Council on Aging (COA) uses DocuSign to process contracts and service agreements for secure, electronic signatures. When COA sends an agreement for signature, DocuSign sends an email notifying the assigned contract signatory that there is a document that requires an electronic signature. The email contains a secure link to the documents. It is simple, straight-forward, secure, and there are prompts to ensure all of the necessary sections are completed. After all required parties have signed the documents, DocuSign will send an email containing a copy of the fully executed contract documents to any parties who had to sign so that the fully executed agreement can be saved and/or printed for the business' records. Below are some basic instructions on what the DocuSign process looks like for your reference.

# Basic directions on using DocuSign for electronic signatures

1 - Email received from Council on Aging (COA) requesting document(s) to be signed. Once opened, the email will show you a brief message from the COA Contract Writer, and will provide a blue "Review Documents" button that will take you to the documents that need to be e-signed.



#### omers.

#### Alternate Signing Method

Visit Docusign.com, click 'Access Documents', and enter the security code: D845D2EBC91F411AAC0CB64ACA464D312

#### About Docusign

\*\*Note: If you cannot access the "View Documents" link in the email you may follow the directions below the yellow "View Documents" button to open the document(s)

Sign documents electronically in just minutes. It's safe, secure, and legally binding. W through the DocuSign website.\*\* an office, at home, on-the-go -- or even across the globe -- Docusign provides a professional nusted solution for Digital Transaction Management<sup>™</sup>.

#### Questions about the Document?

If you need to modify the document or have questions about the details in the document, please reach out to the sender by emailing them directly.

#### Stop receiving this email

Report this email or read more about Declining to sign and Managing notifications.

If you have trouble signing, visit "<u>How to Sign a Document</u>" on our <u>Docusign Support Center</u>, or become part of the <u>Docusign Community</u> to access tips and guidance from peers.

Download the Docusign App

This message was sent to you by Beverly Montgomery-Clark who is not receive email from this sender you may contact the sender with

\*If you choose to download the DocuSign App on your smart device then you are able to insert an actual handwritten signature on the documents sent to you via DocuSign.

2 - Once the "Review Document" button is clicked in the email a screen opens with the request for signature, similar to the example below.



3 – Once you click the "Continue" blue button the document will open for you to review. There are a few options at the top of the page. You can click the blue "Start" button and it will flash the first section needing to be completed. You can see this circled below.

Review and complete	Finish	-	÷
Docusign Envirope ID: 4E7A1A71-FE90-4571-9E70-08B148BA8405		<b>^</b>	=
			$\underline{\downarrow}$
Cruster of Agers			ē
PASSPORT Provider Agreement			
This Agreement is entered into by and between <u>Council on Aging (ODA's Designee</u> ), located at <u>4601 Malsbary Road, Blue Ash, OH 45242</u> , and <u>ABC123 Home Healthcare</u> (Provider), located at <u>Street address</u> <u>City, state, &amp; zip code</u> ODA's Designee and Provider, together, are referred to in this Agreement as "the Parties."			
<b><u>Purpose</u></b> : The purpose of this Agreement is to define the terms and conditions under which Provider is to furnish and invoice ODA's Designee for the community-based long-term care services Provider furnishes through the PASSORT program administered by ODA's Designee on behalf of the Ohio Department of Aging (ODA).			
The Parties agree as follows:			
Article I: <u>Effective Dates</u>			
This Agreement shall be effective as of the date signed by both Parties and shall remain in effect until June 30, 2025, unless otherwise amended or terminated earlier pursuant to this Agreement.			
All provisions in this Agreement that by their terms must necessarily be performed after the			€
termination or expiration of this Agreement (e.g., records retention, auditing requirements, etc.) shall survive such termination or expiration.			100%
Article II: Medicaid Provider Agreement		-	Q

There is also a "Finish" button in the orange bar at the top of the page with a drop-down arrow next to it. You can see this circled below. This button will not activate and turn blue until you have completed all of the required sections of the agreement.



Clicking on the drop-down arrow shows you other actions that allow you to finish completing the documents later, assign the documents to someone else in your business to sign, decline to sign/void the agreement. Selecting Void/Decline to sign this would mean that you are choosing not to sign the agreement with COA, and you are unable to access this agreement again to try to sign.





There are other options found underneath the "Finish" button, that are shown circled to the left.

Thumbnails are the page icon. This allows you to scroll through specific pages of the agreement for review. Shown in the screenshot below.

Thumbnails X	
▼ COA PSP agmt. eff. thru 6.30.25 (pg.1).pdf Pages: 1	Ð
1	
★ ABC123 Healthcare LLC- COA PSP agmt. 7.1.25 - 6.30.27 (pg.2).pdf Pages: 1	
process that are taken proved the burger and the taken provide the	<b>£</b> 100%
The second set of the sec	Q

Download is the option show with the underlined down arrow. This allows you to download the agreement documents to your smart device or computer to review prior to signing. Shown in the screenshot below.



