



PEDIATRIC PERSONAL CARE SERVICES

Brief Coverage Statement

Personal Care (PC) services are a benefit for Colorado Medicaid clients aged 0 to 20 years.

PC services are unskilled but medically necessary services to assist the client with personal care tasks in order to meet the client's physical, maintenance and supportive needs.

This benefit coverage standard only applies to the State Plan Pediatric Personal Care benefit and does not address services available through other State Plan benefits or services available through Home and Community Based Services (HCBS) waiver programs.

Services Addressed in Other Benefit Coverage Standards

- Home Health
- Private Duty Nursing

Eligible Providers

Prescribing Provider

- Physician
- Advanced Practice Nurse

Rendering and Billing Provider

- Qualified staff of the Class A or Class B Home Care Agency (HCA).
 - Must not be excluded from participation in federally funded health care programs by the US Department of Health and Human Services (HHS)/Office of Inspector General (OIG).
 - May be employed by or under contract to the HCA, through which the HCA may bill for his/her services.

Agency Requirements

Home Care Agencies that provide PC services must follow all applicable Colorado Department of Public Health and Environment Home Care Regulations (also known as Chapter 26), and must meet the following criteria:

- Enrolled as a Medicaid Provider to provide PC services;



- Licensed by the State of Colorado as a Class A or Class B Home Care Agency in good standing and meet all certification and licensure requirements outline by Colorado Department of Public Health and Environment;
- Under the Centers for Medicare and Medicaid Services (CMS) Conditions of Participation, all Home Health orders and plans of care must be signed by an MD, advanced practice nurse, or DO.

Home Care Agencies may decline to perform a specific task or service if the supervisor or the PC staff document concerns regarding the safety of the client or the PC staff, regardless of whether the task is covered as a PC service.

Eligible Places of Service

PC services are provided in a client's place of residence or outside client's place of residence. Personal Care Tasks take place outside of the client's residence. Residence may be the client's own house, an apartment, a relative's home, or other temporary accommodation where the client resides. A Residence does not include nursing facilities or other institutions as defined by CMS and the State of Colorado.

Eligible Clients

Colorado Medicaid Enrolled clients qualify for PC services when they meet the following requirements:

- 20 years of age and younger.
- Meet the criteria for EPSDT, at C.C.R. 2505-10, § 8.280.2.
- The client requires moderate to total assistance with at least three Personal Care Tasks as defined in this Benefit Coverage Standard, and in rule at *10 C.C.R. 2505-10 § 8.535.4.B*.
- Meet the requirements in the Department defined assessment tool.

Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) is a federal Medicaid regulation that requires the state Medicaid agency to cover services, products, or procedures for Medicaid clients ages 20 and younger if the service is medically necessary to correct or ameliorate the physical, mental, cognitive, or developmental effects of an illness, injury, or disability.

Services must be deemed medically necessary, as defined in the EPSDT rule at *10 C.C.R. 2505-10, § 8.280*, and must be appropriate to the needs of the client.

General Requirements

PC services are covered when the services are:

- Unskilled but medically necessary services to assist the client with personal care tasks in order to meet the client's physical, maintenance and supportive needs. The client must require assistance with at least three Personal Care Tasks.

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- Prior Authorized and delivered in a manner consistent with professional standards, Colorado licensure standards, and/or other pertinent regulations.
- Ordered and provided under a current written client Care Plan.
- Provided on an Intermittent Basis.
- Provided for the sole benefit of the pediatric Medicaid client.

The Home Care Agency shall maintain records on each client. The specific record for each client shall include at least the following information:

- PC service(s) shall be ordered in writing by the client's prescribing provider as part of a written Care Plan.
- The written Care Plan shall be updated at least annually or as required by the client's needs and/or condition
- Name, address, phone number and other identifying information about the client;
- Name, address and phone number of the client's parent, guardian or other legally responsible adult;
- Name, address and phone number of the case manager and case management agency (when applicable);
- Name, address and phone number of the client's physician;
- Special health needs or conditions of the client;
- A list or description of the Personal Care services that will be performed for the client;
- Documentation of each billed visit, which shall include the location where services were provided, the exact month, day, year and time of the visit (beginning and end), to whom and by whom the service was provided, and the exact nature and extent of the specific tasks performed;
- Documentation of any changes in the client's condition or needs, as well as documentation of appropriate reporting and action taken as a result;
- Documentation concerning advance directives;
- Documentation of supervision of care;
- Documentation of review of other services and supports for duplication or overlap. Other services may include but are not limited to:
 - HCBS waiver services
 - Unpaid Family Caregiver services
 - Long Term Home Health services
 - Services provided through the school district, or School Health Services Program.
- Documented evidence of Care Coordination with the client's other providers, including but not limited to:
 - Specialty providers
 - Wound care clinics
 - Other skilled agencies



- Other Home Health Agencies or assisted living facilities and,
- Where applicable, the Regional Care Collaborative Organization, Case Management Agency or other Department designated entity.

