
CHAPTER 30: PERSONAL CARE SERVICES

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PROVIDER REQUIREMENTS**Standards of Participation**

In order to participate as a personal care services provider in the Medicaid Program, a provider must:

- Comply with:
 - State licensing regulations;
 - Medicaid provider enrollment requirements;
 - The standards of care set forth by the Louisiana Board of Nursing; and
 - Any federal or state laws, rules, regulations, policies and procedures contained in this provider manual or other document issued by the Louisiana Department of Health (LDH); and
- Possess a current, valid home and community-based services license to provide personal care attendant services that has been issued by the LDH Health Standards Section.

A Medicaid enrolled provider must:

- Maintain adequate documentation as specified by the Office of Aging and Adult Services (OAAS), or its designee, to support service delivery and compliance with the approved plan of care and provide said documentation at the request of LDH, or its designee; and
- Assure that all agency staff is employed in accordance with Internal Revenue Service and Department of Labor regulations.

Providers are not to employ individuals who have been convicted of child or client abuse, neglect or mistreatment, or who have a felony involving physical harm to an individual. Providers must document that criminal record history checks have been obtained on all employees and employees of subcontractors, and that all reasonable steps were made to determine whether applicants for employment have histories indicating involvement in child or client abuse, neglect or mistreatment, or have a criminal record involving physical harm to an individual. Failure to comply with these regulations may result in any or all of the following:

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- Recoupment;
- Sanctions;
- Loss of enrollment; or
- Loss of licensure.

Providers shall not refuse to serve any recipient who chooses their agency, unless there is documentation to support an inability to meet the recipient's needs, or all previous efforts to provide service and supports have failed and there is no option but to refuse services. OAAS, or its designee, must be notified immediately of the circumstances surrounding the refusal. The refusal request must be made in writing by the provider to OAAS, or its designee, and to the recipient detailing why the provider is unable to serve the recipient. This requirement can only be waived by OAAS or its designee.

Involuntary transfer or discharge of a recipient must be made in accordance with licensing standards.

Providers shall not interfere with the eligibility, assessment, care plan development or care plan monitoring processes. This includes, but is not limited to, coercing, harassing, intimidating or threatening the recipient or members of the recipient's informal network, OAAS' designated contractor staff or employees of LDH.

OAAS, or its designee, is charged with the responsibility of setting the standards, monitoring the outcomes and applying administrative sanctions for failures by service providers to meet the minimum standards for participation. Failure to meet the minimum standards shall result in a range of required corrective actions including, but not limited to, the following:

- Removal from the Freedom of Choice listing;
- A citation of deficient practice;
- A request for corrective action plan; and/or
- Administrative sanctions.

Continued failure to meet the minimum standards shall result in the loss of referral of new Long-Term Personal Care Services (LT-PCS) recipients and/or continued enrollment as an LT-PCS provider.

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Worker Qualifications

All staff providing direct care to the recipient must meet the qualifications for furnishing personal care services per the licensing regulations. The LT-PCS worker should demonstrate the following:

- Empathy toward the elderly and persons with disabilities;
- An ability to provide personal care services to the recipient as outlined in Sections 30.2 and 30.14 of this manual chapter; and
- The maturity and ability to deal effectively with the demands of the job.

The following individuals are **prohibited from being reimbursed** through the Medicaid LT-PCS Program for providing services to a recipient:

- The recipient's spouse;
- The recipient's curator;
- The recipient's tutor;
- The recipient's legal guardian;
- The recipient's designated responsible representative; or
- The person to whom the recipient has given representative and mandate authority (also known as "power of attorney").

Family members who provide LT-PCS must meet the same standards for employment as caregivers who are unrelated to the recipient. (Refer to the link in Appendix D for further clarification.)