

Pediatric Personal Care Benefit Specialty Training

Health First Colorado
(Colorado's Medicaid Program)

Training Overview

Introduction and
Covered Services

PARs and Waivers

Billing and Payment

Resources

Introduction - Personal Care

Non-medical support in-home for Personal Care tasks include toileting, bathing, dressing, meal preparation

- Requires evidence of medical necessity
- Requires prior authorization through PAR process
- For Health First Colorado members 20 years old and younger
- Meet EPSDT criteria

Introduction - Personal Care Policies

Members cannot receive Waiver or Home Health CNA support and Personal Care Benefit support for the same task

- One (1) exception: when two (2) people are needed for a task
 - Must provide sufficient documentation that more than one worker is needed to complete a task and that adaptive equipment cannot be used
- Personal Care providers are required to communicate with Home Health providers to ensure no duplication of services
- When a Personal Care PAR requests task(s) already covered by an active Home Health PAR, the Personal Care PAR will be denied

Introduction - Personal Care Policies

PAR effective dates cannot exceed a 12-month span

- Approval depends on medical necessity, determined by a third-party PAR vendor
- PAR requests must include legibly written 485 Plan of Care signed by M.D./D.O. or advance practice nurse
- Must include all of the following:
 - Diagnosis with ICD-10 code
 - Medical necessity for Personal Care
 - Specific Personal Care tasks that are medically necessary
 - Request for Personal Care service time needed per day

Covered Services

Pediatric personal care benefit tasks include:

- Ambulation/Locomotion
 - Such as physical support with walking or moving from place to place with or without an assistive device
- Bathing/Showering
 - Such as preparing bathing supplies and cleaning up after the bath, as well as applying soap, rinsing and drying
- Dressing
 - Such as putting on and taking off clothing
- Feeding
 - Such as making sure food is the right temperature and consistency

Covered Services

Pediatric personal care benefit tasks include (continued):

- Hygiene - Hair Care/Grooming
 - Such as shampooing, conditioning, simple styling and combing
- Hygiene - Mouth Care
 - Such as brushing, flossing, swabbing teeth and rinsing mouth
- Hygiene - Nail Care
 - Such as soaking, filing nails and cuticle care
- Hygiene - Shaving
 - Such as shaving face, legs and underarms with electric or safety razors
- Hygiene - Skin Care
 - Such as applying over-the-counter lotion or other skin care products

Covered Services

Pediatric personal care benefit tasks include (continued):

- Meal Preparation
 - Such as preparing, cooking and serving food
- Medication Reminders
 - Such as verbally communicating that it is time for medication and opening a pre-filled container
- Mobility - Positioning
 - Such as moving an individual to a new position in a wheelchair while keeping the body properly aligned
- Mobility - Transfer
 - Such as physically supporting an individual to safely move from bed to a wheelchair next to the bed

Covered Services

Pediatric personal care benefit tasks include (continued):

- Toileting - Bladder Care
 - Such as assisting an individual with using a toilet or bedpan, changing a diaper, emptying and rinsing the bedpan and cleaning skin
- Toileting - Bowel Care
 - Such as changing and cleaning an individual after a bowel movement, assisting an individual using the bathroom and changing any clothing or pads
- Toileting - Bowel Program
 - Such as emptying an ostomy bag
- Toileting - Catheter Care
 - Such as emptying a catheter bag

The PCAT includes detailed information about when each of these tasks may need skilled care instead of non-skilled personal care.

Medical Necessity

Personal Care must be:

- In accordance with generally accepted standards of medical practice
- Clinically appropriate in terms of type, frequency & duration
- Not primarily for the convenience of the child, parent or legal guardian, physician or other health care provider
- Cost effective

The following services will not be covered by medical necessity, regardless of member age:

- Education
- Personal need
- Comfort therapy
- Experimental
- Investigational

Medical Necessity

Fee-for-service Personal Care requires:

- A medical (physiological) reason to perform services.

Introduction - Pediatric Personal Care

Services must be provided by:

- State of Colorado licensed Class A or Class B agency
- Legally responsible adults are not eligible to provide services:
 - If Personal Care Services are provided by the member's parent, spouse or other legally responsible adult, they cannot be reimbursed by Health First Colorado
- Services provided in conjunction with the Home Health benefit and/or HCBS Waiver services:
 - Must coordinate with the Home Health agency and/or Waiver Case Manager

The PCAT includes detailed information about when each of these tasks may need skilled care instead of non-skilled personal care.

Personal Care Prior Authorization Request (PAR)

- Change in Condition requires a PAR revision
 - The Personal Care provider is required to request a revision to the Care Plan and PAR as necessary when the member experiences a change in condition necessitating a change in the amount, duration, or frequency of Personal Care Services being delivered to the member
- All Personal Care Benefit services require a PAR prior to treatment

Waiver Programs

- Brain Injury Waiver (BI)
- Community Mental Health Supports Waiver (CMHS)
- Developmental Disabilities Waiver (DD)
- Elderly, Blind and Disabled Waiver (EBD)
- Spinal Cord Injury Waiver (SCI)
- Supported Living Services Waiver (SLS)
- Children's Extensive Support Waiver (CES)
- Children's Home and Community Based Services Waiver (CHCBS)
- Children with Life Limiting Illness Waiver (CLLI)
- Children with Autism Waiver (CWA)
- Children's Habilitation Residential Program (CHRP)

Waiver Programs and Eligibility

Members do not qualify for Pediatric Personal Care Benefit services if they are currently getting services through any of the programs listed below because personal care services are provided as a primary component of them:

- Consumer-Directed Attendant Support Services (CDASS)
- In-Home Support Services (IHSS) (except through the CHCBS waiver, which does not provide personal care)
- Home Care Allowance (HCA)
- HCBS-Persons with Developmental Disabilities (DD)
- HCBS-Children's Habilitation Residential Program (CHRP)

Billing and Payment

- Personal Care must be billed using the CMS 1500 form
 - Each agency's specific billing number will be used to reimburse the claim
 - Agencies must use the same Personal Care Provider number for both the billing and rendering provider entries on the CMS 1500 form

Billing and Payment

- Units of service
 - T1019 : Modifier U7 in first position
 - 1 unit = 15 minutes
 - Reference the [Health First Colorado Provider Rates and Fee Schedule web page](#) for current rate

Billing and Payment

- For more detailed benefit and billing information, refer to:
<https://hcpf.colorado.gov/Billing-Manuals>
 - Pathway: Billing Manuals web page → CMS 1500 drop-down → Pediatric Personal Care Benefit Billing Manual

Resources

Provider Contacts Web Page

<https://hcpf.colorado.gov/provider-help>

- Provider Services Call Center

Training Web Page

<https://hcpf.colorado.gov/provider-training>

Billing Manuals Web Page

<https://hcpf.colorado.gov/billing-manuals>

- [Nursing Facility Billing Manual](#)
- Appendix R (for a detailed list of Explanation of Benefits (EOB) codes)
- General Provider Billing Manual

Resources

Quick Guides web page

<https://hcpf.colorado.gov/interchange-resources>

- [Copy, Adjust, or Void a Claim - Provider Web Portal Quick Guide](#)
- [Reading the Remittance Advice \(RA\) - Provider Web Portal Quick Guides](#)

Telemedicine during COVID-19 web page

<https://hcpf.colorado.gov/provider-telemedicine>

Thank you!