



Behavioral Health Personal Care Attendant (PCA) Enrollment Application Process

Comagine will provide PCA applicant with the following documents to complete for part 1 and part 2 per instructions below:

- an authorization form to consent to background check
- background check information request document
- Provider enrollment form LE2521
- I-9 form (<https://www.uscis.gov/i-9>)

Part 1: Background check is required for Medicaid Provider Enrollment

- The PCA applicant will complete the following forms:
 - Authorization form sections:
 - Subject Individual's (SI) name
 - The PCA applicant is considered the SI.
 - date of birth
 - Background check information request document
- PCA applicant will return background check authorization and information request to Comagine:
 - Email: ORBHSupport@comagine.org
 - Fax: 877-575-8309
- Comagine will schedule a time to verify PCA's valid identification and background check information request.
 - The submission of authorization form, screenshot of valid ID, and background check information request serves as consent from the PCA applicant to initiate background check process.
- Comagine sends all background check documentation securely to OHA.
- PCA applicant will receive an email from PC20@dhsola.state.or.us with the portal link to complete the additional background check disclosures.
- PCA applicant must complete the disclosures within 21 days from portal link creation.
- PCA applicant will receive an email from PC20@dhsola.state.or.us if fingerprinting is required. Fingerprinting may be required if the PCA applicant lived out of Oregon in the past five years, and if criminal history or abuse history is found or indicated.

- The PCA applicant will receive an email from the PC20@dhsoha.state.or.us when the background check determination is complete.

Part 2: Medicaid Provider Enrollment is required for performing and reimbursement for Medicaid covered services.

- PCA applicant will submit the completed 1e2521 enrollment form and I-9 to Medicaid Provider Enrollment via email at: provider.enrollment@dhsoha.state.or.us
- Questions about the provider enrollment process: Call Provider Enrollment at 800-336-6016 (option 6)
- PCA applicant will receive a welcome letter from the Provider Enrollment Unit upon completion of enrollment.
- Enrolled PCA providers can now seek employment by consumers eligible to receive services through the PCA program. Enrolled PCAs are encouraged to visit the Oregon Home Care Commission (OHCC) registry to create a profile: <https://or-hcc.org/>.

Upon employment with an individual, PCA shall mail a signed and completed W-4 form to withhold taxes correctly.

Federal W-4: <https://www.irs.gov/>

Oregon W-4: <https://www.oregon.gov/dor/forms/Pages/default.aspx>

- **PCAs may send W-4 form to:**
AMH PROV PAY
500 Summer St NE E86
Salem, OR 97301
Or via email: PC20@dhsoha.state.or.us
- After completing the application for PCA provider enrollment, it is required that new PCAs attend a New Worker Orientation offered through Carewell SEIU. For additional information please visit: <https://www.carewellseiu503.org/training/new-workers/>
- Effective 9-1-2021 new workers will be required to attend orientation prior to receiving provider number and will have 120 days after receiving provider number to complete additional required core training classes.
- PCAs can also contact the OHCC with questions regarding the registry, career advancement trainings and certifications:
 - OHCC Toll Free: 877-867-0077
 - OHCC website: <http://www.oregon.gov/dhs/seniors-disabilities/hcc/Pages/index.aspx>