Covered Services and Limitations

PC services provide pediatric clients assistance with Personal Care Tasks in order to meet the client's physical, maintenance and supportive needs. This assistance may take the form of hands-on assistance (actually performing a task for the person), or prompting or cuing the client to complete the task.

If the client’s situation meets any of the criteria that make a task Skilled Care, the client must receive all services related to that task through the Home Health Services benefit, at *10 CCR 2505-10 § 8.520*. The Pediatric Personal Care benefit does not cover Skilled Care Services. This includes any Personal Care task which is directly related to the Skilled Care Service.

If a client requires a skilled transfer to complete a task, such as bathing or hygiene, the associated task shall be considered skilled in nature. A Personal Care Worker (PCW) may provide transfer services when the skilled caregiver or Unpaid Family Caregiver directs and/or assists with the skilled transfer, and only if the client is able to assist with the transfer.

When skilled tasks require a Personal Care component, the existing rate for skilled services already includes time spent performing Personal Care Tasks that are linked for the completion of a skilled task.

Services are ordered and provided under a current Care Plan.

Personal Care Tasks

* Usual frequency of task defines the number of times a typical person is likely to complete the task. Some clients will need these tasks performed more or less frequently than is defined in the task. When not noted, usual frequency is as ordered on the Care Plan or 485. Agencies must be prepared to provide additional documentation when clients require a task to be completed more frequently than is typical.

Bathing/Showering	
Included in Task	Bathing includes preparing bathing supplies and equipment, assessing the water temperature, applying soap (which may include shampoo), rinsing off and drying the client. The task also includes cleaning up after the bath/shower by rinsing the tub, wiping spills, etc. as needed. Bathing includes all transfers and ambulation related to the bathing task, and all hair care, pericare and skin care provided in conjunction with the bathing. It may also include performing a bed bath or sponge bath.
Usual Frequency of Task *	Up to one time a day; as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.



Factors that Make Task Skilled	The presence of open wound(s), stoma(s), broken skin and/or active chronic skin disorder(s); client is unable to maintain balance or to bear weight reliably due illness, injury or disability, history of falls, temporary lack of mobility due to surgery or other exacerbation of illness, injury or disability. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	Bathing is considered Personal Care when a client needs assistance with bathing, is able to maintain balance, to bear weight reliably or able to use safety equipment (such as a shower bench) to safely complete the bathing, and when the skin is unbroken and/or the client is independent with assistive devices. A PCW may assist another care provider, caregiver or Unpaid Family Caregiver who is competent in providing this aspect of care. All transfers and ambulation related to the bathing task, and all hair care, pericare and skin care provided in conjunction with bathing are included in this task.
Special Considerations	Additional baths may be warranted for the care of the client and must be documented by a physician's orders on the 485 Plan of Care or providers orders on the Care Plan. A second person may be staffed when required to safely bathe the client. Documentation shall illustrate that the client requires moderate to total assistance to safely complete this task.

Dressing	
Included in Task	Dressing includes dressing, and undressing with ordinary clothing, including pantyhose or socks and shoes. Dressing includes getting clothing out, putting it on or off, and may include braces and splints if purchased over the counter or they have not been ordered by a qualified physician. This task also includes all transfers and positioning related to dressing and undressing. May include cleaning and maintenance of braces, prosthesis or other DME.
Usual Frequency of Task *	Up to 2 times daily as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Dressing is considered a skilled task when the CNA must assist with the application of anti-embolic or pressure stockings, placement of braces or splints that can be obtained only with a prescription of a



	qualified physician, or when the client is unable to assist or direct care. Services may also be skilled when the client experiences a temporary lack of mobility due to surgery or other exacerbation of illness, injury or disability. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	Dressing is considered personal care when the client only needs assistance with ordinary clothing and application of support stockings of the type that can be purchased without a physician's prescription. A PCW shall not assist with application of an ace bandage and anti-embolic or pressure stockings that can that can be obtained only with a prescription of a prescribing physician. A PCW may assist another care provider, caregiver or family member who is competent in providing this aspect of care.
Special Considerations	A second person may be staffed when required to safely dress the client. Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Feeding	
Included in Task	Ensuring the food is the proper temperature, cutting food into bite-size pieces or ensuring the food is at the proper consistency for the client; may include placing food in client's mouth.
Usual Frequency of Task *	Up to 3 times daily (snacks are not included) as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Syringe feeding and tube feeding may be delegated to a CNA who has been deemed competent to administer feedings via tube or syringe. Oral feeding is skilled only when the client is unable to communicate verbally, non-verbally or through other means; the client is unable to be positioned upright; the client is on a modified texture diet or when the client has a physiological or neurogenic chewing and/or swallowing problem: or when a structural issue (such as cleft palate) or other documented swallowing issue exists. A client with a history of aspirating food or on mechanical ventilations may create a skilled need for feeding assistance. There must be a documented decline in condition and/or ongoing need documented in the client's record.



