



EPD WAIVER PROGRAM PARTICIPANT HANDBOOK

District of Columbia Department of Health Care Finance
899 N. Capitol Street, NE, Washington, DC 20002
Sixth Floor
Phone (202) 442-5988
www.dhcf.dc.gov

*A User's Guide for
the Elderly &
Persons with
Physical
Disabilities (EPD)
Waiver Program*

EPD Waiver Participant Handbook

Table of Contents

Notice of Non-Discrimination	4
DHCF Director’s Welcome Letter	5
Introduction.....	6
Your Rights and Responsibilities.....	6
Office of the Health Care Ombudsman and Bill of Rights.....	8
Services if You Don’t See, Hear, or Speak English Well.....	8
What is Long Term Care?.....	9
What is a Waiver?.....	9
What is the EPD Waiver Program?	10
EPD Waiver Services include:.....	11
Case Management Services	11
Homemaker Services	11
Respite Services	11
Chore Services	11
Personal Care Aide Services (PCA)	12
Personal Emergency Response Services (PERS)	12
Assisted Living	12
Environmental Accessibility Adaptation Services (EAA).....	12
Roles: Who Does What?.....	12
Case Manager.....	12
Homemaker.....	13
Personal Care Aide (PCA).....	13
HOW TO ENROLL IN THE EPD WAIVER	14
The First Step: Getting on the Waiting List	14
The Second Step: Selecting a Case Management Agency.....	14
The Third Step: Assessment of Your Needs and Application for the EPD waiver	15

2 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant’s family and social supports.*

The Fourth Step: Determination of Your Financial and Other Medicaid Eligibility.....	16
Yearly Recertification.....	1616
How to make sure your EPD Waiver enrollment continues each year.....	1616
Freedom of Choice.....	17
Complaints/Grievances, and Fair Hearings.....	1717
Complaints/Grievances	18
Complaints to Your Provider	18
Complaints to DHCF (DC Medicaid)	1818
Complaints to the DC Health Care Ombudsman	1818
Fair Hearings	1819
Avoid Medicaid Fraud	19
Important Things to Know.....	2020
Mail You Might Receive.....	2020
If you get a bill for a covered Medicaid service:	2021
If you have other insurance	21
If you have both Medicaid and Medicare	21
When you move:	21
Important phone numbers	2122
How to Request a Provider Transfer	2122
Reasons for Discharge from the EPD Waiver Program	2222
EXTRA INFORMATION.....	23
Advance Directives.....	23
Notice of Privacy Practices.....	2323
What Some Words Mean.....	2326
EPD Waiver Providers.....	2330
Community Resources.....	35
Acknowledgements.....	3936

3 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant’s family and social supports.*

Notice of Non-Discrimination

The District of Columbia Department of Health Care Finance does not discriminate on the basis of actual or perceived: race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, gender identity or expression, familial status, family responsibilities, matriculation, political affiliation, genetic information, disability, source of income and place of residence or business. Sexual harassment is a form of discrimination which is prohibited by Title VII of the Civil Rights Act of 1964. In addition, harassment based on any of the above protected categories is prohibited by the Act. Discrimination in violation of the Act will not be tolerated. Violators will be subjected to disciplinary action.



DHCF Director's Welcome Letter

Dear EPD Waiver Participant,

Welcome to the EPD Waiver Community-Based Services Program!

The mission of the Department of Health Care Finance is to improve health outcomes by providing access to comprehensive, cost-effective, and quality health care services for the residents of the District of Columbia.

In the District of Columbia, the health of our residents is a top priority. Through a combination of health programs, the DC Government provides health insurance to one out of three District residents. The largest of these programs is the Medicaid program, which is offered to qualified District residents. The EPD Waiver Program is a partnership program, offered in cooperation with the Federal Government.

Inside the EPD Participant Handbook you will find important pieces of information such as:

- What is a waiver?
- What is the EPD Waiver Program?
- A description of services offered under the EPD Waiver Program
- What to do if you have a problem accessing EPD Waiver services
- A description of your rights and responsibilities

We encourage you to take advantage of all that Medicaid offers under the EPD Waiver Program. Your health is our top priority!

Sincerely,

Wayne Turnage, Director
Department of Health Care Finance

5 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

Introduction

The purpose of the EPD Waiver User's Guide is to provide a wide range of resources for participants and their families. In broad terms, the Department of Health Care Finance, which manages Medicaid in the District of Columbia, wants waiver participants to understand the EPD Waiver: what to expect; what to do if things don't go as planned; and how to be your own best advocate.

As an EPD Waiver participant, you will know how personal care aide (PCA) services are provided, when homemaker services or chore services best suit your needs or if assisted living is the best option for you, and how to ask for respite services. You may also benefit from medically needed Environmental Accessible Adaptations (EAA) service to your home and medical emergency services that include Personal Emergency Response Service (PERS). Most importantly, you will know about what to expect from your case manager and how to work together with your case manager, who makes sure that the right services are provided for your comfort and benefit according to the requirements of the EPD Waiver program.

This handbook serves as a reference guide on everything you need to know about EPD Waiver services, including a description of: all of the Waiver services; your rights and responsibilities as an EPD Medicaid Waiver participant; and how you can file a complaint, grievance, or fair hearing. Other items have been included such as a list of EPD Waiver providers and the services they provide, and contact information for community resources in the District of Columbia in an effort to keep you organized and informed.

Your Rights and Responsibilities

Whenever you receive Medicaid services, you have a **right** to:

- Be treated with respect and dignity.
- Know that when you talk with your doctors and other providers the conversation is private.
- Have an illness or treatment explained to you in a language you can understand.
- Receive free interpretation and translation services if you need them.
- Receive or refuse oral interpretation services.

6 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

- Participate in decisions about your care.
- Receive a full, clear, and understandable explanation of treatment options and risks of each option so you can make an informed decision.
- Refuse treatment or care.
- Be free of physical and chemical restraints, except for emergency situations.
- Be able to see your medical records and to request that they be fixed if they are wrong.
- Choose a primary care provider who participates in DC Medicaid.
- Request a Fair Hearing if you believe Medicaid was wrong in denying, reducing suspending, or stopping a service or item.
- Have an opportunity to seek counsel for a fair hearing.
- Obtain medical care without unnecessary delay.
- Develop an advance directive to choose not to have or continue any life-sustaining treatment.
- Receive a copy of this EPD Waiver Participant Handbook.
- Get an explanation of prior authorization procedures.
- Receive information about Medicaid service providers, health care workers, Medicaid funded facilities, and your rights and responsibilities as a program participant.
- Make recommendations about DHCF's member rights and responsibilities policy.
- Have knowledge of available choices of providers, to participate in your care planning from admission to discharge, and to be informed in a reasonable time of anticipated discharge and/or transfer of services.

