



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health Services

NEWSLETTER

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TO: Home Health Agencies and Homemaker Agencies Providing Personal Care Assistant Services in Bergen, Essex, Hudson, Middlesex, Passaic and Union Counties

SUBJECT: Personal Care Assistant (PCA) Initiative

EFFECTIVE: Immediately

BACKGROUND: N.J.A.C . 10:60 is the Home Care Services Chapter for the New Jersey Medicaid program and the NJ KidCare program. Provider notification requirements are described in Section 10:60-1.16. Providers of home care services must notify the Medicaid District Office (MDO) when services are initiated or terminated and at intervals during the delivery of services.

PURPOSE: To inform providers of PCA services that effective immediately, the MDO has expanded the concurrent review and assessment process for Medicaid and NJ KidCare-Plan A beneficiaries residing in Bergen, Essex, Hudson, Middlesex, Passaic and Union Counties.

ACTION: There is no change to the requirement that written notification must be submitted to the MDO when PCA services are initiated or terminated. The Division of Medical Assistance and Health Services (DMAHS) is clarifying the timeframes for submitting PCA reassessments to the MDO. Also, DMAHS is changing the documentation requirements for PCA services when the number of hours of PCA service is less than 25 hours.

Effective immediately, regardless of the number of hours of PCA services, providers must notify the MDO in writing, using the FD-365 and an evaluation scale, when serving Medicaid or NJ KidCare-Plan A beneficiaries living in the above-stated counties. This procedure is to be followed by providers which intend to begin PCA services after an initial **assessment** or to continue PCA services following a nursing **reassessment**. This procedure is to be followed for **hour one up to 40 hours per calendar work week**. An FD-365 (Rev. 9/91) must be completed and submitted with an evaluation

scale (PCA Socio-Medical Evaluation) to the appropriate MDO serving the county of residence of the beneficiary. If additional medical information is needed by the MDO reviewer, provider patient records, HCFA-485, or other forms can be submitted to the MDO as requested.

In accordance with N.J.A.C. 10:60-1.16(a)2, providers of PCA services must notify the MDO when a PCA service is initiated or terminated by a homemaker agency. In addition, the provider must initiate a nursing reassessment at least thirty days before the current period ends. Homemaker agencies should continue to follow their routine reassessment schedule for Medicaid and NJ KidCare-Plan A beneficiaries. The provider evaluation scale (referenced in Newsletter Volume 6 No. 8 dated September 1996) and FD-365 (Prior Authorization Form) must be submitted to the MDO within five working days of completing the reassessment. The MDO requires fifteen working days to schedule and perform the concurrent review.

Unless formal prior authorization is needed for over 25 hours of PCA services, the provider may initiate and/or continue services while the concurrent review and assessment is being conducted. Ongoing, medically needed PCA services may be provided or continue to be provided following the initial nursing assessment or reassessment unless formal prior authorization for over 25 hours is required and must be renewed.

The MDOs will notify the provider in writing regarding the outcome of the concurrent review and assessment for PCA services.

For information concerning the prior authorization process, please call the Medicaid District Office serving the beneficiary's county of residence. Questions regarding this Newsletter may be directed to the Bureau of Home and Community Services at 609-588-2620, the Office of Beneficiary and Provider Services at 609-584-4380, or the MDO serving the county of residence of the beneficiary.

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