	CNA may provide oral suctioning.
Factors that Make Task Personal Care	PCWs may assist clients with feeding when the client can independently chew and swallow without difficulty and be positioned upright. Client is able to eat or be fed with adaptive utensils.
Special Considerations	Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Meal Preparation	
Included in Task	Preparing, cooking, and serving food to client. Includes ensuring food is a proper consistency based on client's ability to swallow safely and formula preparation.
Usual Frequency of Task *	Up to 3 times daily as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Diet requires nurse oversight to administer correctly. Meals must have a modified consistency. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	All meal preparation is an unskilled task, except as defined in the Factors that Make Task Skilled portion of this section.
Special Considerations	Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Medication Reminders	
Included in Task	Verbally communicating to a client that it is time to take medication, opening and handing pre-filled medication reminder container to a client.
Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Medication reminders are Personal Care Worker tasks unless the client requires services within the scope of a CNA-MED certified CNA.
Factors that Make Task Personal Care	Inquiring whether medications were taken. Verbally prompting the client to take medications. Opening and handing the appropriately marked medication reminder container for the client, if the client is physically unable to open the container. Medications must be pre-selected by the client, the client's Unpaid Family Caregiver, a nurse, or a pharmacist and stored in pre-filled medication reminder boxes which are



	marked as to day and time of dosage. These limitations apply to all prescription medications and all over-the-counter medications.
Special Considerations	CNAs may not administer medications without obtaining the CNA-MED certification from the DORA approved course. Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Ambulation/Locomotion	
Included in Task	Walking/moving from place to place with or without assistive device (including wheelchair).
Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	When the client is unable to assist in the task, direct performance of services, or when hands on assistance is required for safe ambulation. The task is also considered skilled when a client is unable to maintain balance, is unable to bear weight reliably or has not been deemed independent with assistive devices ordered by a qualified physician. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may assist clients with ambulation only if the client has the ability to balance and bear weight reliably, when the client is independent with an assistive device, or when the PCW is assisting another care provider, caregiver or Unpaid Family Caregiver who is competent in providing skilled aspect of care.
Special Considerations	Ambulation shall not be the standalone reason for a visit. Transferring and positioning into and out of assistive devices is not ambulation, and should be addressed in the transferring and positioning section of this standard. Documentation shall illustrate the need for moderate to total assistance to safely complete this task.

Hygiene – Hair Care/Grooming	
Included in Task	Hair care includes shampooing, conditioning, drying, styling and combing. Does not include perming, hair coloring, or other or extensive styling such as, but not limited to, updos, placement of box braids or other elaborate braiding or placing hair extensions.



Usual Frequency of Task *	Up to twice daily as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Client is unable to complete task independently. The client requires shampoo/conditioner that is prescribed by a qualified physician and dispensed by a pharmacy and/or when the client has open Wound(s) or stoma(s) on the head. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	PCWs may assist clients with the maintenance and appearance of his/her hair. Hair care within these limitations may include shampooing with non-medicated shampoo or medicated shampoo that does not require a physician's prescription, drying, combing and styling of hair. Active and chronic skin issues such as dandruff and cradle cap do not make this task skilled.
Special Considerations	Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Hygiene – Mouth Care	
Included in Task	Mouth care includes brushing teeth, flossing, use of mouthwash, denture care or swabbing (toothette). This task may include oral suctioning.
Usual Frequency of Task *	Up to three times daily as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Mouth care for clients who are unconscious, have difficulty swallowing or are at risk for choking and aspiration is considered skilled care. Mouth care is also skilled when a client has decreased oral sensitivity or hypersensitivity or when the client is on medications that increase the risk of dental problems or bleeding, injury or medical disease of the mouth. There must be a documented decline in condition and/or ongoing need documented in the client's record. CNA may provide oral suctioning.
Factors that Make Task Personal Care	A PCW may assist and perform mouth care. This may include denture care and basic oral hygiene. The presence of gingivitis, receding gums, cavities and other general dental problems do not make mouth care skilled.



Special Considerations	Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.
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Hygiene - Nail Care	
Included in Task	Nail care includes soaking, filing and cuticle care.
Usual Frequency of Task *	Up to 1 time weekly as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Nail care for clients with a medical condition that involves peripheral circulatory problems or loss of sensation, at risk for bleeding and/or are at a high risk for injury secondary to the nail care may only be completed by a CNA who has been deemed competent in nail care for this population. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may assist with nail care, which may include soaking of nails, pushing back cuticles without utensils, and filing of nails. Assistance by a PCW shall not include nail trimming.
Special Considerations	Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Hygiene – Shaving	
Included in Task	Assistance with shaving of face, legs and underarms with a safety or electric razor.
Usual Frequency of Task *	Up to 1 time daily as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan; task may be completed with bathing/showering.
Factors that Make Task Skilled	The client has a medical condition that may involve peripheral circulatory problems or loss of sensation. The client has an illness or takes medications that are associated with a high risk for bleeding. This task is also considered skilled when the client has broken skin (at/near shaving site) or when he or she has a chronic active skin condition. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may assist a client with shaving only with an electric or a safety razor.



