

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance



Office of the Senior Deputy Director/Medicaid Director

Revised Transmittal # 15-44

TO: Home Health Agencies (HHAs)

FROM: Claudia Schlosberg, J.D. 
Senior Deputy Director and State Medicaid Director

DATE: December 11, 2015

SUBJECT: Revised: Notice of Emergency and Proposed Rule for Medicaid Reimbursement for State Plan Personal Care Services

This transmittal is to notify Home Health Agencies (HHAs) that the emergency and proposed rule for Medicaid Reimbursement for Personal Care Services was adopted on October 27, 2015, raising the reimbursement rate to \$20.00/hour. This means that the new rate is effective for dates of services beginning October 27, 2015. For dates of services beginning January 1, 2016, each provider shall be reimbursed five dollars and two cents (\$5.02) per unit for allowable services as authorized in the approved plan of care, of which no less than three dollars and forty-six cents (\$3.46) per fifteen (15) minutes for services rendered by a PCA, shall be paid to the PCA to comply with the Living Wage Act of 2006, effective June 8, 2006 (D.C. Law 16-118; D.C. Official Code §§ 2-220.01 *et seq.* (2012 Repl.)). The remaining rules summarized below, will become effective on the date that the corresponding State Plan amendment is approved by CMS.

This emergency and proposed rule will amend the previously published rule by:

- (1) Establishing that an order for Personal Care Aide (PCA) services can be written by an Advanced Practice Registered Nurse, in addition to a physician;
- (2) Changing the re-assessment period to once every twelve (12) months rather than every six (6) months, and allowing for an adjustment period of up to 18 months to align the assessment date with the Medicaid renewal date;
- (3) Expanding the definition of PCA services to include cueing to assist a beneficiary with the performance of routine activities of daily living; measuring and recording a beneficiary's height and weight; implementing universal precautions to ensure infection control, assisting with telephone use; and shopping

for items related to promoting the patients nutritional status and other health needs that relate to the scope of services;

- (4) Eliminating the need for a physician's signature on plans of care after the initial plan of care but requiring that all subsequent plans be approved by DHCF or its agent;
- (5) Requiring that records be maintained for a period of ten (10) years, or after the completion of all audits, whichever is longer;
- (6) Eliminating the provision that allowed a beneficiary to receive one thousand and forty (1040) hours of PCA services without an authorization;
- (7) Clarifying that all PCA services must be prior authorized based upon a conflict-free assessment of need and capping state plan PCA services in an amount not to exceed eight (8) hours per day, seven (7) days a week;
- (8) Establishing that although reimbursement of PCA services is prohibited in living arrangements which include personal care services as part of the reimbursed service, beneficiaries residing in assisted living facilities may receive PCA services upon prior authorization by DHCF or its agent;
- (9) Clarifying that parents of adult children are not considered legally responsible relatives and may provide PCA services;
- (10) Clarifying that PCA and Adult Day Health Program (ADHP) services under the 1915(i) State Plan Option cannot be billed concurrently and that if a person is receiving the services on the same day, the combination of both PCA and ADHP services shall not exceed a total of twelve (12) hours per day;
- (11) Clarifying existing terms to eliminate ambiguity and simplify interpretation; and
- (12) Raising the reimbursement rate for State Plan PCA services to \$5.00 per unit of service or \$20 per hour.

If you have any questions, please contact Mary Devasia, Acting Director, Long Term Care Administration (DHCF), 202-442-5931, Mary.Devasia2@dc.gov.