STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
Attachment 3.1-A  
Item 26, Page 1

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:

Medical and Remedial Care and Services
42 CFR 440.167

Personal Care Services

Definition
Personal care services are defined as services furnished to an individual who is not an
inpatient, or resident of a hospital, nursing facility, intermediate care facility for persons with
intellectual disabilities, or an institution for mental disease that are authorized for the
individual by a physician in accordance with a plan of treatment or otherwise authorized for
the individual in accordance with a service plan approved by the State; provided by an
individual who is qualified to provide such services and who is not a member of the
individual’s family; and furnished in a home, and at the state’s option, in another location.

Personal care services enable an individual whose needs would otherwise require placement
in an acute or long term care facility to remain safely in that individual’s home. Services
must be provided in accordance with an approved plan of care and supporting
documentation. These services must be coordinated with other Medicaid services being
provided to the recipient and will be considered in conjunction with those other services.

Personal Care Services Worker Qualifications:
1. The worker must be at least 18 years of age at the time the offer of employment is made.
2. The worker must meet one of the following minimum education and experience
   qualifications:
   a. a high school diploma or general equivalency diploma (GED); or
   b. a trade school diploma in the area of human services; or
   c. documented, verifiable experience providing direct care services to the elderly
      and/or persons with disabilities.
3. The worker must have the ability to read and write in English as well as to carry out
directions promptly and accurately.
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The following persons are prohibited from serving as the direct service worker for the
recipient: the recipient’s spouse, curator, tutor, legal guardian, recipient’s responsible
representative, or person to whom the recipient has given Representative and Mandate
authority (Power of Attorney). The Bureau has in place mechanisms to monitor the quality of
the services provided. These include, but are not limited to, review of critical incident
reports and quarterly meetings to review and address any quality assurance issues that have
been identified.

Assessment
An initial assessment shall be performed for each recipient requesting personal care services.
The assessment shall be utilized to identify the recipient’s long term care needs, preferences,
the availability of family and community supports and to develop the plan of care. Each
recipient shall be re-assessed at least once every 18 months.

Prior Authorization
Personal care services must be prior authorized. Requests for prior authorization must be
submitted to the Bureau of Health Services Financing (BHSF) or its designee and include a
copy of the assessment form and the plan of care.

Covered Services
Personal care services are defined as those services that provide assistance with the distinct
tasks associated with the performance of the activities of daily living (ADLs) and the
instrumental activities of daily living (IADLs). Assistance may be either the actual
performance of the personal care task for the individual or prompting and reminding so the
individual performs the task by him/herself.

ADLs are those personal, functional activities required by the recipient. ADLs include tasks
such as: eating, bathing, dressing, grooming, transferring (the manner in which an individual
moves from one surface to another - excludes getting on and off the toilet and getting in and
out of the tub/shower), reminding the recipient to take medication, ambulation, toileting and
bed mobility.

IADLs are those activities that are considered essential for sustaining the individual’s health
and safety, but may not require performance on a daily basis. IADLs include tasks such as:
light housekeeping, food preparation and storage, grocery shopping, laundry, assisting with
scheduling medical appointments when necessary, accompanying recipient to medical
appointments when necessary due to recipient’s frail condition and assisting the recipient to
access transportation.

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Emergency and nonemergency medical transportation are separate covered Medicaid services; however, providers may choose to furnish transportation for recipients 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’s home or in another location outside of the recipient’s home if the provision of these services allows the recipient 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 recipient’s home is defined as the recipient’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 recipient’s home.

The provision of services outside of the recipient’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.

Recipients 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. Recipients may not live in the home of a direct support worker unless the direct support worker is related by blood or marriage to the recipient.
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 recipient’s plan and supporting documentation.

IADLs cannot be performed in the recipient’s home when he/she is absent from the home.

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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