

## **Personal Care Q & A – December 20, 2016**

1. Now that we can only bill 1 unit a month for reviewing timesheets is it required to have an amount of time for the review noted?

***Answer: No.***

2. We were recently informed by a case manager that they are no longer required to attend Dual Service meetings, they simply need to sign off on the request. Is this a true statement?

***Answer: The PC policy states “A Service Planning meeting between the Resource Consultant (if applicable), the PC RN, and the Case Manager must be held with the member in the member’s residence, and documented on the “Request for Dual Service Provision Form”. The ADW Policy states the same and then goes onto say “Dual Service Provision Request Forms must be signed by the Case Manager, ADW RN, PC RN and the ADW Recipient (or legal representative). Original signatures are required; i.e., “signature of person on file” is not acceptable. The Case Manager, ADW RN, Personal Care RN must attend the initial, six-month, and the annual planning meetings.” So if the CM already held the service planning meeting within the last 6 months, no, the CM doesn’t have to go out again to sign that form. It seems that whenever the CM did the service planning meeting, that the form should have been completed and signed at that time according to how the policies are written.***

3. There are several types of IDD Interdisciplinary Team Meetings (Annual, 3-month, 6-month, 9-month, Critical Juncture, Transfer, Discharge, 7-day, and 30-day) – can you please verify what meetings the PC RN is required to attend for Dual service clients.

***Answer: The PC RN must attend the annual IDDW- IPP meeting. During this meeting the PC RN must develop the member’s POC and the team must develop a combined schedule reflecting Personal Attendant (PA) hours for both programs ensuring that PA hours do not overlap.***

***If at any time the IDDW team will be meeting to make changes to the IPP that would affect the Personal Attendant dual schedule and/or PC POC, the Service Coordinator must coordinate a meeting time that the PC RN will also be able to attend.***

4. With the new legislation concerning concealed carry of a weapon do you have a policy or guidelines that we are to follow concerning Personal Attendants’ and weapons? Is there an issue if the Personal Attendant has a weapon in the vehicle, locked in the trunk or gun box, while transporting a client for errands / community activity?

***Answer: Although we do not encourage anyone to carry a weapon in the home of or onto the property of a PC member, this would be a policy decision made by the agency for which the DCW works. This policy would have to be shared with the DCW to ensure compliance.***

**Questions/Comments from the call:**

5. Question: When is the start date for a prior authorization for Personal Care services?

***Answer: Please see Chapter 517 Glossary for Anchor Date. For new members, the Anchor Date will serve as the start date of an authorization, if the request is approved. The Anchor Date will be the first of the month in which the member's Pre-Admission Screening was completed.***

6. Question: To obtain documentation for a Level 2 Personal Care request, the PC agency conducted a visit/assessment with the applicant (prior to obtaining the Prior Authorization). Will this satisfy the PC Policy's intent of an initial visit?

***Answer: Yes, as long as you complete the rest of the information present on the RN Initial Contact form.***

7. Question: If the agency conducts a visit/assessments to satisfy documentation requirements for a Level 2 PC request and the PC request for prior authorization is ultimately denied eligibility for Personal Care, can the agency bill for the visit/assessment completed?

***Answer: No.***

8. What training does the PC RN have to take annually?

***Answer: Person-Centered Planning and Abuse/Neglect/Exploitation Identification Training are required for nurses.***

9. What is the plan period? If I do the POC in December, is it due again in June?

***Answer: yes.***

10. On the new Plan of Care, dusting/mopping/straightening are together on the form, but the instructions are different.

***Answer: Use the grouping on the Plan of Care form because it resembles the PC Standards of Care in its grouping. Those duties, combined, can only***

**take 10 minutes. The Plan of Care and the Instructions for the Plan of Care are currently under construction. Once the Plan of Care is finalized, the Instructions will be written to fit the form and both will be posted to the BMS website. BoSS will make an announcement to the PC providers to inform them that the form and instructions are available.**

11. What happens when someone is more capable physically than mentally? How should I document the person's need for cueing and supervision on the Plan of Care?

**Answer: We took input from other nurses on the call. It was suggested that the PC RN make use of the Personal Care Additional Documentation Attachment to describe the situation and explain the needs. BoSS also recommended that the person's needs are reflected accurately on the Nursing assessment to draw a clear picture between what is assessed and what is provided for on the POC.**

NOTE: Corrective fluid or tape (brand name White out) should not be used on MNER's or any other ADW or PC documents. If you make a mistake on a document, either shred it and begin anew, or mark one line through the mistake (so that what is underneath the line can be read), initial it and date it. When you use white-out on a document, it gives the appearance that something fraudulent is occurring.

**Next PC Q & A – January 17, 2017.**