You are **responsible** for:

- Participating in monthly case management assessments with your Case Manager.
- Treating those providing your care with respect and dignity.
- Following the rules of the D.C. Medicaid Program and the EPD Waiver benefit.
- Following instructions you receive from your doctors and other medical providers.
- Going to appointments you schedule or that Medicaid schedules for you and arrive to the appointment on time.
- Asking for more explanation if you do not understand your doctor's instructions.
- Going to the Emergency Room only if you have a medical emergency.
- Trying to understand your health problems and participating in developing treatment goals.
- Helping your doctor in getting medical records from providers who have treated you in the past.
- Telling Medicaid if you were injured as the result of an accident or at work.

7 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

- Reporting to the Economic Security Administration (ESA) (formerly the Income Maintenance Administration (IMA) and your health care providers if you or a family member has other health insurance – it is okay to have other health insurance with Medicaid, but it’s important to let ESA know you have it.
- Telling ESA if you change your address.
- Notifying the provider if you are unavailable for scheduled visits.

Office of the Health Care Ombudsman and Bill of Rights

An “Ombudsman” is a person who looks into problems, makes recommendations for solutions, and helps you solve the problem.

The District of Columbia’s Office of the Health Care Ombudsman and Bill of Rights is there to:

- Tell you about and help you understand your health care rights and responsibilities;
- Help you solve problems with health care coverage, access to health care, and issues regarding health care bills;
- Advocate for you until your health care needs are addressed and fixed;
- Guide you towards the appropriate private and government agencies when needed;
- Help you in appeals processes; and
- Track health care problems and report patterns in order to help fix what is causing the problems.

The Office of the Health Care Ombudsman and Bill of Rights is an important source of help for any Medicaid beneficiary. In fact, it can help any DC resident with health insurance issues, including people with Medicare, private health insurance, or other types of health insurance. It has friendly and helpful staff who want to help you get the health care you need.

The phone number of the Office of the Health Care Ombudsman and Bill of Rights is 1-877-685-6391. You can call that phone number or go to the Office of the Health Care Ombudsman and Bill of Rights website at: <http://healthcareombudsman.dc.gov> for more information.

Services if You Don’t See, Hear, or Speak English Well

8 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant’s family and social supports.*

You have the right to an interpreter if you do not speak English very well or if you are deaf or hearing impaired.

When you call to schedule an appointment with your case manager, home health agency, doctor, or other health care provider, tell the provider's office that you need an interpreter for your appointment and ask if there is enough time before the appointment to secure interpreter services. The provider's office should request an interpreter for you or make sure an interpreter is available over the telephone during your appointment. You will not be charged for this service.

If you ask for an interpreter and do not get one, please contact the Office of the Health Care Ombudsman and Bill of Rights at 1-877-685-6391.

What is Long Term Care?

Long Term Care (LTC) refers to services that assist people who are aging, have disabilities, or have chronic care needs and who require assistance to maintain their independence in personal or health-related activities. LTC services can be provided in a person's home or in an institution. The EPD Medicaid Waiver program is a LTC service. While most people who need LTC are 65 or older, a person can use LTC services at any age. A person may use LTC services for a short period of time after an acute illness or hospitalization or over several months or years.

What is a Waiver?

A waiver is a special program designed by a State to cover needed home and community-based services (HCBS) as an alternative to receiving care in an institution such as a nursing home. To become a waiver participant, a person must qualify by meeting certain criteria.

In the past, Medicaid funds were only available for services provided in institutions. As community service systems grew, Congress recognized that people could benefit from home and community-based services as an alternative to institutional care, and created the Waiver Program so that people have a choice of where their services are provided: community-based or in nursing home.

Waivers are choice programs. The participant/representative must select the provider of services. Freedom of Choice means participants have the option to select any provider for any service for which s/he is eligible.

9 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.

Every state that operates a Waiver Program must meet certain federal rules and regulations in order to receive federal funding. These rules include assuring how the District will:

- Assure the health and well-being of individuals enrolled in the Waiver Program;
- Assure that all the service providers are qualified;
- Assure that individuals have a choice of who will provide their Waiver services.
- Assure that individuals participate in developing their service plans.

What is the EPD Waiver Program?

The EPD Waiver Program is a home and community-based waiver designed to provide the elderly and persons with physical disabilities with quality health care services in the comfort of their homes.

People are enrolled in the EPD waiver on a first-come, first-served basis and the EPD waiver program currently has a waiting list. The waiting list is on a first-come, first-served basis.

Each year DHCF receives funding from the federal government to pay for the services you receive. The Medicaid office has agreements with qualified providers who provide the services you need.

EPD Waiver Eligibility Requirements

You must meet the following EPD Waiver Program eligibility requirements:

- ✓ Be a District of Columbia resident;
- ✓ Be a U.S. citizen or qualified alien;
- ✓ Be DC Medicaid eligible with income of less than 300% of SSI (for 2012, that's \$2,094.00 per month or \$24,128 per year);
- ✓ Have no more than \$4000 in countable assets.
- ✓ Require assistance with activities of daily living (bathing, grooming, etc.);
- ✓ Be elderly (65 years of age or older);

- ✓ Be 18 to 64 years old and diagnosed as having a physical disability;
- ✓ Must meet the “Level of Care” (LOC) established for the EPD Waiver. This means your assessed needs are significant enough for you to require consistent supports and services;
- ✓ Must be found Medicaid eligible and maintain your Medicaid eligibility – more information on this is on the DC Department of Human Services website (<http://dhs.dc.gov>) at the Economic Security Administration (ESA, formerly Income Maintenance Administration (IMA)) and the Medicaid application can be found here: <http://dhs.dc.gov/dhs.dc.gov/service/medicaid-assistance>;
- ✓ Must choose home and community-based services rather than institutional services such as e those services provided through the District’s nursing home and specialty hospital programs.

EPD Waiver Services include:

Case Management Services

Case management services help the participant in many ways: to obtain services that support choice, independence, dignity, and confidentiality; and to manage and coordinate services with the individual, family members and friends of the individual, other waiver providers, and medical personnel. Monthly case management assessment visits are required for EPD Waiver participation.

Homemaker Services

Homemaker services are general household activities such as meal preparation, housekeeping, and running errands. Homemakers DO NOT provide any hands-on personal care. Allowable services include grocery shopping, meal preparation, limited general housecleaning, providing escort services (not transportation) for medical appointments, and running necessary errands such as picking up medication or mailing utility payments.

Respite Services

Respite services provide supervision, and/or assistance with activities of daily living when the primary caregiver is absent. The respite aide provides relief to the primary caregiver. Respite can be provided hourly or daily and in or out of an individual’s home.

Chore Services

Chore services are one-time non-medical household tasks, such as washing floors, windows, and walls, trash removal, and rearranging furniture in order to provide safe access and egress. Chore aides DO NOT provide hands-on personal care, meal preparation, grocery shopping, or respite services.

11 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant’s family and social supports.*

Personal Care Aide Services (PCA)

PCA services provide assistance with bathing, grooming, dressing, toileting and eating. Allowable services include assistance with range of motion exercises, meal preparation according to dietary guidelines, and an assortment of hands-on care, as well as assistance at one's place of employment.