Print is the option showing a printer icon. This allows you to print a PDF version of the agreement documents to a connected printer to review prior to signing. Shown in the screenshot below.



4 - If there are any sections you need to fill in information into the documents there will be red boxes, as seen in the example below. Once you click in the box you can remove the description language and enter what is being requested. In the example below the provider is entering their legal business name, their business street address, and beginning to add the city, state, and zip code. When you click on a box to enter the field the outline will turn blue.



5 - There will be a blue marker labeled "Next" prompting you on the left edge of each page. As you review each page it will show anywhere an action is required. I.e. company name, address, initials, signature, etc. You can also click on the Next marker and it will take you to the next section requiring you to fill in information, enter initials, and/or a signature. Below is an example of the "Next" marker circled in red.

Review and complete			Finish 👻
	D. This Agreement is so the PASSPORT pro	ubject to the continued designation of ODA's Designee to administer gram on ODA's behalf, and to the continued availability of funding	Ê
	from the State of Oh this Agreement sha	itio. The obligations of the State of Ohio and ODA's Designee under II terminate immediately if, at any time during the course of this Designee is de designed by ODA or funde serves to be available	$\overline{\mathbf{\Lambda}}$
	from the State of Ol Agreement.	io or ODA for the purposes of paying any costs incurred under this	<b>e</b>
	E. In the event termina Article, ODA's Desi the termination as s procedures described	tion of this Agreement occurs pursuant to paragraphs C. or D. of this gnee shall send a written notice to Provider specifying the reasons for oon as possible after the termination, in accordance with the notice d in Article XII of this Agreement.	
	Article XII: <u>Notice Requi</u>	rements	
Next	Any notice required to be pr class United States mail wit	rovided under this Agreement shall be hand delivered, or sent by first h postage prepaid, and addressed as follows:	
	A. If to ODA's Designee:	Council on Aging	
		4601 Malsbary Road	
		Blue Ash, Ohio 45242	
		Attn: Suzanne Burke, CEO	
	B. If to Provider:	ABC123 Home Healthcare	Œ
		12345 Happiness Way	100%
		Middleofnowhere, OH 45555	
Powered by 💣 docusign		English (US) 🔻 Terms of Use   Privacy	Copyright © 2025 Docusign, Inc. All rights reserved

6 – If you have never used DocuSign before, when you click on a section to initial or sign it will pull up a box entitled "Adopt Your Signature", similar to the one seen below. You just type in your name and your initials, and then you have 3 options for creating your signature. If you choose "Select Style" (as shown in the figure below), you may choose from a variety of fonts to create your electronic signature.

D. F		Adopt Your Signature			> Hide
	Article I	Confirm your name, initials, and signature. Full Name Tunisha Hamilton	Initials TH		<b>4</b> ⊖ 2
	، () ۲	Select Style Draw Upload			3
Next		Docusigned by: Turislua Hamilton 482cF00678De420	s †	Change Style	4
		By clicking Adopt, I agree that the signature and initials will be the electronic n for all purposes when I (or m/ agent) use them on documents, including legal pen-and-paper signature or initial.	epresentation of m ly binding contracts Adopt and In	ny signature and initials s - just the same as a nitial Cancel	6
		Designee within 180 days of the date the invoiced services	were furnishe	ed by the	

If you click on "Draw" you may use your computer's mouse, or a stylus on a touch screen device, to actually write your signature and initials. (See the figure below.) If you download the DocuSign App (as noted on pg. 2) this makes electronically signing your documents by hand easier.

D. F	Adopt Your Initials	
5	Adopt four mitials	
	Confirm your name, initials, and signature.	
Article I	Full Name	Initials
A. 1	Tunisha Hamilton ×	тн
`	Select Style Draw Upload	
	Draw your initials Clear	
	By clicking Adopt, I agree that the signature and initials will be the electronic r for all purposes when I (or my agent) use them on documents, including legal	epresentation of my signature and initials ly binding contracts - just the same as a
	pen-and-paper signature or initial.	

If you click on "Upload" you may upload an image of your signature and initials, but please be aware that the program limits the size of the files it is able to store. (See the figure below.)

