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**CHAPTER 30: PERSONAL CARE SERVICES** 

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#### **EPSDT – PCS COVERED SERVICES**

Personal care services are defined as tasks that are medically necessary as they pertain to an EPSDT eligible's physical requirements when physical limitations due to illness or injury necessitate assistance with eating, bathing, dressing, personal hygiene, bladder or bowel requirements, and these services prevent institutionalization and enable the recipient to be treated on an outpatient basis rather than an inpatient basis to the extent that services on an outpatient basis are projected to be more cost effective than services provided on an inpatient basis.

## **Service Definitions**

EPSDT – Personal Care Services include the following tasks:

- Basic personal care, toileting and grooming activities, including bathing, care of the hair and assistance with clothing,
- Assistance with bladder and/or bowel requirements or problems, including helping the recipient to and from the bathroom or assisting the recipient with bedpan routines, but excluding catheterization.
- Assistance with eating and food, nutrition and diet activities, including preparation of meals for the recipient only.
- Performance of incidental household services, only for the recipient, not the entire
  household, which are essential to the recipient's health and comfort in his/her
  home. This does not include routine household chores such as regular laundry,
  ironing, mopping, dusting, etc., but instead arises as the result of providing
  assistance with personal care to the recipient.

Examples of such activities are:

- Changing and washing the recipient's soiled bed linens.
- Rearranging furniture to enable the recipient to move about more easily in his/her own home.
- Cleaning the recipient's eating area after completion of the meal and/or cleaning items used in preparing the meal, for the recipient only.
- Accompanying, not transporting, the recipient to and from his/her physician and/or medical facility for necessary medical services.

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- EPSDT PCS are not to be provided to meet child care needs nor as a substitute for the parent in the absence of the parent.
- EPSDT PCS are not allowable for the purpose of providing respite care for the primary care giver. Respite services are only available through the home and community based waiver programs.
- EPSDT PCS provided in an educational setting shall not be reimbursed if these services duplicate services provided by or must be provided by the Department of Education.

## **Location of Service**

EPSDT personal care services must be provided in the recipient's home or in another location outside the recipient's home, if it is medically necessary to be outside of the recipient's home. The recipient's home is defined as the recipient's own dwelling: an apartment, a custodial relative's home, a boarding home, a foster home, a substitute family home or a supervised living facility.

Institutions such as a hospital, institution for mental diseases, nursing facility, intermediate care facility for the developmentally disabled or residential treatment center are not considered a recipient's home.

#### **Service Limitations**

EPSDT – personal care services are not subject to service limits. The units of service approved shall be based on the physical requirements of the recipient and medical necessity for the covered services in the EPSDT – PCS program.

Hours may not be "saved" to be used later or in excess of the number of hours specified according to the approval letter.

## **Excluded Services**

The following services are not appropriate for personal care and are not reimbursable as EPSDT – PCS:

- Insertion and sterile irrigation of catheters (although changing of a catheter bag is allowed),
- Irrigation of any body cavities which require sterile procedures,

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- Application of dressing, involving prescription medication and aseptic techniques, including care of mild, moderate or severe skin problems,
- Administration of injections of fluid into veins, muscles or skin,
- Administration of medicine (as opposed to assisting with self-administered medication for EPSDT eligibles over eighteen years of age),
- Cleaning of floor and furniture in an area not occupied by only the recipient,

Example: Cleaning entire living area if the recipient occupies only one room or an area shared with other household members.

• Laundry, other than that incidental to the care of the recipient,

Example: laundering of clothing and bedding for the entire household as opposed to simple laundering of the recipient's clothing or bedding,

- Shopping for groceries or household items other than items required specifically for the health and maintenance of the recipient, and not for items used by the rest of the household,
- Skilled nursing services as defined in the state Nurse Practices Act, including medical observation, recording of vital signs, teaching of diet and/or administration of medications/injections, or other delegated nursing tasks,
- Teaching a family member or friend how to care for a patient who requires frequent changes of clothing or linens due to total or partial incontinence for which no bowel or bladder training program for the patient is possible,
- Specialized nursing procedures such as:
  - Insertion of nasogastric feeding tube
  - In-dwelling catheter
  - Tracheotomy care
  - Colostomy care
  - Ileostomy care
  - Venipuncture
  - Injections

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• Rehabilitative services such as those administered by a physical therapist,

- Teaching a family member or friend techniques for providing specific care,
- Palliative skin care with medicated creams and ointments and/or required routine changes of surgical dressings and/or dressing changes due to chronic conditions,
- Teaching of signs and symptoms of disease process, diet and medications of any new or exacerbated disease process,
- Specialized aide procedures such as:
  - Rehabilitation of the patient (exercise or performance of simple procedures as an extension of physical therapy services)
  - Measuring/recording patient vital signs (temperature, pulse, respiration and/or blood pressure, etc.), or intake/output of fluids
  - Specimen collection
  - Special procedures such as non-sterile dressings, special skin care (non-medicated), decubitus ulcers, cast care, assisting with ostomy care, assisting with catheter care, testing urine for sugar and acetone, breathing exercises, weight measurement, enemas
- Home IV therapy,
- Custodial care or provision of only instrumental activities of daily living tasks or provision of only one activity of daily living task,
- Occupational therapy,
- Speech pathology services,
- Audiology services,
- Respiratory therapy,
- Personal comfort items,
- Durable medical equipment,
- Oxygen,

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• Orthotic appliances or prosthetic devices,

- Drugs provided through the Louisiana Medicaid pharmacy program,
- Laboratory services, and
- Social work visits,

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