Personal Emergency Response Services (PERS)

PERS is an electronic device that allows a person to call for assistance from a friend, relative, or an emergency services provider when help is needed. PERS cannot be provided to an individual who is unable to understand and/or fails to demonstrate proper use of PERS.

Assisted Living

Assisted living consists of a licensed home in which participants can live in and have access to and receive all of the services that they need in order to maintain as much independence as possible. The person's choice for independence must be balanced against the safety of the resident and other persons. This service does not cover room and board expenses.

Environmental Accessibility Adaptation Services (EAA)

EAA services make physical adaptations to a person's home that are necessary to ensure the health, safety, and welfare of the individual. EAA DOES NOT include carpeting, roof repair, or air conditioning. Participants must first apply through the Handicap Accessibility Improvement Program of the DC Department of Housing and Community Development.

Roles: Who Does What?

Each member of the EPD Waiver Team plays a significant and specific role in providing a appropriate waiver services in a home or community based setting.

Case Manager

A Case Manager is someone who can assist with the EPD application process, to screen and evaluate applicants and beneficiaries to assess whether they are in need of EPD Waiver services. The Case Manager helps the participant in many ways: to obtain services that support choice, independence, dignity, and confidentiality; and to manage and coordinate services with the individual, family members, other waiver providers, and medical personnel. Monthly case management assessment visits are required for EPD Waiver participation.

Case managers screen & assess applicants and participants to assess whether they are in need of EPD waiver services. The screening, called an initial comprehensive assessment, should occur within 48 hours of a referral and before the development of an individual service plan.

12 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

Case managers also coordinate EPD waiver services with other Medicaid services, such as referrals for transportation programs, Medicaid state plan personal care aide services, doctor visits, nursing home care, and other District of Columbia Medicaid services. While a case manager cannot provide medical, financial, legal, or other services, case managers can help with referrals to these services. A case manager can communicate with other providers about a participant's goals and progress, identify and resolve problems, and make referrals or linkages to community resources. Maintaining a cooperative relationship with a case manager is a very important part of participant's care and well-being.

After a person is accepted into the EPD Waiver Program, a case manager will make monthly assessment visits in the participant's home. The monthly visits are a Waiver program requirement for participation and they are a key element to ensuring a participant is receiving services appropriate for needs, to assess if different, more, or fewer services are needed, and to offer additional community linkages if they are needed. It is very important the participant allow the case manager to complete the visit.

Homemaker

A homemaker is someone who can assist with household tasks that need to be done when you live in the community. A homemaker can perform the following services: grocery shopping, meal preparation, general housekeeping (cleaning bathrooms, vacuuming, dusting, mopping and sweeping floors, making beds, wiping appliances, and washing and ironing clothes), can run errands to pick up medicine, and provide escort services (not transportation) to and from medical appointments.

An EPD Waiver Program participant may select an individual or a family member (as long as that person is not the legally responsible person or relative) to provide homemaker services. That individual must complete and be responsible for the same education and training requirements as all other EPD waiver homemakers.

Personal Care Aide (PCA)

A Personal Care Aide (PCA) is someone who can provide limited hands-on care and is not a nurse.

A PCA follows the instructions prescribed by a physician or Advanced Practice Nurse and follows the participant's plan of treatment. Specifically, a PCA can perform the following types of services: personal care services, such as bathing, grooming, and toileting; changing urinary drainage bags; assisting with range of motion exercises; reminders to take medication but not to administer medication; reading and recording temperature and pulse; documenting and reporting to the case manager and nurse any emergency situations within twenty-four hours; meal

preparation according to dietary guidelines; assistance with eating or feeding; tasks to keep living area safe and comfortable; accompanying to medical appointments; shopping for nutrition and health needs (prescriptions, not grocery shopping); infection prevention; accompanying to recreational activities; and providing assistance at one's place of employment.

HOW TO ENROLL IN THE EPD WAIVER

The EPD Waiver Program is filled to its capacity and DHCF has established a waiting list. The steps to enroll in the EPD Waiver are as follows:

The First Step: Getting on the Waiting List

Contact the DHCF EPD Waiver Program Unit by calling 202-442-5988 to be added to the waiting list. Once contact is made, a letter is sent out to the prospective applicant with an assigned Waiting List Number and provided with instructions on what to do next. **Please note that your number on the waiting list does not change even when people ahead of you move into the program.**

The Second Step: Selecting a Case Management Agency

- Once an opening in the EPD Waiver becomes available, the EPD Waiver Unit will send you a letter. The letter will ask you to respond within 5 business days from the date on the letter.
- The EPD Unit will provide weekly courtesy follow-up phone calls to confirm your interest and understanding of how to proceed with enrollment into the EPD Waiver Program.
- If there is no response from you within 15 business days from the first letter and/or phone call, the available position will pass to the next person on the waiting list.
- Once you are notified, if you still want to enroll in the EPD Waiver Program, you must select a Case Management agency from the brochure which is included in the letter sent to you. You must then contact the EPD Unit to confirm your interest in the EPD Waiver Program and confirm the Case Management agency you have selected.
- The EPD Unit will contact the Case Management agency by email and U.S. mail to let them know that you have selected them for your Case Management agency and for the Case Management agency to identify a case manager to begin working with you as a new admission. A Case Management agency cannot start working with you until they get the authorization notice from the EPD Unit.

The Third Step: Assessment of Your Needs and Application for the EPD waiver

- The EPD Unit will remind you to contact the Case Management agency and will notify the Case Management Agency to follow-up with you. The case manager from the Case Management agency will contact you within two business days of receipt of the notice from the EPD Unit to make an appointment to perform an intake assessment and complete the EPD Waiver Application at your place of residence.
- The case manager will go to your home and perform the EPD intake assessment and help you fill out the EPD Waiver application. This visit will take about three hours. In addition to performing an assessment, the Case Management agency will explain the EPD Waiver Program to you and go over all of the forms and documents you need to sign. The Case Management agency representative will also tell you about all of the services that are offered, and together, with any family and/or friends you choose to be a part of the planning process, help you develop an appropriate individualized service plan (ISP). Your ISP is an agreement between you and the Case Management agency to identify the types of services you need, help you select the providers who will perform your services, and how often the services will be provided under the EPD Waiver. All of the service providers have met specialized Medicaid qualifications to be able to offer services in the EPD Waiver Program.
- The outcomes from your intake meeting will be a complete intake assessment and the information for the EPD Waiver application will be started. By the time you finish your intake assessment meeting, you will have: 1) had an intake assessment to determine how much care you need; 2) met your case manager; 3) become familiar with EPD waiver forms; and 4) know which providers will provide your services how often you will receive services. The other important things you need to know about your EPD Waiver application are your physician's authorization for services and the Level of Care (LOC) from a vendor that DHCF uses to review and to authorize the services you request.
- Apart from your intake assessment meeting, the EPD Waiver Unit will inform the vendor that it will be getting a new person that they need to review for a Level of Care (LOC) evaluation for the EPD Waiver program. If the EPD Waiver Unit finds your application is missing information, it will notify your Case Management agency to ask them to complete the application and submit the missing information to the EPD Unit. DHCF. Your case manager may need your help with getting the missing information being requested.