Special Considerations	Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.
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Hygiene – Skin Care	
Included in Task	Applying lotion or other skin care product, and only when it is not completed in conjunction with bathing or toileting (bladder and bowel). May be included with positioning.
Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	The client requires additional skin care that is prescribed by a qualified physician and is available over-the-counter, even when the client has broken skin, wound(s) or an active skin disorder and client is unable to apply product independently due to illness, injury or disability. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may provide general skin care assistance. Skin care is Personal Care only when a client's skin is unbroken, and when any chronic skin problems are not active. The skin care provided by a PCW shall be preventative rather than therapeutic in nature and may include the application of non-medicated lotions and solutions, or of lotions and solutions not requiring a physician's prescription.
Special Considerations	Skin care completed in conjunction with bathing and toileting as ordered on the Plan of Care is not included in this task. Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Toileting – Bowel Care	
Included in Task	Changing and cleaning incontinent client or hands-on assistance with toileting. This includes returning the client to pre-bowel movement status, transfers, skin care, ambulation and positioning related to the bowel program.
Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Client is unable to assist or direct care, has broken skin or recently healed skin breakdown (less than 60 days). Client requires skilled skin care associated with bowel care or has been assessed as having a high



	and ongoing risk for skin breakdown. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may assist a client to and from the bathroom, provide assistance with bedpans and commodes; pericare, or changing of clothing and pads of any kind used for the care of incontinence. A PCW may assist another care provider, caregiver or family member who is competent in providing this aspect of care.
Special Considerations	A second person may be staffed when required to safely complete bladder care with the client. Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Toileting – Bowel Program	
Included in Task	Emptying and changing the ostomy bag as ordered by the client's qualified physician. This includes skin care at the site of the ostomy and returning the client to pre-bowel program status.
Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	The client requires the use of digital stimulation, suppositories, or enemas. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may empty ostomy bags and provide client directed assistance with other ostomy care only when there is no need for skilled skin care or for observation or reporting to a nurse. A PCW shall not perform digital stimulation, insert suppositories or give an enema.
Special Considerations	Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Toileting – Bladder Care	
Included in Task	Bladder care includes assistance with toilet, commode, bedpan, urinal, or diaper use, as well as emptying and rinsing commode or bedpan after each use. This task includes transfers, skin care, ambulation, and positioning related to bladder care. This task concludes when the client is returned to his/her pre-urination state.



Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	The client is unable to assist or direct care, has broken skin or recently healed skin breakdown (less than 60 days). Client requires skilled skin care associated with bladder care or client has been assessed as having a high and ongoing risk for skin breakdown. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may assist a client to and from the bathroom, provide assistance with bedpans, urinals and commodes; pericare, and/or changing of clothing and pads of any kind used for the care of incontinence. A PCW may assist another care provider or Unpaid Family Caregiver who is competent in providing this aspect of care.
Special Considerations	A second person may be staffed when required to safely complete bladder care with the client. Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Toileting – Catheter Care	
Included in Task	Perineal care and emptying catheter bag. This includes transfers, skin care, ambulation and positioning related to catheter care.
Usual Frequency of Task *	Up to two times a day as ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Emptying catheter collection bags (indwelling or external) is considered skilled care only when there is a need to record and report the client's urinary output to the client's nurse; or, if the indwelling catheter tubing needs to be opened for any reason and the client is unable to do so independently. There must be a documented decline in condition and/or ongoing need documented in the client's record.
Factors that Make Task Personal Care	A PCW may empty urinary collection devices such as catheter bags when there is no need for observation or reporting to a nurse, as well as provide pericare for client with indwelling catheters.
Special Considerations	Catheter care shall not be the sole purpose of the visit. Documentation shall illustrate that the client



	needs moderate to total assistance to safely complete this task.
Mobility - Transfer	
Included in Task	Transfers may be completed with or without mechanical assistance (such as a Hoyer lift). This task includes moving the client from a starting location to a different location in a safe manner. It is not considered a separate task when a transfer is performed in conjunction with bathing, bladder care, bowel care or other Personal Care Task.
Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	Transfers are considered skilled when a client is unable to communicate verbally, non-verbally or through other means. The client is not able to perform this task independently due to illness, injury or disability, temporary lack of mobility due to surgery and/or other exacerbation of illness, injury or disability. It is also considered a skilled task when the client lacks the strength and stability to stand and/or bear weight reliably, is not deemed independent in the use of assistive devices and/or Durable Medical Equipment that has been ordered by a qualified physician; or, when the client requires a mechanical lift for safe transfer. There must be a documented decline in condition and/or ongoing need documented in the client's record. In order to transfer clients via a mechanical lift, the CNA must be deemed competent in the particular mechanical lift used by the client.
Factors that Make Task Personal Care	A PCW may assist with transfers only when the client has sufficient balance and strength to reliably stand, pivot and assist with the transfer to some extent. Adaptive and safety equipment (including lifts) may be used in transfers if the client and PCW are fully trained in the use of the equipment and the client, and/or client's Unpaid Family Caregiver can direct the transfer step-by-step or when the PCW is deemed competent in the specific transfer technique for the client. Adaptive equipment may include, but is not limited to wheelchairs, tub seats and grab bars. Gait belts may be used in a transfer as a safety device if the PCW has been properly trained in its use.



