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**CHAPTER 30: PERSONAL CARE SERVICES**

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**SECTION 30.6: LT-PCS - PROVIDER REQUIREMENTS****PAGE(S) 3**

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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 Department of Health and Hospitals (DHH), and
- Possess a current, valid home and community-based services license to provide personal care attendant services that has been issued by the DHH, 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 DHH or its designee, and
- Assure that all agency staff is employed in accordance with Internal Revenue Service and Department of Labor regulations.

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 the 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.

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**CHAPTER 30: PERSONAL CARE SERVICES**

---

**SECTION 30.6: LT-PCS - PROVIDER REQUIREMENTS****PAGE(S) 3**

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

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 LT-PCS recipients and/or continued enrollment as an LT-PCS provider.

**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 empathy toward the elderly and persons with disabilities, an ability to provide care to the recipient, 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

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**CHAPTER 30: PERSONAL CARE SERVICES**

---

**SECTION 30.6: LT-PCS - PROVIDER REQUIREMENTS** **PAGE(S) 3**

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- 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.