15 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

The Fourth Step: Determination of Your Financial and Other Medicaid Eligibility

Once your EPD Waiver application is complete, within 7 calendar days, the EPD Unit will send it to the Economic Security Administration (ESA) (formerly the Income Maintenance Administration (IMA) process your application for eligibility. This may take up to 45 days if all of the information is in the package. If ESA finds additional information is needed for the application, ESA will notify you via letter to tell you which information you need to provide. You may contact your case manager for assistance to help you gather and submit the information. After the information is submitted to ESA, your application may take up to 45 days for ESA to process.

Once your eligibility to enroll in the EPD Waiver has been approved, your application goes back to the DHCF vendor, who then reviews it before they authorize the services you request under the EPD Waiver. This review is done to confirm that you need the services your case manager has requested on your behalf. After the vendor approves the authorization, it sends a letter to you and to your Case Management agency that you can begin to receive EPD Waiver services.

The length of time it takes to complete this required review varies depending on how quickly you provide your case manager and your Case Management agency with any additional information that may be needed. Once the vendor has all of the information it needs to perform the medical necessity review, the approval may take up to seven (7) calendar days to issue a prior authorization.

As always, the EPD Waiver Program's first point of contact should be your case manager, who is the link to all of your services and information.

If you feel any of your providers are not meeting your needs or serving you well, you may request a different provider by calling DHCF's EPD Waiver Program Unit at 202-442-5988 and DHCF staff will help you transfer your services to another provider that you choose.

Yearly Recertification

How to make sure your EPD Waiver enrollment continues each year

- You will receive notification from ESA at least 90 days before your annual recertification is due.
- Call your case manager as soon as you receive the 90-day notice from ESA.
- Work with your case manager to get all of the information you need for your annual recertification, such as:
 - Medical assessments,
 - Income verification;
 - Asset verification;

16 *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

- Completed and signed recertification application

Freedom of Choice

If you meet the eligibility requirements of the EPD Waiver Program, you have the freedom of choice to decide whether you want to receive services in a home and community-based setting or in an institutional setting, such as a nursing home. The Freedom of Choice document is one of the papers you sign at the time of your intake assessment. The EPD Waiver rules require a signed document at the beginning of the EPD Waiver enrollment to clearly show that you have chosen to participate in the EPD Waiver or receive institutional services. The rules require a participant (or the person's legal representative) to receive all the possible options (after a complete assessment of needs and a level of care evaluation) so s/he can make an informed choice.

Freedom of Choice has three different components:

1. To choose whether to participate in the EPD Waiver Program;
2. To choose a provider for case management and other available services; and
3. To choose from the range of services, based on the level of care assessment, subject to the development of the individualized service plan.

If the rules for Freedom of Choice are not followed, a participant and/or appropriate legal representative must be allowed an opportunity to request a Fair Hearing.

Complaints/Grievances, and Fair Hearings

Your Case Manager provider and the DC Government can both assist you to file a complaint about the care or services you receive from the EPD Waiver provider.

Your rights during the complaints/grievances, and fair hearings processes are as follows:

- You have the right to a fair hearing and may request a hearing no more than ninety (90) days from the postmark of the letter notifying you of the action taken by the D.C. Government and/or EPD Waiver providers .
- You have the right to keep receiving a benefit while your fair hearing is being reviewed. To keep your benefit during a fair hearing, you must request a fair hearing before the effective date of the action. .
- You have the right to have someone from the DC Health Care Ombudsman help you through the grievance process.
- You have a right to represent yourself or be represented by your family caregiver, lawyer, or other representative.

- You have a right to have accommodations made for any special health care need you have.
- You have a right to adequate TTY/TDD capabilities, and services for the visually impaired.
- You have a right to adequate translation services and an interpreter.
- You have a right to see all documents related to the complaint/grievance or fair hearing.

You may choose how you would like to file a complaint as described below:

Complaints/Grievances

Complaints to Your Provider

What do you do when your PCA doesn't arrive? What do you do when you think you're not getting the service or the care that is in your individualized service plan (ISP)? Call your case manager. Many times, your case manager can be a helpful resource to resolve a concern. Here are some helpful steps to resolve situations quickly:

1. Call your case manager and remember to provide him/her with your name and phone number, as well as a description of what is wrong.
2. If the case manager is part of the concern, call the provider and ask to speak to the Nursing Coordinator or the Provider Agency Director, and remember to tell him or her your name and phone number, as well as a description of what is wrong.

Complaints to DHCF (DC Medicaid)

DHCF is available and happy to help EPD Waiver Program participants and answer your questions, address your concerns, and ensure your needs are met and your rights are respected.

Call DHCF (DC Medicaid) at 202-442-5988 and ask for someone in the EPD Waiver Program Unit. Remember to give your name and phone number, as well as a description of what is wrong.

Complaints to the DC Health Care Ombudsman

The Mission of the Office of Health Care Ombudsman and Bill of Rights is to ensure the safety and well-being of District consumers' health care services through advocacy, education and community outreach. To contact the DC Health Care Ombudsman, call 1-877-685-6391.

Remember to give your name and phone number, as well as a description of what is wrong.

Fair Hearings

You have a right to request a Fair Hearing with the DC Office of Administrative Hearings and you may call or make your request in writing to:

18 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

DC Office of Administrative Hearings
441 4th Street, NW, Suite 450 North
Washington, DC 20001
Telephone Number: 202-442-9094

Avoid Medicaid Fraud

Fraud is a big problem in all kinds of health care... including Medicaid!

42 CFR Section 455.2(3) – states:

“Fraud means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person. It includes any act that constitutes fraud under applicable Federal or State law.”

This means that saying, doing, or writing something that is not true, so that someone can get something they aren't supposed to have, like money, is fraud. People receiving Medicaid services or providers of Medicaid services can be involved in Medicaid fraud.

For example, fraud happens when a doctor or other health care provider:

- Sends a bill to the Medicaid program for a service they didn't really give to a patient;
- Sends a bill to the Medicaid program for a service that is different from the one they gave the patient, so they can be paid more; or
- Gives a service the patient didn't really need, so they can bill the Medicaid program for it.

Sometimes people who have Medicaid can be involved in fraud too. This can happen when someone who has Medicaid:

- Allows someone else to use their Medicaid card or Medicaid number;
- Gets Medicaid by not telling the full truth about things like where they live or how much money they have; or
- Pretends to need a service so that a health care provider can send a bill to Medicaid and receive payment for the services.

- Sign a timesheet for a PCA although the PCA did not show up for work or left early.

Sometimes people even offer money to people on Medicaid so they can use their Medicaid number. Not only could you lose your Medicaid benefits, you may be legally liable for fraud.

Fraud hurts many other people, too. When the Medicaid program pays for things that are not really needed, it doesn't have the money to pay for care that people really do need. Doctors, dentists, or health care aides don't get paid what they deserve because people who are involved in fraud are taking away money that the Medicaid program could use to pay them better. And, while Medicaid fraud may seem like a "victimless crime" – it is a crime – people who commit Medicaid fraud are stealing from the Medicaid program and the people who depend on it.

