

State Plan Under Title XIX of the Social Security Act
Medical Assistance Program
State: North Carolina

Payments for Medical and Remedial Care and Services

Payment for Personal Care Services for Adults and Children:

SFY 2012 – Rates will be frozen at the rate in effect on June 30, 2011. Effective November 1, 2011, existing rates are adjusted by a negative 2.67% to yield a twelve (12) month two percent (2%) reduction in the nine (9) remaining months of this State Fiscal Year.

SFY 2013 – Effective July 1, 2012, the rates will be adjusted such that they will equal 98% of the rate in effect July 1, 2011. There will be no further annual adjustments this state fiscal year. This methodology ends December 31, 2012.

SFY 2013 – Effective January 1, 2013, a new rate is established as calculated in the methodology as described on Attachment 4.19-B, Section 23, Page 6.

All rates for this service are published at <http://www.ncdhhs.gov/dma/fee/index.htm>.

Reference: Attachment 4.19-B, Section 23, Page 6

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MEDICAL ASSISTANCE
STATE NORTH CAROLINA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

23. Any other Medical Care and any other type of remedial care recognized under State law, specified by the Secretary.

PERSONAL CARE SERVICES

Personal Care Services are reimbursed under the authority of 42 CFR 440.167 and when provided as defined in Attachment 3.1-A.1, Page 19, of this State Plan.

Effective January 1, 2013, payment for Personal Care Services (PCS) shall be reimbursed to providers, who are allowed to bill PCS in fifteen (15) minute increments of care at a rate of \$3.88 per unit. The agency's fee schedule rate is based upon historical cost data collected from the provider community. This rate will be a prospective rate and shall not be subject to any cost settlements.

Except as otherwise noted in the plan, the state-developed fee schedule rate is the same for both governmental and non-governmental providers of Personal Care Services. This rate is published at <http://www.ncdhhs.gov/dma/fee/index.htm>. Subsequent to the initial effective date of the Personal Care Services rate, this rate shall be adjusted annually using the Medicare Home Health Agency market basket index unless otherwise noted on Supplement 1, page 1b to the 4.19-B section.

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24f. Personal Care Services (cont.):

SERVICES

- a. Personal care services (PCS) include a range of human assistance provided to persons of all ages with disabilities and chronic conditions to enable them to accomplish tasks that they would ordinarily do for themselves if they were not disabled. These PCS are intended to provide person-to-person, hands-on assistance by a PCS direct care worker in the beneficiary's home or residential setting with common activities of daily living (ADLs) that, for this program are eating, dressing, bathing, toileting, and mobility. PCS also include: assistance with instrumental activities of daily living (IADLs), such as light housekeeping tasks, when directly related to the approved ADLs and the assistance is specified in the beneficiary's plan of care. PCS is provided by a direct care worker who is employed by a licensed home care agency, or by a residential facility licensed as an adult care home, family care home, supervised living facility, or combination home, and who meets the qualifications specified on Attachment 3.1-A.1, Pages 23-29, section c.
- b. In addition to the specified assistance with ADLs and IADLs, qualified PCS direct care workers may also provide Nurse Aide I and Nurse Aide II tasks as specified on Attachment 3.1-A.1, Pages 23-29, section c., pursuant to the North Carolina Board of Nursing as described in 21 NCAC 36.0403 and as specified in the beneficiary's approved plan of care.

ELIGIBILITY

- a. To qualify for PCS, an adult or child must:
 1. Be referred for PCS by his or her primary care or attending physician;
 2. Be medically stable;
 3. Not require monitoring, supervision, or ongoing care from a licensed health care professional;
and
 4. Require hands-on assistance with at least:
 - a. Three of the five qualifying ADLs at the limited level; or
 - b. Two of the five qualifying ADLs, one of which is at the extensive level; or
 - c. Two of the five qualifying ADLs, one of which is at the full dependency level.
- b. Each ADL is scored at one of five levels of self-performance or assistance. Totally Able and Cueing/Supervision levels of need do not entail hands-on assistance and are not qualifying levels of need for PCS. The three qualifying levels of need are Limited Hands-On Assistance, Extensive Hands-On Assistance, and Full Dependence.

