



North Carolina Department of Health and Human Services
Division of Health Service Regulation
Office of the Director

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MEMORANDUM

July 19, 2010

To: Licensed Home Care Agencies participating in the Medicaid Personal Care Services (PCS) Program

From: Jeff Horton

Subject: Client Assessments

The purpose of this memorandum is to clarify licensed home care agency requirements for accepting and providing care to persons who have been authorized to receive care through the Medicaid PCS program. Reference is made to Division of Medical Assistance (DMA) Clinical Coverage Policy No. 3C, which can be viewed and downloaded at the following web address: <http://www.ncdhhs.gov/dma/mp/3C.pdf>

Pursuant to Policy No. 3C, home care providers must utilize the independent assessment completed by DMA's designated independent assessment entity (IAE) as the basis for completion of the client's plan of care. The agency is not required (either by Medicaid policy or N.C. Home Care Licensure Rules for in-home aide services) to complete a separate client assessment as a part of the care planning process, but rather must use the independent assessment as the basis for the plan of care. The licensed agency must conduct a home visit, develop the plan of care and submit the plan of care to the IAE for approval prior to initiating services. If the patient's condition has changed since the IAE assessment was completed, the home care agency should follow DMA policy related to change of client's status. It should be noted the above process only applies to the Medicaid PCS program.

We hope this helps clarify the process for agencies that offer Medicaid PCS. Again this clarification only applies to PCS service reimbursed by Medicaid. For all other services that require client assessments, the agency is responsible for completion of that assessment.

Please do not hesitate to contact this agency if there are questions or we can be of further assistance.

Cc: Dr. Craigan Gray, Division of Medical Assistance
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