Special Considerations	<p>Transferring shall not be the sole purpose for the visit. It is not considered a separate task when a transfer is performed in conjunction with bathing, bladder care, bowel care, or other Personal Care Task. A second person may assist when required to safely transfer the client. A PCW may never assist with a transfer if the client is unable to assist with the transfer. A PCW may assist the informal caregiver with transferring the Client provided the consumer is able to direct and assist with the transfer. Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.</p>
Mobility – Positioning	
Included in Task	<p>The task includes moving the client from his/her starting position to a new position while maintaining proper body alignment and support to a client’s extremities and avoiding skin breakdown. This also includes placing any padding required to maintain proper alignment. It is not considered a separate task when a transfer is performed in conjunction with bathing, bladder care, bowel care or other Personal Care Task that requires positioning the client.</p>
Usual Frequency of Task *	<p>As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.</p>
Factors that Make Task Skilled	<p>The client is unable to communicate verbally, non-verbally or through other means. The client is not able to perform this task independently due to fragility of illness, injury or disability, or temporary lack of mobility due to surgery or other exacerbation of illness, injury or disability. Positioning may include adjusting the client’s alignment or posture in a bed, wheelchair, other furniture, assistive devices, or Durable Medical Equipment that has been ordered by a qualified physician. There must be a documented decline in condition and/or ongoing need documented in the client’s record.</p>
Factors that Make Task Personal Care	<p>A PCW may assist a client with positioning when the client is able to identify to the provider, verbally, non-verbally or through other means, when their position needs to be changed and only when skilled skin care is not required in conjunction with positioning. Positioning may include alignment in a bed, wheelchair, or other furniture and placing</p>



	padding required to maintain proper alignment. The PCW may receive direction from or assist another care provider, caregiver or Unpaid Family Caregiver who is competent in providing this aspect of care.
Special Considerations	Positioning and padding shall not be the sole purpose for the personal care visit. Visits must be coordinated to ensure that effective scheduling is utilized for skilled intermittent visits and positioning shall be done in conjunction with other skilled tasks. A second person may be staffed when required to safely position the client. Documentation shall illustrate that the client needs moderate to total assistance to safely complete this task.

Protective Oversight	
Included in Task	Monitoring a client to reduce or minimize the likelihood of injury or harm due to the nature of the client's injury, illness or disability.
Usual Frequency of Task *	As ordered by the qualified physician on the plan of care or the ordering provider on the PC Care Plan.
Factors that Make Task Skilled	N/A
Factors that Make Task Unskilled	The PCW may provide protective oversight including stand-by assistance only when directly related to the completion of a Personal Care Task. When the client requires protective oversight to prevent wandering or dangerous/destructive behaviors, the PCW must be trained in appropriate intervention and redirection techniques.
Special Considerations	Protective Oversight may only be provided during the completion of other Personal Care Tasks listed in this benefit coverage standard. The need for Protective Oversight is indicated by significant impairment in behavior, memory, or cognition. Documentation shall specify the level of impairment and demonstrate the need for protective oversight.

Limitations

1. In accordance with Section 1905 (a) of the Social Security Act, Personal Care Services provided by the client's parent, spouse other legally responsible adult cannot be reimbursed by Medicaid EPSDT.
2. Clients ages 21 and older are not eligible for Pediatric PC services.
3. Physical behavioral interventions such as restraints shall not be used.
4. PC needs that are the contracted responsibility of a GRSS, IRSS or other reimbursed entity are not reimbursable as Medicaid Pediatric PC services.

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5. All Personal Care Workers and their agencies shall be subject to all of the requirements, rules and regulations put forth by the Colorado Department of Public Health and Environment, the Colorado Department of Health Care Policy and Financing, the Colorado Department of Regulatory Agencies, the Centers for Medicare and Medicaid Services, the Colorado Department of Labor and Employment and the applicable federal agencies.
6. All Pediatric PC services will be reimbursed at the Medicaid personal care rate even if the person providing personal care holds credentials for CNA, RN or other skilled profession.
7. CNA visits shall not be approved for nor shall extended units be billed for the sole purpose of completing Personal Care services that are billable under this benefit.
8. Clients eligible for both Colorado Medicaid and the Colorado Department of Human Services Home Care Allowance program, at 9 C.C.R. 2503-5 Section 3.570, may choose to have their personal care needs met either through the State Plan Medicaid Personal Care benefit or receive assistance through the Home Care Allowance program, but cannot receive both.