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24f. **Personal Care Services (cont.):**

The five levels of need are defined as follows:

1. Totally Able- Beneficiary is able to self-perform 100 percent of activity, with or without aides or assistive devices, and without supervision or assistance setting up supplies and environment.
2. Cueing/Supervision- Beneficiary is able to self-perform 100 percent of activity, with or without aides or assistive devices, and requires supervision, monitoring, or assistance retrieving or setting up supplies or equipment.
3. Limited Hands-On Assistance- Beneficiary is able to self-perform more than 50 percent of activity and requires hands-on assistance to complete remainder of activity.
4. Extensive Hands-On Assistance- Beneficiary is able to self-perform less than 50 percent of activity and requires hands-on assistance to complete remainder of activity.
5. Full Dependence- Beneficiary is unable to perform any of the activity and is totally dependent on another to perform all of the activity.

c. Service Limitations:

1. Up to 80 hours per month for adults,
2. Up to 60 hours per month for children. Pursuant to section 1905(r)(5) of the Social Security Act, the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit requires that states provide all medically necessary services coverable under the Medicaid program to EPSDT eligible children. Hours above the 60 hours may be provided to children through the EPSDT allowance; and
3. Services levels must be re-assessed and re-authorized at least annually.

d. Service Exclusions:

1. Services provided in an unauthorized location;
2. Services provided by unauthorized individuals or providers;
3. The beneficiaries primary need is housekeeping or homemaking;
4. The IADLs performed are not directly related to the approved ADLs or as specified in the beneficiaries plan of care;
5. In the event that the services provided in a month exceed a beneficiary's authorized monthly limit, services that exceed the authorized level will not be reimbursed;
6. The services provided are not in accordance with the ~~approved~~ plan of care;
7. Companion sitting or leisure time activities;

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8. Continuous monitoring or ongoing beneficiary supervision except when approved under the EPSDT program based on a determination of medical necessity;
 9. Financial management;
 10. Errands; and
 11. Personal care or home management tasks for other residents of the household

North Carolina assures that personal care services do not include, and FFP is not available for, services to individuals residing in institutions for mental disease (IMD).

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24f. **Personal Care Services (cont.):**

**PERSONAL CARE SERVICES (PCS) AGENCY/ENTITY AND DIRECT CARE WORKER
QUALIFICATIONS**

- a. **Each PCS agency/entity must be enrolled with NC Medicaid.**
- b. To ensure that the PCS direct care workers are properly supervised, and that PCS services are available in a range of settings, and not as a limitation on the availability of services; PCS Agency/Entity providers are required to perform the following activities to comply with state laws and rules:
1. Complete background checks on all employees;
 2. Conduct trainings;
 3. Monitor quality of care;
 4. Develop a beneficiary plan of care; and
 5. Ensure that PCS direct care workers work under ~~the~~ supervision as specified in licensure requirements;

PCS agency/entity and direct care worker qualifications continue on Attachment 3.1-A.1, Pages 23-29.

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PERSONAL CARE SERVICES (PCS) AGENCY /ENTITY & DIRECT CARE WORKER QUALIFICATIONS (continued)

- c. PCS agency/entity provider definitions and direct care worker minimum qualifications, minimum training requirements, and additional staffing requirements are as follows:

	AGENCY/ENTITY PROVIDER				
	ADULT CARE HOME	FAMILY CARE HOME	COMBINATION HOME	SUPERVISED LIVING	HOME CARE AGENCIES
Agency/Entity Provider Definitions	Adult Care Homes licensed as a residential facility as defined under 131D-2 101 (1a) and licensed by the State of North Carolina as an adult care home or family care home or; a combination home as defined in G.S. 131E-101(1a).	Adult care homes that provide care to two to six unrelated residents are commonly called family care homes. G.S. 131D-2.1	In accordance to G.S. 131E-101, a combination home, as distinguished from a nursing home, means a facility operated in part as a nursing home, and which also provides residential care for aged or disabled persons whose principal need is a home with the shelter or personal care their age or disability requires. Services to the resident in an adult care home bed within the combination home are distinct from NF beds	A group home licensed under G.S. 122C and under 10A NCAC 27G .5601 as a supervised living facility for two or more adults whose primary diagnosis is mental illness, a developmental disability, or substance abuse dependency	Home care agencies as defined under G.S. 131E-136 (2) and licensed by the State of North Carolina as a home care agency under 10A NCAC 13J;"Home care agency" means a private or public organization that provides home care services.

