

PROVIDERALERT



To: AmeriHealth Caritas Louisiana Providers

Date: June 5, 2024

Subject: LDH Approved Clinical Policy – Personal Care Services

Summary: Guideline for Personal Care Services.

AmeriHealth Caritas Louisiana would like to inform you of a new policy that has been approved by the Louisiana Department of Health in accordance with La. R.S. 46:460.54. The guideline is effective on **July 5, 2024** and will be posted at the following link on our website under Clinical Policies: <https://www.amerhealthcaritasla.com/provider/resources/clinical/policies.aspx>.

Reminder: If your practice is not registered with our website portal-NaviNet, we highly recommend registering. To register, please visit www.navinet.net to sign up or contact your Provider Account Executive for details.

Questions: Thank you for your continued support and commitment to the care of our members. If you have questions about this communication, please get in touch with AmeriHealth Caritas Louisiana Provider Services at 1-888-922-0007 or your [Provider Network Management Account Executive](#).

Missed an alert? You can find a complete list of provider alerts on our website's [Provider Newsletters and Updates](#) page.

Need to update your provider information? Send full details to network@amerihealthcaritasla.com.

Personal care services

Clinical Policy ID: CCP.4044

Recent review date: 12/2023

Next review date: 4/2025

Policy contains: Personal care services, Custodial care services

AmeriHealth Caritas has developed clinical policies to assist with making coverage determinations. AmeriHealth Caritas' clinical policies are based on guidelines from established industry sources, such as the Centers for Medicare & Medicaid Services (CMS), state regulatory agencies, the American Medical Association (AMA), medical specialty professional societies, and peer-reviewed professional literature. These clinical policies along with other sources, such as plan benefits and state and federal laws and regulatory requirements, including any state- or plan-specific definition of "medically necessary," and the specific facts of the particular situation are considered by AmeriHealth Caritas when making coverage determinations. In the event of conflict between this clinical policy and plan benefits and/or state or federal laws and/or regulatory requirements, the plan benefits and/or state and federal laws and/or regulatory requirements shall control. AmeriHealth Caritas' clinical policies are for informational purposes only and not intended as medical advice or to direct treatment. Physicians and other health care providers are solely responsible for the treatment decisions for their patients. AmeriHealth Caritas' clinical policies are reflective of evidence-based medicine at the time of review. As medical science evolves, AmeriHealth Caritas will update its clinical policies as necessary. AmeriHealth Caritas' clinical policies are not guarantees of payment.

Coverage policy

Personal care also known as custodial care services are clinically proven and, therefore, medically necessary for members who:

- Are diagnosed with a mental illness and who require minimal assistance with activities of daily living, and/or assistance with instrumental activities of daily living (such as housekeeping, cooking, medications, or transportation, but do not require a higher skilled level of care need — see listing in Findings section of this policy (Louisiana Medicaid Program, 2021).

Medicaid-eligible members who meet medical necessity criteria may receive personal care services when all of the following are met:

- Such care is recommended by the treating licensed mental health professional or physician within their scope of practice.
- The member's age is at least 21 years.
- The member has transitioned from a nursing facility or been diverted from a nursing facility level of care through the My Choice Louisiana program.
- The member is medically stable, not enrolled in a Medicaid-funded program that offers a personal care service or related benefit, and not in need of care that would exceed what can be provided under the scope and/or service limitations of this personal care service (Louisiana Medicaid Program, 2021).

Limitations

No limitations were identified during the writing of this policy.

Alternative covered services

Intensive case management.

Background

Serious mental illness is a persistent mental, behavioral, or emotional disorder resulting in serious functional impairment that substantially interferes with or limits one or more major life activities. In 2021, there were an estimated 14.1 million adults age 18 or older in the United States with serious mental illness, representing 5.5 % of all U.S. adults (National Alliance on Mental Illness, 2023 ~~2024~~).

Examples of serious mental illness include major depressive disorder, schizophrenia, and bipolar disorder. Substance use disorder and/or a developmental disability may accompany serious mental illness. Individuals may experience frequent acute psychiatric episodes resulting in hospitalization or emergency room visits, interactions with law enforcement or imprisonment, suicidal ideation or attempts, or a history of violence related to their mental illness.

An adaptation of the federal Substance Abuse and Mental Health Services Administration (1993) definition provides more detailed eligibility criteria:

- Age 18 years or older.
- A diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet the criteria specified in the *Diagnostic and Statistical Manual of Mental Disorders — Fifth Edition, Text Revision* (American Psychiatric Association, 2022).
 - Substance use disorders, developmental disorders, and organic brain syndromes are excluded, unless they occur with a diagnosable serious mental illness.
- The mental illness has resulted in impairment that significantly interferes with or limits one or more of the following major life activities:
 - Activities of daily living.
 - Interpersonal functioning.
 - Concentration, persistence, and pace.
 - Adaptation to change.