Personal Care Worker Supervision

PC Services must periodically receive onsite supervision by a Registered Nurse, the clinical director, home care manager or other home care employee who is in a designated supervisory capacity and is available to the PCW at all times. This supervisory visit must occur at least every 90 days or more often as necessary for problem resolution, skills validation of the PCW, client-specific or procedure-specific training of the PCW, observation of client's condition and care, and assessment of client's satisfaction with services. At least one of the assigned personal care staff must be present at the supervisory visit.

All personal care staff shall have a completed and up to date personnel file that demonstrates that the PCW has:

- Signed and dated evidence that he/she has received training and orientation on the home care agency's written policies and procedures;
- Signed and dated evidence that he/she has received training and is competent to provide the client's specific Personal Care Tasks;
- A signed and dated job description that clearly delineates his/her responsibilities and job duties;
- Proof that he/she is current and up to date on all training and education required by the Colorado Department of Public Health and Environment, at 6 C.C.R. 1011-1§ 8.6;
- Signed and dated competency information regarding training and skills validation, for client specific personal care and homemaking tasks;
- Signed and dated evidence that he/she has been instructed in basic first aid, and training in infection control techniques, including universal precautions; and
Documentation of consultations with relevant medical staff when clients have complex needs or when there are potentially dangerous situations identified; and

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- Information on any complaints received regarding the Personal Care Worker along with documentation on the outcome and follow-up of the complaint investigation.

Prior Authorization Requirements (PARs)

Approval of the PAR does not guarantee payment by Medicaid. The client and the PCW shall meet all applicable eligibility requirements at the time services are rendered and services shall be delivered in accordance with all applicable service limitations. Medicaid is always the payer of last resort and the presence of an approved or partially approved PAR does not release the agency from the requirement to bill Medicare or other third party insurance prior to billing Medicaid.

1. Approval of the PAR does not guarantee payment by Medicaid. The client and the Personal Care Worker shall meet all applicable eligibility requirements at the time services are rendered and services shall be delivered in accordance with all applicable service limitations. Medicaid is always the payer of last resort and the presence of an approved or partially approved PAR does not release the agency from the requirement to bill Medicare or other third party insurance prior to billing Medicaid.
2. All Personal Care Services must be prior authorized by the Department or its Designated Review Entity utilizing the Department's specific utilization management tools before services are provided.
3. Personal Care PARs may be submitted for up to a full year of anticipated services unless: The client is not expected to need a full year of services, the client's eligibility is not expected to span the entire year, or as otherwise specified by the Department or its Designated Review Entity.
4. A PAR will be pended by the Department or its Designated Review Entity if all of the required information is not provided in the PAR request, or additional information is required by the Designated Review Entity to complete the review.
5. PARs shall be submitted to the Department or its Designated Review Entity in the manner required by the Department or its designee, and with the required documentation.
 - a. PAR requests shall include the State assessment form to determine the client's need for Personal Care Services.
 - b. It is the Home Care Agency's responsibility to provide sufficient documentation to support the necessity for the requested services.
6. When a PAR includes a request for reimbursement for two staff members at the same time (excluding supervisory visits) to perform two-person transfers and/or two persons are needed for a task, documentation supporting the need for two people and the reason adaptive equipment cannot be used must be included.

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7. All other information determined necessary by the Department or its Designated Review Entity to make a decision on the medical necessity and appropriateness of the proposed treatment plan must be included.
8. The Home Care Agency is required to request a revision to the Care Plan as necessary when the client experiences a change in condition necessitating a change in the amount, duration or frequency of Personal Care Services being delivered to the client.

General and Service Limitations

Medicaid does not reimburse for the following services under the Medicaid PC services benefit:

1. Personal Care Services that are not prior authorized by the Department's designated review agency.
2. Transportation of a client.
3. In accordance with Section 1905 (a) of the Social Security act, services provided by the client's parent, spouse, or legally responsible adult.
4. Services provided by an individual under 18 years of age, or services provided by a person not employed by the home care agency.
5. Services provided in hospital nursing facilities, Intermediate Care Facilities for Persons with Intellectual Disabilities (ICF/ID), on public school grounds, through Individual Residential Services & Supports (IRSS) or Group Residential Services & Supports (GRSS), in alternative care facilities or hospitals, medical offices or other Medicaid reimbursed settings.
6. Tasks that are defined as skilled certified nurse aide services in the Home Health Benefit Coverage Standard.
7. Homemaker services.
8. Services provided for the purpose of companionship.
9. Services provided for the purpose of respite.
10. Services provided for the purpose of financial management.
11. Services provided for the purpose of child care, education or home schooling.
12. Services provided for the benefit of an individual other than the Medicaid client.
13. Services that are not justified by the documentation of services provided, or by the client's medical or functional condition (even when services have been prior authorized) or that are not appropriate for the client's needs.
14. Time or mileage required to travel to the client's place of service.
15. Any services that are reimbursed by another insurance agency or other state, federal or private agency.
16. Services provided by agency staff that are excluded from participation in federally funded health care programs by US Department of Health and Human Services (HHS)/Office of Inspector General (OIG).