If you think you know about some things that may be Medicaid fraud, please report it to the District of Columbia Medicaid Fraud Hotline: **1-877-632-2873**.

The person you help may be yourself!

Important Things to Know

Mail You Might Receive

- Notification letter to tell you your Waiting List Number.
- Notification letter to tell you that a spot is open on the waiting list for a limited time.
- When you may need to supply additional information to ESA.
- When your eligibility to participate in the EPD Waiver Program has been approved.
- Once services are approved for the EPD Waiver Program, and you can begin receiving services.
- When it's time to recertify and update your eligibility for the EPD Waiver Program.

If you get a bill for a covered Medicaid service:

As an EPD Waiver Program participant, you should not have to pay for the care you receive. Remember to always take your Medicaid ID card to all health care appointments. If you do get a bill for medical care while you are participating in the EPD Waiver Program, contact the provider and remind them that they must bill Medicaid for the services they provided you.

If you have other insurance

Medicaid is always the payer of last resort. Please let your case manager know if you have any other type of insurance including Medicare.

If you have both Medicaid and Medicare

You will be considered to be a “dually enrolled” participant. Please let your case manager know and provide him/her with your Medicare Number.

When you move:

You must inform your Case Manager, and ESA of your new address.

Important phone numbers

DHCF/DC Medicaid: 202-442-5988, <http://dhcf.dc.gov>

Medicare: 1-800-MEDICARE (1-800-633-4227)

DC Office on Aging: 202-724-5622, TTY 202-724-8925, <http://dcoa.dc.gov>

ADRC (Aging and Disability Resource Center): 202-535-1444, <http://dcoa.dc.gov/DC/DCOA>

ESA (Economic Security Administration): 202-576-8962, TTY 202-576-8962, <http://dhs.dc.gov/node/117352>

SSA (Social Security Administration): 1-800-772-1213, TTY 1-800-325-0778, <http://www.ssa.gov>

Health Regulation & Licensing Administration (HRLA): 202-442-5833, complaint form to submit online: http://app.doh.dc.gov/form/complaint_form.asp

How to Request a Provider Transfer

Remember that you can change your service provider at any time if you are not happy with the service you are receiving. This is called a “transfer”.

Transfers to a different provider happen at an EPD Waiver participant’s request, at the request of a provider, or when the provider no longer offers a particular service you need.

Here are the steps you need to follow when you want to request a provider transfer:

21 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant’s family and social supports.*

1. Contact your Case Manager or your Case Management agency.
2. Your case manager will ask you for the name of the new provider you want.
3. Your case manager or Case Management agency is responsible for coordinating a transfer to the agency of your choice within 2 business days.

Discharge from a Provider Agency:

Just as you have a choice and a right to change your service providers, your service provider can also decide to discharge you from their agency as long as they give you a 30 day notice and continue to provide services until you have selected a new provider. If a provider agency decides it no longer wants to provide services to you, it issues a notice of discharge with an explanation. The notice shall include but is not limited to the following:

- Decision to terminate the services;
- Reason for termination of services;
- Copy of waiver standards that support the termination decision;
- Copy of the directory of other waiver providers; and
- Information on the recipient's right to a Fair Hearing and instructions for obtaining a Fair Hearing.

Reasons for Discharge from the EPD Waiver Program

This is a list of reasons which may cause you to be discharged from EPD Waiver Program services:

- Abusive to the PCA or other staff
- Income exceeds Medicaid Waiver limits
- No longer eligible for care in the program
- Move out of the District of Columbia
- Recovering from a temporary physical disability
- Transfer to a different Medicaid Waiver program
- Go into an institution, such as a nursing home, for more than 30 days
- If you request to be discharged from the program

EXTRA INFORMATION

Advance Directives

An advance directive, also known as a living will, is a legal document that gives instructions to your family and health care providers, about what health care you want in case you become so hurt or sick that you cannot speak for yourself. It lets you decide what kind of care you want in different situations and it assigns someone you know to act for you if you can't talk. You can cancel an advance directive at any time.

Developing an advance directive is responsible; it makes your wishes clear to your family, friends, and health care professionals, and avoids confusion later on.

One source of help in developing an advance directive, is the Neighborhood Legal Services Program. Call (202) 269-5100 or visit their website at: www.nlsp.org. An advance directive is a legal document, and needs to be signed by witnesses to make sure you wanted it.

If you do develop an advance directive, give it to your doctor so it is a part of your medical record.

Notice of Privacy Practices

THIS NOTICE IS EFFECTIVE AS OF APRIL 14, 2003

If you do not speak and/or read English, please call (202) 442-5988 between 8:15 a.m. and 4:45 p.m. A representative will assist you.

THIS NOTICE DESCRIBES HOW PROTECTED HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

The Dept. of Health Care Finance or DHCF keeps your protected health information (PHI) confidential. The Economic Security Administration (ESA) approved you for Medicaid. ESA then sent information about you to DHCF. DHCF uses this information to pay for your health care.

Your PHI includes your name, address, birth date, and phone number. It also includes your social security number, Medicare number (if any), and health insurance policy information. It may include information about your health condition.

The claims by health care providers include your diagnoses. The claims list your medical treatment and supplies. Claims also include physician's statements, x-rays, and lab test results. Your PHI is this information too.

The law requires us to keep your PHI private. We must provide you with this Notice of our legal duties and privacy practices. The law requires DHCF to abide by this Notice.

Use of your PHI

We use your PHI to allow a doctor or nurse to treat you. We allow a business office to process payment for your medical services with your PHI. Administrative personnel reviewing the quality of the care you receive use your PHI too. This Notice also governs how DHCF and the Economic Security Administration will use and disclose your health information to each other.

We may also use and/or disclose your PHI without your permission when permitted by law:

Treatment: To a health care provider to treat you. (EXAMPLE: DHCF may share your PHI with a clinical laboratory.)

Payment: To pay claims for services delivered to you. (EXAMPLE: DHCF shares your PHI with a claims processor. The contractor verifies that you received treatment.)

Health Care Operations: To perform health care operations including:

- Assessing health care quality
- Reviewing accreditation, certification, licensing and credentialing
- Conducting medical reviews, audits, and legal services
- Underwriting and other insurance functions
(EXAMPLE: DHCF sends your PHI to a quality review committee.)

Previous Provider: To your current or past health care provider.

Public Health and Benefit Activities: For the following kinds of public health/interest activities:

- For public health
- For health care oversight
- For research
- To coroners, medical examiners, funeral directors, and organ procurement organizations
- As authorized by DC workers' compensation laws

To Avoid Harm or Other Law Enforcement Activities: We may disclose your PHI:

24 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

- To stop a serious threat to health or safety
- In response to court/administrative orders
- To law enforcement officials
- To the military and intelligence activities
- To correctional institutions

Communication: Contact you personally to keep you informed. (EXAMPLE: DHCF may send appointment reminders or information about other treatment opportunities to you.)

