

STATE OF LOUISIANA

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS OF THE AMOUNT, DURATION, AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL
AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS:

Emergency and nonemergency medical transportation are separate covered Medicaid services; however, providers may choose to furnish transportation for recipientsbeneficiaries during the course of providing personal care services. (Please see personal assistance services worker qualifications.)

Personal care services for eligible children are described in Attachment 3.1-A, Item 4.b. EPSDT Services.

Service Delivery

Personal care services shall be provided in the recipient'sbeneficiary's home or in another location outside of the recipientbeneficiary's home if the provision of these services allows the recipientbeneficiary to participate in normal life activities pertaining to the IADLs cited in the plan of care. Place(s) of service must be documented in the plan of care and the service logs.

The recipientbeneficiary's home is defined as the recipientbeneficiary's place of residence including his/her own home or apartment, a boarding house, or the house or apartment of a family member or unpaid primary caregiver. A hospital, an institution for mental disease, a nursing facility or an intermediate care facility for persons with intellectual disabilities are not considered to be the recipientbeneficiary's home.

The provision of services outside of the recipientbeneficiary's home does not include trips outside of the borders of the state without approval of the Department's Office of Aging and Adult Services (OAAS) or its designee.

RecipientsBeneficiaries are not permitted to live in a home or property owned, operated, or controlled by an owner, operator, agent, or employee of a licensed provider of long-term care services, and providers are prohibited from providing and billing for services under these circumstances. RecipientsBeneficiaries may not live in the home of a-their direct support worker unless the direct support worker is related by blood or marriage to the recipientbeneficiary and it is the choice of the recipientbeneficiaryparticipant.

Service Limitations

Effective September 5, 2010, personal care services shall be limited to 32 hours per week. Authorization of service hours shall be considered on a case by case basis as substantiated by the recipientbeneficiary's plan and supporting documentation.

IADLs cannot be performed in the recipientbeneficiary's home when he/she is absent from the home unless it is approved by OAAS or its designee on a case-by-case basis.

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There shall be no duplication of services.

Persons designated as the personal representative of an individual receiving services under Long Term-Personal Care Services (LT-PCS) may not be the paid direct service worker of the individual they are representing.

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STATE OF LOUISIANA

PAYMENT OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE OR SERVICE LISTED IN SECTION 1905(A) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

~~Effective for dates of service on or after July 1, 2012, the reimbursement rate for long-term personal care services furnished to one participant shall be reduced by 1.5 percent of the rate on file as of June 30, 2012.~~

~~Effective April 20, 2016, the minimum hourly rate paid to personal care workers shall be at least the current federal minimum hourly rate. Should a change in the federal minimum hourly rate result in a rate that is above the minimum hourly rate paid to personal care workers, the minimum hourly rate paid to personal care workers will adjust to the federal minimum hourly rate the date that federal rate becomes effective.~~

The minimum hourly rate paid to personal care workers shall be at least the current federal or state minimum hourly rate.

The State has the authority to set and change LT-PCS rates and/or provide lump sum payments to LT-PCS providers based upon funds allocated by the legislature.

Standards for Payment

Providers shall comply with standards for participation established by the Bureau of Health Services Financing (BHSF).

NOTE: Prior authorization is required for personal care services.