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17. Personal Care tasks that are directly related to a skilled task ordered in a Home Health plan of care.
18. PC Services provided and/or billed during a skilled CNA visit or when the client or Family Member/Caregiver is willing and able to perform the services or tasks independently.
19. Two staff (any combination of RN, LPN, CNA, PT, OT, SLP or PCW) from the same or a different agency completing the same task or service for a single client during the same visit, except when two staff are required to safely complete the service or task and there is no other person available to assist.
 - a. If services are provided by two staff, the highest level of required care will subsume the other service. For example: A CNA and a Personal Care Worker perform a Skilled Care and a Personal Care Service respectively. Only the CNA visit will be paid, as the Personal Care Service should have been performed during the CNA visit.
 - b. In instances where the two staff are of the same type, but from different agencies, the Home Care Agency which usually provides services to the client will be paid for the service.
20. Medicaid is the payer of last resort, except under certain circumstances as defined in the Medicaid provider billing manuals, the Personal Care rules and regulations, the provider bulletins and early intervention services.
21. Assistance with services that are being provided as a reasonable accommodation as part of the Americans with Disabilities Act (ADA), the Rehabilitation Act of 1973, and/or Part B of the individuals with Disabilities Education Act (IDEA).

Providers may bill visits that occur for the sole purpose of supervising or training the PCW as PCW service, and are not reimbursed at a higher rate or more time for the supervisor responsibilities.

Definitions

Term	Definition
Assessment	The systematic and ongoing collection, validation and evaluation of data to monitor client status and response to treatment. An Assessment can vary from in-depth comprehensive exam, such as one that would be completed at admission, to targeted Assessments by the care team that focus on key components of the client’s response and outcome of interventions.



Behavioral Intervention	<p>Techniques, therapies and methods used to modify or minimize aggressive behavior (verbal/physical), combative behavior, destructive behavior, disassociation, disruptive behavior, perseveration, pica, repetitious behavior, resistive behavior, self-injurious behavior, sensory integration, sexually inappropriate behavior or fecal smearing.</p> <p>Behavioral interventions exclude frequent verbal redirection or additional time to transition or complete a task, which are part of the general service to the client's needs.</p>
Care Coordination	<p>The planned organization of client care tasks between two or more participants (including the client) involved in a client's care to facilitate the appropriate delivery of health care and other health care support services. Organizing care involves the marshalling of personnel and other resources needed to carry out all required client care tasks, and is managed by the exchange of information among participants responsible for different aspects of care with the understanding that this information is or will be incorporated into the current or future medical care of the client.</p>
Care Plan	<p>A care plan is a written list of the Personal Care needs that will be addressed for a client by a PCW, which includes a complete list of all Personal Care tasks that will be delivered along with the frequency of the tasks. The care plan must be signed by the client's ordering provider.</p> <p>PC services may be ordered by a physician or advanced practice nurse.</p>
Certified Nurse Aide (CNA)	<p>A Certified Nurse Aide is employed by the Home Health Agency, and provides Skilled Care Services. A Certified Nurse Aide must have a current, active Colorado CNA certification and be employed by a Class A Home Health Agency. The CNA must have completed all required continuing education and training and have verified experience in the provision of Skilled Care Services.</p>
CMS – 485 Plan of Care (485)	<p>A coordinated plan developed by the HHA as ordered by the Attending Physician for provision of services to a client at his or her Residence, and periodically reviewed and signed by the physician in accordance with Medicare requirements.</p>
Cuing	<p>Providing a prompt or direction to assist an individual in performing tasks they are physically capable of performing but unable to independently initiate.</p>
Department	<p>The Colorado Department of Health Care Policy and Financing which is designated as the single State Medicaid agency for Colorado, or any divisions or sub-units within that agency.</p>
Designated Review Entity	<p>An agency that has been contracted by the Department to review for the Medical Necessity and appropriateness of the requested Personal Care Prior Authorization Request.</p>
Exacerbation	<p>A sudden or progressive increase in severity of a client's chronic illness, injury or disability (or its symptoms).</p>