**AUTHORIZATION FOR OTHER USES AND DISCLOSURES OF PHI
NOT MENTIONED IN THIS NOTICE:**

DHCF will only use or disclose your PHI for purposes this Notice mentions. DHCF will obtain your written authorization for other uses and disclosures. You may revoke your authorization in writing any time. You may contact the DHCF Privacy Officer at the address listed at the end of this Notice.

YOUR RIGHTS REGARDING YOUR PHI:

You have the following rights with respect to your PHI. In writing, you may:

- Ask us to limit how your PHI is used or given out. We are not required to agree to your request. If we do agree, we will honor it.
- Ask DHCF to talk to you in a different manner.
- Generally, see and copy your PHI. You may ask that any refusal to do so be reviewed. You may be charged a reasonable fee for copies.
- Ask DHCF to change your PHI. We may not make your requested changes. If so, we will tell you why we cannot change your PHI. You may respond in writing to any denial. You may ask that both our denial and your response be added to your PHI.
- Get a listing of certain entities that received your PHI from DHCF after April 14, 2003. This list will not include a listing of disclosures made for treatment or payment. Nor will it include disclosures for healthcare operations, information you authorized us to provide, and government functions.
- Request a paper copy of this Notice of Privacy Practices.

**CONCERNS OR COMPLAINTS
ABOUT THE USE OR DISCLOSURE OF YOUR PHI:**

For more information about our privacy practices, you may contact the Agency Privacy Officer or the District Privacy & Security Official at either of the following addresses.

DHCF Privacy Officer	DC Private & Security Official
DC Department of Health Care Finance	DC Office of Health Care Privacy and Confidentiality
899 North Capitol Street NE	

25 | *EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.*

6th Floor
Washington, DC 20002
Voice: (202) 442-5988
Fax: (202) 442-4790
E-mail: dhcfprivacy@dc.gov

in the Office of the Attorney General
1350 Pennsylvania Avenue, NW, Suite 307
Washington, DC 20004
Voice: (202) 727-8001
Fax: (202) 727-0246
E-mail: dcprivacy@dc.gov

You may also contact the Privacy Officer for additional copies of this Notice. You have the right to complain to us. You may also complain to the U. S. Department of Health and Human Services. Complaints will not cause you any harm. To complain to us, please contact DHCF at either of the District offices. You also may send a written complaint to the Secretary of the U. S. Department of Health and Human Services at the following address:

Office for Civil Rights – Region III
U.S. Department of Health and Human Services
150 S. Independence Mall West, Suite 372
Public Ledger Building
Philadelphia, PA 19106-9111
Main Line (215) 861-4441
Hotline (800) 368-1019
FAX (215) 861-4431
TDD (215) 861-4440
TTY: (886) 788-4989

E-mail: ocrmail@hhs.gov

CHANGES TO THIS NOTICE:

We reserve the right to change the terms of this Notice. If we change the terms of this Notice, we will post a revised notice in the DHCF offices. In addition, the current Notice of Privacy Practices will be posted on the Internet at <http://www.dhcf.dc.gov>.

What Some Words Mean

Formatted: Font: 14 pt, Font color: Accent 1

Advance Directive: A written, legal document that you sign to let others know what health care you want, or do not want, if you are very sick or hurt and cannot speak for yourself.

Advanced Practice Nurse (APN): A nurse with advanced training who can authorize EPD services.

Advocate: A person who helps you get the health care and other services you need.

Appeal: An appeal is a special kind of complaint to make if you disagree with a decision to deny a request for health care services. You may also make this kind of complaint if you disagree with a decision to stop, suspend, or reduce services you are receiving.

Beneficiary: Someone who receives health care through Medicaid.

Case Manager: Someone who has special training, who helps EPD participants get the care and information s/he needs to stay healthy.

Check-up: See Screening

Chore Aide: A trained person hired by a Home Health Agency to provide heavy home cleaning. A chore aide cannot provide hands-on personal care, meal preparation, grocery shopping, or respite services.

Coercion: Make someone do something.

Complaint: See Grievance

Comprehensive Assessment: An ongoing, complete review of the individual in his or her environment, including the general health of the individual.

Covered Services: Services available under the EPD Waiver Program.

Department of Health Care Finance (DHCF): The agency which administers the DC Medicaid Program and the EPD Waiver and other home and community-based programs.

Durable Medical Equipment (DME): Special medical equipment your doctor may ask or tell you to use in your home.

Economic Security Administration (ESA): The District agency that processes your Medicaid eligibility. It was formerly called the Income Maintenance Administration (IMA).

Elderly and Persons with Disabilities (EPD): The name of a Medicaid Waiver program that provides special services for the elderly and persons with disabilities.

Emergency Care: Care you need right away for a serious, sudden, sometimes life-threatening condition.

Fair Hearing: If you file a Grievance/Complaint, you can ask for a hearing with DC's Office of Administrative Hearings.

Freedom of Choice: When you choose whether you want to be in the EPD Waiver and receive services in a home-based setting or receive care in an institutional setting, such as a nursing home.

Grievance: If you are unhappy with the care you get, you can call your Case Manager, the Nursing Coordinator, DHCF, or the Ombudsman.

Handbook: This book that gives you information about the EPD Waiver Program and services.

Hearing-impaired: If you cannot hear well or if you are deaf.

Homemaker: Someone who performs household chores for a Waiver participant, such as laundry, grocery shopping, cleaning, and/or meal preparation.

Interpretation/Translation Services: Help from the District when you need to talk to someone who speaks your language, or if you need help talking with your doctor or hospital or to understand what is written in English or another language that you don't speak.

Individualized Service Plan (ISP): The agreement between the Case Manager and the EPD Waiver participant on which services s/he will receive and how the services will be given. This is an important part of the EPD Waiver Program.

Level of Care (LOC): A prescription signed by your doctor or advanced practice nurse that shows your eligibility for which services you will receive, how often, and how long you should get the services, sets treatment goals, and tells you about how to get community resources.

Medicaid Identification Card: The card that lets your doctors, hospitals, drug stores, and others know that you are enrolled in DC Medicaid.

Mental Health: a state of well-being that allows you to realize your own abilities, how you can cope with the normal stresses of life, be able to work and make a contribution to your community.

Participant: Someone who is enrolled in the Elderly and Persons with Disabilities (EPD) Waiver.

Personal Care Aide: A trained person who is at least 18 years old and provides assistance with bathing, grooming, dressing, toileting, eating to an enrolled participant.

Pharmacy: The store where you pick up your medicine.

Prescription: Medicine that your doctor orders for you; you must take it to the pharmacy/drugstore to have them fill it, and then pick it up when it's ready.

Preventive Counseling: When you want to talk to someone about ways to help you stay healthy or keep you from getting sick or hurt.

Primary Care Provider (PCP)/ physician: The doctor that takes care of you most of the time.

Prior Authorization: Written permission from DHCF to get health care or treatment.

Prior Authorization Number (PA#): The authorization providers have to have before they can offer services to EPD Waiver Program participants.

Provider Directory: A list of all providers who are eligible to offer services in the EPD Waiver Program.