Since 1975, states have been authorized to offer personal care services as an optional Medicaid benefit. By 2018, 34 states offered the optional plan benefit (Kaiser Family Foundation, 2018).

Medicaid personal care services are defined according to each state's approved plan. These services are categorized as a range of human assistance provided to persons with disabilities and chronic conditions to enable them to accomplish activities of daily living or instrumental activities of daily living (Centers for Medicare & Medicaid Services, 2017).

Findings

Personal care services include assistance and/or supervision necessary to enable members with mental illness to

accomplish routine tasks and live independently in their own homes (Louisiana Department of Health, 2022). Personal care services for members with mental health disorders include the following:

- Minimal assistance with, supervision of, or prompting the member to perform activities of daily living, which include eating, bathing, grooming/personal hygiene, dressing, transferring, ambulation, and toileting;
- Assistance with, or supervision of, instrumental activities of daily living to meet a member's direct needs; these functions include:
 - Light housekeeping, including ensuring pathways are free from obstructions;
 - Laundering of the member's bedding and clothing, including ironing;
 - Food preparation and storage;
 - Assistance with scheduling (making contacts and coordinating) medical appointments;
 - Assistance with arranging transportation depending on the member needs and preferences of the member;
 - Accompanying the member to medical and behavioral health appointments and providing assistance throughout the appointment;
 - Accompanying the member to community activities and providing assistance throughout the activity;
 - Brief occasional trips outside the home by the direct service worker on behalf of the member (without the member present) to include shopping to meet the health care or nutritional needs of the member or payment of bills, if no other arrangements are possible and/or the member's condition significantly limits participation in these activities;
 - Medication reminders with self-administered prescription and non-prescription medication that is limited to:
 - Verbal reminders.
 - Assistance with opening the bottle or bubble pack when requested by the member.
 - Reading the directions from the label.
 - Checking the dosage according to the label directions.
 - Assistance with ordering medication from the drug store.

Note: Personal care service workers are not permitted to give medication to members. This includes taking medication out of the bottle to set up pill organizers.

- Assistance with performing basic therapeutic physical health interventions to increase functional abilities for maximum independence in performing activities of daily living, such as range-of-motion exercise, as instructed by a licensed physical or occupational therapist or by a registered nurse.

Louisiana Medicaid Program regulations also address the following issues concerning delivery of personal care services to members with mental health conditions:

- Service utilization.
- Service delivery.
- Allowed mode(s) of delivery.
- Provider responsibilities.
- Service documentation and logs.
- Back-up staffing and emergency evacuation plans.

- Provider qualifications (agency and staff.)
- Allowed provider types and specialties.
- Limitations and exclusions.
- Billing procedures.

References

On October 22, 2023, we searched PubMed and the databases of the Cochrane Library, the U.K. National Health Services Centre for Reviews and Dissemination, the Agency for Healthcare Research and Quality, and the Centers for Medicare & Medicaid Services. Search terms were Custodial care, Personal Care services, ADL' We included the best available evidence according to established evidence hierarchies (typically systematic reviews, meta-analyses, and full economic analyses, where available) and professional guidelines based on such evidence and clinical expertise.

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders, Fifth Edition, Text revision (DSM-5-TR)*. <https://www.psychiatry.org/patients-families/what-is-mental-illness>. Published March 18, 2022. Updated November 2022.

Centers for Medicare & Medicaid Services. Fact Sheet: Preventing Medicaid Improper Payment for Personal Care Services. <https://www.cms.gov/Medicare-Medicaid-Coordination/Fraud-Prevention/Medicaid-Integrity-Education/Downloads/pcs-prevent-improperpayment-factsheet.pdf>. Published November 2017.

Kaiser Family Foundation (KFF). Medicaid benefits: Personal care services. <https://www.kff.org/medicaid/state-indicator/personal-care-services/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>. Published 2018.

Louisiana Department of Health. Behavioral Health Services. Provider Manual, Medicaid Program Services. Chapter 2: Behavioral Health Services. Section 2.3 Outpatient Services – Personal Care Services. <https://www.lamedicaid.com/provweb1/providermanuals/manuals/bhs/bhs.pdf>. Published April 5, 2022.

National Alliance on Mental Illness. Mental Health by the Numbers. <https://www.nami.org/mhstats>. Updated April 2023.

Substance Abuse and Mental Health Services Administration. Center for Mental Health Services. Final notice. Federal Register. May 20, 1993;58(96). www.samhsa.gov/sites/default/files/federal-register-notice-58-96-definitions.pdf.

Policy updates

1/2022: initial review date and clinical policy effective date: 1/2022

1/2023: Policy references updated.

1/2024: Policy references updated.