


# Welcome to Person Centered Home Care as an Individual Provider


## Requirements under the law:

You must complete **75** hours of training (Includes 5 hours of orientation and safety) within **120** days of your hire date (service begin date on authorization) and become a Certified Home Care Aide within **200** days of hire. If you do not meet these deadlines you cannot continue to be paid. Use the REQUIRED timelines and checklist to meet deadlines.


## GETTING STARTED

	Action	Reminders	
STEP 1	Complete Name & Date of Birth background check at time of contracting. Background Checks - <a href="#">BCCU Website</a>	Use the same name on all forms. Example: Jonathan, John OR Johnny	<input type="checkbox"/>
STEP 2	A tracking number, called the Originating Case Agency number (OCA#), will be generated and written on your Fingerprint Appointment form you get at contracting. <b>Keep this form</b> and write the OCA# here: _____	This will be needed for your <b>Department of Health (DOH) Application</b>	<input type="checkbox"/>
STEP 3	Arrange to have your Fingerprints taken right away. Write the appointment time here: _____	Mark your calendar!	<input type="checkbox"/>
STEP 4	<ul style="list-style-type: none"> <li> <b>Before you provide care:</b> Take your Orientation &amp; Safety Training course in <b>English online</b> at SEIU Training Partnership (TP) at <a href="http://www.myseiubenefits.org">www.myseiubenefits.org</a>. You will need your Provider Number to log-in.                 </li> </ul>	Unable to take Orientation and Safety online English course? Multiple options can be provided at your contracting appointment.	<input type="checkbox"/>


## COMPLETE & SUBMIT DOH APPLICATION

	Action	Reminders	
STEP 1	<ul style="list-style-type: none"> <li> <b>Complete and submit by 14 days of hire:</b> DOH Home Care Aide Certification application packet. <a href="#">HCA Application</a>. The testing company, Prometric, receives information from your application which will allow you to take your written knowledge and skills exam. You are required to provide at least one e-mail address for DOH and Prometric communication. <b>DOH requires that all documents, notification of completion of training and fees be paid (by TP) before DOH will contact Prometric.</b> Do not pay fees, <b>mark state pay on application</b> and fees will be paid through SEIU NW Training Partnership.                 </li> </ul>	<b>If you do not submit your application within 14 days, it is likely that you will not be able to test or become certified by your deadline.</b> Once the DOH receives your application, you are assigned a 10-digit DOH credential # (HM). Use this number when contacting the HCA Credentialing Coordinator at (360) 236-2700 or when finding information online at Department of Health.	<input type="checkbox"/>
STEP 2	If you are limited English proficient (LEP), meaning your ability to read, write or speak English is limited, you may qualify for an additional 60 day provisional certification.	LEP ONLY: Mark on your DOH application that you want the provisional certificate.	<input type="checkbox"/>
STEP 3	To take the HCA exam in Spanish, Russian, Vietnamese, Korean, Chinese, Cambodian, Laotian, Samoan, Somali, Ukrainian, Tagalog, Amharic, or Arabic; check the language desired on HCA Exam Application. If you need to take the exam in a language not listed, you may request an individual interpreter in your language by completing the testing accommodations request packet on the Prometric website and submit to the address on this form.	It may take 30 days for interpreter /accommodation requests. DOH will send an e-mail in which you must respond for validation. Check e-mail Inbox, Junk & Spam folders daily for an e-mail from DOH and Prometric after you complete your training!	<input type="checkbox"/>

## REGISTER FOR TRAINING THROUGH NW TRAINING PARTNERSHIP

	Action	Reminders	
STEP 1	<p>✳ <b>Register by 14 days of hire:</b> Register for the 70 hour basic training through the NW Training Partnership (TP) website at <a href="http://www.myseiubenefits.org/">http://www.myseiubenefits.org/</a></p>	Unable to access the Internet? Call the Membership Resource Center at 1-866-371-3200.	<input type="checkbox"/>
STEP 2	<p>✳ <b>Recommended by 60 days from hire:</b> Complete your 70 hours of basic training immediately to ensure you get classes in the area where you live and in time to meet testing and certification deadlines.</p>	TP will send Certificate of Completion after 75 hours of training is complete & forward to the Department of Health (DOH).	<input type="checkbox"/>
STEP 3	Write training date and location here: _____	Mark your calendar!	<input type="checkbox"/>

## TEST THROUGH PROMETRIC

	Action	Reminders	
STEP 1	<p>Pass the written knowledge and skills exam: Write test date and location here: _____</p> <p><b>Take the first exam time offered to you from Prometric.</b></p> <p>Test as close to the end of training to increase your ability to pass the exam.</p> <p>Look for an e-mail from <b>Pbt-admit@Prometric.com</b> with test information, your name, Prometric ID # in the subject line (Check Inbox, Junk and Spam folders).</p>	<p>Prometric will only communicate with you using the e-mail address you provide on your DOH application.</p> <p>If you do not receive an e-mailed test date from Prometric within 14 days of completing training, contact Prometric at 1-800-324-4689.</p>	<input type="checkbox"/>
STEP 2	<p>If you fail the test, reschedule your exam immediately. Contact Prometric immediately to retest.</p> <p>You can take the failed portion of the test twice. You must pay a fee for each re-test.</p>	Information about your credential # is on the DOH website: <a href="#">Provider Credential Search (HM or PV)</a> . When your credential indicates "Active" you are able to work. You are not able to work past 200 days without being Active on the DOH website.	<input type="checkbox"/>

Agency	Telephone & Fax	Mailing Address	E-mail/Websites
DOH	<p><b>HCA Credentialing Coordinator</b> (360) 236-2700</p> <p><b>DOH Customer Service</b> (360) 236-4700</p>	<p><b>Mail application to: (Do not include fee)</b> DOH - Home Care Aide Credentialing P.O. Box <b>1099</b> Olympia, WA 98507-1099</p> <p><b>Mail other documents <u>NOT</u> sent with initial application to:</b> DOH - Home Care Aide Credentialing P.O. Box <b>47877</b> Olympia, WA 98504-7877</p>	<p><b>DOH Website:</b> <a href="#">Home Care Aide</a></p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> <p style="text-align: center;"><i>Keep this checklist for your records.</i></p> </div>
Prometric	<p><b>Telephone:</b> 1-800-324-4689</p> <p>Download the Information Booklet (14 languages) to help answer questions.</p>	<p><b>Prometric Address:</b> Attention: Washington Home Care Aide Program 7941 Corporate Dr. Nottingham, MD 21236</p>	<p><b>Prometric E-mail:</b> <a href="mailto:WAHCA@prometric.com">WAHCA@prometric.com</a></p> <p>Prometric Website: <a href="#">Prometric</a></p>

**HCA Quick Links: Find links in one location at [www.adsa.dshs.wa.gov/professional/training/links](http://www.adsa.dshs.wa.gov/professional/training/links)**