Providers: Case Managers, Homemakers, Chore Aides, and Personal Care Aides, as well as doctors, nurses, and other people who take care of your health.

Recertification: An annual process that is a requirement for continued participation in the EPD Waiver Program and Medicaid. If this does not happen by a deadline, you may be discharged from the EPD Waiver Program.

Referral: When the doctor or case manager gives you a written note with information for the services you need.

Retaliation: To harm someone because of something they did.

Screening: A test that your doctor or other health care provider may do to see if you are healthy. This could be a hearing test, vision test, or another type of test.

Services: The care you get from your doctor or other health care provider.

Specialist: A doctor who is trained to give a special kind of care, like an ear, nose and throat doctor or a foot doctor.

Specialty Care: Health care provided by doctors or nurses trained to give a specific kind of health care.

Special Health Care Needs: Children and adults who need more health care and other services different from what other children and adults need.

Transportation Services: Help from Metro Access or Medicaid to get to an appointment, which can include bus or metro vouchers, vouchers to pay for a taxi, wheelchair vans, or ambulances. The type of transportation you get depends on your medical needs and Medicaid eligibility.

Treatment: The care you get from your health care provider.

Urgent Care: Care you need within 24 hours, but not right away. This is different from Emergency Care, which you need right away.

Visually Impaired: If you cannot see well or if you are blind.

EPD WAIVER PROVIDERS

A.B.A. HOME HEALTH CARE

821 KENNEDY STREET NW
Washington, DC 20011
Telephone: (202) 722-1725
Fax: (202) 722-1726
Contact: John Foretia/Phillip Akwar

SERVICES:
Case Management
Homemaker
Respite
Personal Care Aide

ALLIANCE HOME HEALTH CARE & EQUIPMENT

7826 Eastern Avenue, NW #406
Washington, DC 20012
Telephone: (202) 545-1630
Fax: (202) 545-1645
Contact: Eskender Molaligne

SERVICES:
Case Management
Personal Care Aide

ASAP SERVICES CORPORATION

201 15th Street, SE
Washington, DC 20003
Telephone: (202) 293-2931
Fax: (202) 293-3480
Contact: George H. Purcell II/Gerard Seabrooks

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

BERHAN HOME HEALTH CARE AGENCY

7826 Eastern Avenue, NW, Suite LL16
Washington, DC 20012
Telephone: (202) 723-1100

SERVICES:
Case Management
Chore

30 | EPD Waiver services do not replace family systems and/or other community systems. These services add to the participant's family and social supports.

Fax: (202) 723-3271
Contact: Fessha Mollalign

*Homemaker
Respite
Personal Care Aide*

CAPITAL VIEW HOME HEALTH CARE

1025 Thomas Jefferson Street, NW
Suite 180G
Washington, DC 20007
Telephone: (202) 299-1109
Fax: (202) 299-1108
Contact: Dr. Belai/Hannah George

SERVICES:
*Case Management
Chore
Homemaker
Respite
Personal Care Aide*

FAMILY AND HEALTHCARE SOLUTIONS

6210 North Capitol Street, NW
Suite B
Washington, DC 20011
TELEPHONE: (202) 621-7329
FAX: (202) 621-7369
Contact: Sylvie Fomundam/Roger Momjah

SERVICES:
Case Management

FAMILY MATTERS OF GREATER WASHINGTON

1509 16th STREET, N.W.
Washington, D.C. 20036
Telephone: (202) 289-1510 ext. 1155
Fax: (202) 518-8922
Contact: Brenda Turner

SERVICES:
Case Management

GUARDIAN MEDICAL MONITORING

18000 WEST EIGHT MILE ROAD
SOUTHFIELD, MI 48075
System Telephone: 1-888-349-2400
Fax: 1-877-205-3621
Contact: David Crawford

SERVICES:
Personal Emergency Response

HMI HOME HEALTH DIVISION

1025 VERMONT AVE, NW SUITE 810
WASHINGTON, DC 20005
TELEPHONE: (202) 829-1111
FAX: (202) 829-9192
Contact: Venus Ray

SERVICES:
*Case Management
Chore
Homemaker
Respite
Personal Care Aide*

HUMAN TOUCH HOME HEALTH CARE AGENCY, INC.

1416 9th Street, NW
WASHINGTON, DC 20001
TELEPHONE: (202) 483-9111
FAX: (202) 483-8181
Contact: Steve Yimaj/Karen Bush

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

IDEAL NURSING SERVICES

820 UPSHUR STREET, N.W.
WASHINGTON, D.C. 20011
TELEPHONE: (202) 723-0304
FAX: (202) 723-0367
Contact: Carol Grant-Gordon/Judith Forbes

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

IMMACULATE HEALTH CARE SERVICES, INC.

1818 NEW YORK AVE., N.E. #228
WASHINGTON, D.C. 20002
TELEPHONE: (202) 832-8340
FAX: (202) 832-8341
Contact: Rosemarie Sesay/Sarah Reid

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

J.D. NURSING AND MANAGEMENT SERVICE

7826 Eastern Avenue, NW Suite LL18A
WASHINGTON, D.C. 20012
TELEPHONE: (202) 722-7776
FAX: (202) 722-7785
Contact: James Ibe/Comfort Bogunjoko

SERVICES:
Case Management
Homemaker
Personal Care Aide

JOYE ASSISTED LIVING SERVICE

5131 Call Place, SE
WASHINGTON, D.C. 20019
TELEPHONE: (202) 758-0309
FAX: (202) 758-0309
Contact: Gloria Richardson

SERVICES:
Assisted Living

KBC NURSING AGENCY AND HOME HEALTH CARE, INC.

7506 GEORGIA AVENUE, NW
WASHINGTON, D.C. 20012
TELEPHONE: (202) 291-6973
FAX: (202) 291-7018
Contact: Christine Williams/Johanna Tingem

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

LINK TO LIFE

297 North Street
Pittsfield, MA 01201
Telephone: 1-800-338-4176
FAX: 1-877-442-2323
Contact: Julie Murphy/Janice Casey/Jeanette Casey

SERVICES:
Personal Emergency Response System

LISNER LOUISE DICKSON HURT HOME

5425 Western Avenue, NW
Washington, DC 20015
Telephone: 202-966-6667 ext. 3309
FAX: 202-362-0360
Contact: Sue Hargreaves/Lisa Harfoot

SERVICES:
Assisted Living

NURSING ENTERPRISES, INC.

5101 Wisconsin Avenue, NW
Suite 250
WASHINGTON, D.C. 20016
TELEPHONE: (202) 832-0100/ (202) 526-2400
FAX: (202) 832-0203
Contact: Myrtle Gomez/Donald Teekasingh

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

NURSING UNLIMITED SERVICES

1328 G STREET, SE
WASHINGTON, D.C. 20003
TELEPHONE: (202) 547-2949
FAX: (202) 547-5227
Contact: Teresa Okala

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

PREMIER HEALTH SERVICES

7600 Georgia Avenue, NW
Suite 323
WASHINGTON, D.C. 20012
TELEPHONE: (202) 723-3060
FAX: (202) 723-3065
CONTACT: Obioma Arungwa/Ursula Roberts-Allen

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

PREMIUM SELECT HOME CARE, INC.