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PERSONAL CARE SERVICES (PCS) AGENCY /ENTITY & DIRECT CARE WORKER QUALIFICATIONS (continued)

	AGENCY/ENTITY PROVIDER				
	ADULT CARE HOME	FAMILY CARE HOME	COMBINATION HOME	SUPERVISED LIVING	HOME CARE AGENCIES
			in that services do not meet the NF level of care criteria, MDS process is not used, cannot be billed at the NF case rate, and any medical care is incidental. An adult care home bed in a combination home provides the residential care to aged or disabled who demonstrate unmet needs for personal care. While medical care is incidental services center on unmet activities of daily living such as assistance with bathing, dressing, toileting, ambulation, and eating.		
Direct Care Worker Minimum Qualifications	18 years of age or; high school graduates or equivalent	18 years of age or; high school graduates or equivalent	18 years of age or; high school graduates or equivalent	18 years of age or; high school graduates or equivalent	18 years of age or; high school graduates or equivalent
PCS Direct Care Worker_Minimal Training Requirements	1) Beneficiary rights; 2) Confidentiality and Privacy Practices; 3) Personal Care Skills a) Assistance with Bathing b) Assistance with Toileting	1) Beneficiary rights; 2) Confidentiality and Privacy Practices; 3) Personal Care Skills a) Assistance with Bathing b) Assistance with Toileting	1) Beneficiary rights; 2) Confidentiality and Privacy Practices; 3) Personal Care Skills a) Assistance with Bathing b) Assistance with Toileting	1) Beneficiary rights; 2) Confidentiality and Privacy Practices; 3) Personal Care Skills a) Assistance with Bathing b) Assistance with Toileting	1) Beneficiary rights; 2) Confidentiality and Privacy Practices; 3) Personal Care Skills a) Assistance with Bathing Assistance with Toileting

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	AGENCY/ENTITY PROVIDER				
	ADULT CARE HOME	FAMILY CARE HOME	COMBINATION HOME	SUPERVISED LIVING	HOME CARE AGENCIES
	c) Assistance with Mobility d) Assistance with Dressing e) Assistance with Eating 4) Documentation and Reporting of beneficiary accidents and incidents; 5) Recognizing and Reporting Signs of Abuse and Neglect; 6) Infection Control	c) Assistance with Mobility d) Assistance with Dressing e) Assistance with Eating 4) Documentation and Reporting of beneficiary accidents and incidents; 5) Recognizing and Reporting Signs of Abuse and Neglect; 6) Infection Control	c) Assistance with Mobility d) Assistance with Dressing e) Assistance with Eating 4) Documentation and Reporting of beneficiary accidents and incidents; 5) Recognizing and Reporting Signs of Abuse and Neglect; 6) Infection Control	c) Assistance with Mobility d) Assistance with Dressing e) Assistance with Eating 4) Documentation and Reporting of beneficiary accidents and incidents; 5) Recognizing and Reporting Signs of Abuse and Neglect; 6) Infection Control	b) c) Assistance with Mobility d) Assistance with Dressing e) Assistance with Eating 4) Documentation and Reporting of beneficiary accidents and incidents; 5) Recognizing and Reporting Signs of Abuse and Neglect; 6) Infection Control
Additional Staffing Qualifications	1. Personal Care Aide: Personal Care Aides providing services in the Adult Care Home must meet the staff orientation, training, competency, and continuing education requirements specified in licensure requirements,	1. Personal Care Aide: Personal Care Aides providing services in the Adult Care Home must meet the staff orientation, training, competency, and continuing education requirements specified in licensure requirements,	1. Personal Care Aide: Personal Care Aides providing services in the Adult Care Home must meet the staff orientation, training, competency, and continuing education requirements specified in licensure requirements	1. Paraprofessionals: Staff must meet the requirements for paraprofessionals in 10A NCAC 27G.0200. Staff must have a high school diploma or GED. Staff must meet participant specific competencies as identified by the participant's person-centered planning team and	1. Personal Care Aide: Personal Care Aides providing services in the Adult Care Home must meet the staff orientation, training, competency, and continuing education requirements specified in licensure requirements, including successful completion of an 80-hour personal care training and

