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EPSDT – PCS RECORD KEEPING

Providers must maintain case records for all EPSDT – PCS beneficiaries and personnel records on all supervisory and direct care staff. Records must be complete, accurately documented, readily accessible, and organized. All records must be retained for a period of five years. Billing records must be maintained for a period of five years from the date of payment.

Any error made in a beneficiary's or employee's record must be corrected using the legal method which is to draw a line through the incorrect information, write "error" by it and initial the correction. Correction fluid must never be used in a beneficiary's or employee's record.

There shall be a clear audit trail between:

- The prescribing practitioner;
- The personal care services provider agency;
- The person providing the personal care services to the beneficiary; and
- The services provided and reimbursed by Medicaid.

Beneficiary Records

Providers must provide reasonable protection for beneficiary records against loss, damage, destruction, and unauthorized use. A provider must have a separate written record for each beneficiary that includes:

- Copies of all Plans of Care, Social Assessments, EPSDT PCS Form 90, EPSDT – PCS Daily Schedule Forms, and Practitioner's Order/Prescription for EPSDT Personal Care Services;

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- Dates and results of all evaluation/diagnosis provided in the interest of establishing or modifying the Plan of Care including the tests performed and results, copies of evaluation and diagnostic assessment reports signed by the individual performing the test and/or interpreting the results;
- Documentation of approval of services by BHSF or its designee; and
- Documentation of the provision of services by the Personal Care Services worker including signed daily notes by the worker, and supervisor if appropriate, that include:
 - Date of service;
 - Services provided (checklist is adequate);
 - Total number of hours worked;
 - Time period worked;
 - Condition of beneficiary;
 - Service provision difficulties;
 - Justification for not providing scheduled services; and
 - Any other pertinent information.

Availability of Records

Providers must make beneficiary and personnel records available to LDH, its designee and/or other state and federal agencies upon request. The provider shall be responsible for incurring the cost of copying records for LDH or its designee.