DirectionHomeAkronCanton.org](mailto:QualityAssurance@DirectionHomeAkronCanton.org).

*Thanks as always for partnering with Direction Home Akron Canton!*  
*We're all better together!*

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