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	AGENCY/ENTITY PROVIDER				
	ADULT CARE HOME	FAMILY CARE HOME	COMBINATION HOME	SUPERVISED LIVING	HOME CARE AGENCIES
	including successful completion of an 80-hour personal care training and competency evaluation program established by DHHS. The training must be successfully completed within six months of hiring. 2. Nurse Aide I: Nurse Aides at this level are listed on the North Carolina Nurse Aide Registry and perform basic nursing skills and personal care activities. Nurse Aide I activities are delegated by a licensed nurse based on	including successful completion of an 80-hour personal care training and competency evaluation program established by DHHS. The training must be successfully completed within six months of hiring. 2. Nurse Aide I: Nurse Aides at this level are listed on the North Carolina Nurse Aide Registry and perform basic nursing skills and personal care activities. Nurse Aide I activities are delegated by a licensed nurse based on the knowledge, skill,	including successful completion of an 80-hour personal care training and competency evaluation program established by DHHS. The training must be successfully completed within six months of hiring. 2. Nurse Aide I: Nurse Aides at this level are listed on the North Carolina Nurse Aide Registry and perform basic nursing skills and personal care activities. Nurse Aide I activities are delegated by a	documented in the Person Centered Plan. Staff must successfully complete First Aid, CPR and DMH/DD/SAS Core Competencies and required refresher training. Paraprofessionals providing this service must be supervised by a Qualified Professional. Supervision must be provided according to supervision requirements specified in 10A NCAC 27G.0204 and according to licensure or certification requirements of the appropriate discipline. Must have a criminal record check A healthcare registry check is required in accordance with 10A NCAC 27G.0200	competency evaluation program established by DHHS. The training must be successfully completed within six months of hiring. 2. Nurse Aide I: Nurse Aides at this level are listed on the North Carolina Nurse Aide Registry and perform basic nursing skills and personal care activities. Nurse Aide I activities are delegated by a licensed nurse based on the knowledge, skill, training, and competence of the individual aide. Nurse Aides at this level must successfully complete an orientation program specific to the employing facility, and must successfully complete a training and competency evaluation approved by DHHS. The training and competency evaluation program must be successfully completed within four months of the employment date. During the four month

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	AGENCY/ENTITY PROVIDER				
	ADULT CARE HOME	FAMILY CARE HOME	COMBINATION HOME	SUPERVISED LIVING	HOME CARE AGENCIES
	the knowledge, skill, training, and competence of the individual aide. Nurse Aides at this level must successfully complete an orientation program specific to the employing facility, and must successfully complete a training and competency evaluation approved by DHHS. The training and competency evaluation program must be successfully completed within four months of	training, and competence of the individual aide. Nurse Aides at this level must successfully complete an orientation program specific to the employing facility, and must successfully complete a training and competency evaluation	licensed nurse based on the knowledge, skill, training, and competence of the individual aide. Nurse Aides at this level must successfully complete an orientation program specific to the employing facility, and must successfully complete a training and competency evaluation		period, the individual is assigned, and performs under supervision, only tasks for which he or she has demonstrated competence.

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	AGENCY/ENTITY PROVIDER				
	ADULT CARE HOME	FAMILY CARE HOME	COMBINATION HOME	SUPERVISED LIVING	HOME CARE AGENCIES
	the employment date. During the four month period, the individual is assigned, and performs under supervision, only tasks for which he or she has demonstrated competence.	approved by DHHS. The training and competency evaluation program must be successfully completed within four months of the employment date. During the four month period, the individual is assigned, and performs under supervision, only tasks for which he or she has demonstrated competence.	approved by DHHS. The training and competency evaluation program must be successfully completed within four months of the employment date. During the four month period, the individual is assigned, and performs under supervision, only tasks for which he or she has demonstrated competence.		

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	AGENCY/ENTITY PROVIDER				
	ADULT CARE HOME	FAMILY CARE HOME	COMBINATION HOME	SUPERVISED LIVING	HOME CARE AGENCIES
	3. Nurse Aide II: Nurse Aides at this level are authorized to perform more complex nursing skills with emphasis on sterile technique in elimination, oxygenation, and nutrition, after successful completion of state-approved Nurse Aide II training program and competency evaluation program.	3. Nurse Aide II: Nurse Aides at this level are authorized to perform more complex nursing skills with emphasis on sterile technique in elimination, oxygenation, and nutrition, after successful completion of state-approved Nurse Aide II training program and competency evaluation program.	3. Nurse Aide II: Nurse Aides at this level are authorized to perform more complex nursing skills with emphasis on sterile technique in elimination, oxygenation, and nutrition, after successful completion of state-approved Nurse Aide II training program and competency evaluation program.	3. Nurse Aide II: Nurse Aides at this level are authorized to perform more complex nursing skills with emphasis on sterile technique in elimination, oxygenation, and nutrition, after successful completion of state-approved Nurse Aide II training program and competency evaluation program.	3. Nurse Aide II: Nurse Aides at this level are authorized to perform more complex nursing skills with emphasis on sterile technique in elimination, oxygenation, and nutrition, after successful completion of state-approved Nurse Aide II training program and competency evaluation program.

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