E	
	Adopt Your Signature
ę K	Confirm your name, initials, and signature.
ticle I	Full Name Initials
1	Tunisha Hamilton × TH
, Y	Select Style Draw Upload
	Preview
	DS
	By clicking Adopt, I agree that the signature and initials will be the electronic representation of my signature and initials for all purposes when I (or my agent) use them on documents, including legally binding contracts - just the same as a pen-and-pager signature or initial.
	Adopt and Initial Cancel

# 7 – When asked to initial an item it will look similar to the example below circled in blue.

	Council on Aging		
Next		Provider understands services provided to individuals enrolled in the Medicaid waiver-funded component of the PASSPORT program are Medicaid-funded services. Further, Provider understands that in order to receive federal reimbursement, invoices for all services charged to the Medicaid program are required by law to be submitted to ODM within 365 days of the date on which the services were provided, regardless of whether invoices are submitted to ODM by Provider directly, or on behalf of Provider by ODA's Designee. Therefore, in consideration of the agreement by ODA's Designee to serve as Provider's payer of Medicaid waiver service claims, Provider shall submit all invoices to ODA's Designee within 365 days of the date the invoiced services were furnished by Provider. Provider understands and accepts that ODA's Designee shall not reimburse Provider for any services invoiced more than 365 days after the date on which the services were provided.	
	$() \mathbf{N}_{-}$	If Describen also see this section (so indicated lass also also also also also also have been also it is the la	

### When asked to select an item it will look similar to the example below.



## When the form is requesting company name, address, etc. it will look similar to the examples below.



Review and complete		Finish 👻
	D. This Agreement is subject to the continued designation of ODA's Designee to administer the PASSPORT program on ODA's behalf, and to the continued availability of funding	Ê
	from the State of Ohio. The obligations of the State of Ohio and ODA's Designee under this Agreement shall terminate immediately if, at any time during the course of this Agreement ODA's Designed is developing the ODA or funds genes to be available	$\overline{\mathbf{\Lambda}}$
	from the State of Ohio or ODA for the purposes of paying any costs incurred under this Agreement.	ē
	E. In the event termination of this Agreement occurs pursuant to paragraphs C. or D. of this Article, ODA's Designee shall send a written notice to Provider specifying the reasons for the termination as soon as possible after the termination, in accordance with the notice procedures described in Article XII of this Agreement.	
	Article XII: Notice Requirements	
Next	Any notice required to be provided under this Agreement shall be hand delivered, or sent by first class United States mail with postage prepaid, and addressed as follows:	
	A. If to ODA's Designee: Council on Aging	
	4601 Malsbary Road	
	Blue Ash, Ohio 45242	
	Attn: Suzanne Burke, CEO	
	B. If to Provider: ABC123 Home Healthcare	Ð
	12345 Happiness Way	100%
	Middleofnowhere, OH 45555	୍
Powered by <b># docusign</b>	English (US) 💌 Terms of Use   Privacy	Copyright © 2025 Docusign, Inc. All rights reserved

When a signature is required, you will see a purple and red "Sign" box as shown in the example below circled in green.

Next	This Agreement contains the entire agreement and understanding of the Parties heretor supersedes any prior or contemporaneous written or oral agreements, representations warranties between the Parties with respect to the subject matter hereof.	) and , and
	<b>IN WITNESS WHEREOF,</b> the Parties have executed this Agreement on the last date set below.	forth
	For Council on Aging: For Provider:	
	Signature: Signature:	
	Name: Suzanne Burke Name: Beverly J. Montgomery-Clark	
	Title: Chief Executive Officer Title: Administrator	
	Date: Date: 5/21/2025   9:47 AM EDT	

8 – Once all sections are completed the "Next" marker will disappear and the "Finish" button at the top turns blue which means it can be selected. A blue "Finish" button also appears at the bottom of the documents once everything has been completed. This can be seen in the examples below in the red boxes.

Review and complete				Finish 👻	
	11ue:	—		<u>^</u>	
	Date: 5/21/2025   9:49 AM EDT	_			Ē
				2	$\downarrow$
				4	9
		11			
	COA 2025 BAA.docx		11 of 11		
		Finish			
				 6	Ð

9 – Once you select "Finish" you will see a processing circle in the middle of the page. Once the document is finished submitting you will receive a screen telling you that the agreement has been signed successfully. See the example below. There is also a purple button saying "View Plans" which you can ignore. This would only be applicable if you are interested in paying to open a DocuSign account for your business.



Once all required parties have signed, you will also receive an email confirmation showing that the document was completed, and a copy of the fully executed documents will be attached to the email for your review and to print and/or save a copy for your records. See example below.



You can also click on the link "View Completed Documents" in the email to be taken to DocuSign to view the fully executed documents as well. See circled link in the email example below.



# \*Notes to help with using DocuSign:

• Because the emails generated from DocuSign can be seen as spam mail by some email filters, if you are expecting a DocuSign link and have not received it please check your spam/junk folder to see if your filter has flagged the DocuSign email as spam.

You can add the DocuSign System email, dse\_na2@docusign.net, to your approved email list and this will help prevent the emails being filtered as spam mail.

• If you have used DocuSign before, when signing an agreement, the DocuSign system will remember the information you last entered in the system. It will remember the company name, title, address, signature, and any other information you may have used from the last signed document(s). This means if you are a contract signatory for more than one business you want to make sure that you are using the information that matches the business title listed in the subject line of the DocuSign email, and what is listed at the top of the agreement page in DocuSign.