5513 Illinois Ave., NW
WASHINGTON, D.C. 20011
TELEPHONE: (202) 882-9310
FAX: (202) 882-9374
Contact: Linda H. Davis

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

PROFESSIONAL HEALTHCARE RESOURCES, INC.

1010 WISCONSIN AVE., NW
SUITE 300
WASHINGTON, D.C. 20007
TELEPHONE: (202) 955-8355
FAX: (202) 587-1395
Contact: Patricia Kelley

SERVICES:
Chore
Homemaker
Respite
Personal Care Aide

PROVIDENCE HOSPITAL – MEDICAL HOUSE CALL PROGRAM

1160 Varnum Street, NE
Suite 021
Washington, DC 20017
Telephone: (202) 269-7785
Fax: (202) 269-7734
Contact: Gina Owens

SERVICES:
Case Management

T & N RELIABLE NURSING CARE

3500 18th Street, NE
Washington, DC 20018
Telephone: (202) 529-6510
Fax: (202) 529-6570
Contact: Agnes NKeng

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

ULTIMATE HOME HEALTH SERVICES

7418 9TH St. NW
Washington, DC 20012
TELEPHONE: 240-468-6077
Fax NO. (877)-442-1442
Contact: Eburn Williams

SERVICES:
Case Management

UNIVERSAL HEALTHCARE, INC.

1453 Pennsylvania Avenue, SE
2nd Floor
Washington, DC 20003
TELEPHONE: (202) 548-0588
FAX: (202) 548-0589
Contact: Vondella McLaughlin/Teresa Lewis

SERVICES:
Case Management

VMT HOME HEALTH AGENCY

4201 CONNECTICUT AVENUE, N.W.
SUITE #200
WASHINGTON, D.C. 20008
TELEPHONE: (202) 282-3005
FAX: (202) 282-3109
Contact: Tippi Hampton/Aisha Harris

SERVICES:
Case Management
Chore
Homemaker
Respite
Personal Care Aide

WASHINGTON HOSPITAL CENTER - MEDICAL HOUSE CALL PROGRAM

100 IRVING STREET, N.W.
ROOM #EB 3114
WASHINGTON, D.C. 20010
TELEPHONE: (202) 877-0576
FAX: (202) 877-6630
Contact: Eric De Jonge/Maria Copeland

SERVICES:
Case Management

Community Resource Guide

DC Office on Aging

441 4th Street, NW
Washington, DC 20001
(202) 724-5622

The Aging and Disability Resource Center can also be found at the DC Office on Aging.

DC Department of Human Services
645 H Street, NE
Washington, DC 20002
(202) 724-5506

Housing:

District of Columbia Housing Authority
1133 North Capitol Street, NE
Washington, DC 20002
(202) 535-1000

Human Rights:

DC Office of Human Rights
441 4th Street, NW, Suite 570N
Washington, DC 20001
(202) 727-4559
Fax (202) 727-9589
DC Adult Protective Services
2146 24th Place NE
Washington, DC 20018
(202) 541-3950

Energy Assistance:

Energy Programs Consortium
1232 31st Street, NW, 3rd Floor
Washington, DC 20007
(202) 246-5817
Contact: Lynne Snyder
DC Energy Office Hotline
2000 14th St. NW, Ste. 300E
Washington, DC 20009
(202) 673-6750

Adult Education:

UDC- Institute of Gerontology
Academy of Lifetime Learning
4200 Connecticut Avenue, NW, Building 52
Washington, DC 20008
(202) 274-6697
Legal Services:
Legal Counsel for the Elderly- AARP

36 | *EPD Waiver services do not replace family systems and/or other community systems.
These services add to the participant's family and social supports.*

DC Long Term Care Ombudsman Office

601 E Street, NW, Room A-4
Washington, DC 20049
(202) 434-2140

Emmaus Services for the Aging

Long Term Ombudsman Program
1426 9th Street, NW
Washington, DC 20001
(202) 745-1200

DC Office on Aging's Notary Public Service

441 Fourth Street, NW, Suite 900S
Washington, DC 20001
(202) 724-5622

GW Health Insurance Counseling Project

2136 Pennsylvania Avenue, NW
Washington, DC 20052
HICP provides free health insurance information, education and counseling services to Medicare beneficiaries and seniors who live in DC.

University Legal Services Housing Protection and Advocacy

220 Eye Street, NE
Ste. 130
Washington, DC 20002
(202) 547-4747

Employment and Job Training

The Older Workers Employment and Training Program (OWETP)
D.C. Office on Aging
441 Fourth Street, NW, Suite 950N
Washington, DC 20001
(202) 724-3662'

Food

Meals on Wheels
4025 Minnesota Avenue, NE
Washington, DC 20019
(202) 388-4280

New York Avenue Meals on Wheels

1313 New York Avenue, NW
Washington, DC 20016
(202) 393-3949

Parishes United Meals on Wheels

4520 126 Street, NW
Washington, DC 20017
(202) 635-8985

Upper Northwest Meals on Wheels
6100 Georgia Avenue, NW
Washington, DC 20011
(202) 723-5617

Washington Urban League Senior Center- Aging Services
2900 Newton Street, NE
Washington, DC 20018
(202) 529-8701

Provides home-delivered meals to senior citizens in the District.

Food Stamps: Economic Security Administration

Anacostia 2100 Martin Luther King Avenue, SE (202) 645-4614
Congress Heights 4001 South Capitol Street, SW (202) 645-4546
Fort Davis 3851 Alabama Avenue, SE (202) 645-4500
H Street 645 1-1 Street, NE (202) 698-4350
Taylor Street 1207 Taylor Street, NW (202) 576-8000

Transportation

Call 'N' Ride
2601 18th Street, NE
Washington, DC 20018
(202) 635-3970

This program offers seniors in the district sliding-scale vouchers for use with selected radio dispatched taxi companies. Service requests must be made through the appropriate

DC Office on Aging Lead Agency.

Washington Elderly Handicapped Transportation Service (WEHTS)
2601 18th Street, NE
Washington, DC 20018
(202) 635-8866

Metro ID Cards for People with Disabilities

600 5th Street, NW
Washington, DC 20001
(202) 962-1558

Mental Health Services

DC Department of Mental Health
64 New York Avenue, NE
4th Floor
Washington, DC 20002
(202) 673-7440

Acknowledgements

DHCF would like to acknowledge and thank the following contributors for their assistance in developing the EPD Waiver Program Handbook:

Razak Abudu, Assistant Director of Case Management, A.B.A. Home Health Care

Mary Durso, Case Manager, KBC Nursing Agency & Home Health Care, Inc.

Tammy Smiley, Case Manager

Shirley Tabb, Case Manager

Joseph Osiecki, Supervisory Case Manager, VMT Home Health Agency

Ebun Williams, Case Manager, Ultimate Home Health Services