Home Care Agency (HCA):	An entity which provides Home Health or PC Services. When referred to in this Benefit Coverage Standard without a 'Class A' or 'Class B' designation, the term encompasses both types of agency.
Home Health Agency (HHA)	An agency that is licensed as a Class A Home Care Agency in Colorado that is certified to provide Skilled Care Services to Medicare and Medicaid eligible clients. Agencies must hold an active and current Medicare provider ID and a current and active Medicaid provider ID in order to provide services to Medicaid clients. An agency that is licensed as a Class A Home Care Agency may also provide Personal Care services based on the agency's policies and procedures.
Intermittent Basis	A Personal Care visit that has a distinct start time and stop time and is task oriented with the goal of meeting a client's specific needs for that visit.
Medical Necessity EPSDT	Medical Necessity is defined for EPSDT at 10 C.C.R. 2505-10, § 8.280.
Ordering Provider	A client's primary care physician, personal physician, advanced practice nurse, or other specialist who is currently licensed and in good standing with Medicare and Medicaid and is responsible for writing orders and overseeing the client's Care Plan. This may include an alternate physician who is authorized by the Ordering Provider to care for the client in the Ordering Provider's absence.
Partial Approval	A portion of the requested PC Services are found to be (1) medically unnecessary and/or are not appropriate to the client's needs; or (2) are found to not be in compliance with applicable Medicaid rules and policies. If the Designated Review Entity partially approves a PAR, the provider is may submit a PAR revision request with any additional information that further supports the requested services.
Pended Prior Authorization Request	A Prior Authorization Request may be pended by the Department or its Designated Review Entity because all of the required information was not provided in the PAR request or additional information is required by the Designated Review Entity to complete the review.
Personal Care Agency (PCA)	An agency that is licensed as a Class B Home Care Agency in Colorado and is certified to provide Personal Care Services to Medicaid eligible clients. Agencies must hold a current and active Medicaid provider ID in order to provide services to Medicaid clients. May also be referred to as a Home Care Agency.
Personal Care (PC) Services	Services provided to a client which do not require medically skilled staff.



Personal Care Worker (PCW)	Is employed by a licensed Home Care Agency and has completed the required training or has verified experience in the provision of Personal Care Tasks for clients who need hands-on assistance or cuing to complete these tasks due to illness, injury or disability. A PCW cannot provide tasks that are considered skilled CNA services.
Protective Oversight	Maintaining an awareness of the general whereabouts and well-being of a client. Also includes monitoring the client's task so that a PCW/caregiver has the ability to intervene and supervise the safety, nutrition, medication, and other care needs of the client.
Qualified Physician	A primary care physician, personal physician, or other specialist who is currently licensed, and in good standing.
Residence	The physical structure that the client uses for his or her home. This may be his or her own house, an apartment, a relative's home or other rented or purchased accommodation for the purpose of housing a client for a specified time. A Residence does not include nursing facilities or other institutions as defined by CMS and the State of Colorado.
Skilled Care Services	Services and care that, due to the inherent complexity of the service, can only be performed safely and correctly by a trained and licensed/certified nurse (RN or LPN), Therapist (PT, OT or SLP) or CNA.
Skilled Nursing Services	Services that are provided by a Registered Nurse who is actively licensed to practice in the State of Colorado, and who practices under applicable state and federal laws, and professional standards. Skilled Nursing Services include services provided by a Licensed Practical Nurse under the direction of a Registered Nurse, to the extent allowed under applicable state and federal laws.
Unpaid Family Caregiver	A family member who provides care to the client without reimbursement by the department or other entity. This can be the client's parent, legal guardian, foster parent, spouse (including common law spouse), relative, or other person who is legally responsible for the wellbeing of the client.
Wound	An injury to living tissue caused by a cut, blow, or other impact, typically one in which the skin is cut or broken. Wound staging is not limited to pressure ulcers. Stage I: the skin surface is typically darker than the surrounding skin; the area is unbroken and the Wound is superficial. Stage II: the skin may or may not be broken, but the Wound is no longer superficial. There may be some drainage. Stage III: this Wound extends through all of the layers of the skin and may extend to Fat tissue There may be dead tissue and drainage. Stage IV: Wound extends through the skin and involves underlying muscle, tendons and bone. Dead tissue and drainage are almost always present and there is a high risk for infection.



Legal References

Regulation	Reference
1905(a) (7) of the Social Security Act (P.L. 74-271)	Home Health Care Services
1905(a) (24) of the Social Security Act	Personal Care Qualifications
42 C.F.R. 484	Personal Care Services
State Operations Manual. Appendix B	Guidance to Surveyors: Personal Care Agencies
Sections C.R.S. 25.5-5-102(1), and C.R.S. 25.5-5-202.1(l)	Home Health Services
C.R.S. 25.5-5-102(1) (f)	Home Health
10 C.C.R. 2505-10 § 8.520	Home Health Services
10 C.C.R. 2505-10 § 8.503	Children's Extensive Support Waiver Program
C.S.R. § 12-38.1	Colorado Nurse Aide Practice Act
6 C.C.R. 1011-1	Colorado Department of Public Health and Environment – Standards for Hospitals and Health facilities Chapter XXVI Home Care Agencies

Medicaid Director Signature

Date

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