

# PROVIDER QUICK POINTS

## PROVIDER INFORMATION



August 28, 2024

### PCA Agency Requirements

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) offers contracts to Personal Care Agencies to provide services to eligible Minnesota Health Care Programs members. Provider Contracts contain provision to follow requirements and maintain appropriate documentation as required by Minnesota state law, the Blue Plus Referral Health Professional Provider Agreement, the Provider Policy and Procedure Manual and the Blue Plus Manual.

### PCA Service Hours

Personal Care Assistants (PCA) must meet and follow the outlined requirements required by the Minnesota Department of Human Services (DHS), which includes being limited to providing and being paid for up to 310 hours per month of personal care assistance services, regardless of the number of recipients being served or the number of agencies a PCA is enrolled with ([Minn. Stat. § 256B.0659, subd. 11 \(10\)](#)).

A written document recording services provided to assist a person is required to be maintained for each PCA. All PCA time and activity documentation must contain, at a minimum, the following: ([Minn. Stat. § 256B.0659, subd. 12](#)):

- Provider information: Agency name, phone number
- Recipient information: Name, Minnesota Health Care Programs identification (MHCP ID) number, date of birth, dates, and location of the person's stays in a hospital, care facility or incarceration
- PCA worker information: Name, Unique Minnesota Provider Identifier (UMPI)
- Dates of service: Day, month, and year of each service, in consecutive order
- Service information: Arrival and departure times of each visit, including a.m. and p.m. notations; time spent traveling, including start and stop times with a.m. and p.m. designations, the origination site, and the destination site
- Shared services: Staff-to-recipient ratio and location of visit
- All daily activities provided.
- Instrumental activities of daily living (IADLs) (not allowed for people younger than age 18): Light housekeeping, laundry, meal preparation, other
- Total time: Daily total time and total for timesheet
- Time and activity documentation must include a fraud statement.
- Acknowledgement and signatures.
- Required signatures: Person receiving services/responsible party and PCA worker
- Date(s) of signatures: Date(s) the form is signed by each party
- A statement that it is a federal crime to provide false information on personal care services billing for Medical Assistance payments

The PCA provider agency is responsible to make sure time and activity documentation is separate for each person receiving shared services, and filed in the person's health record. ([Minn. Stat. § 256B.0659, subd. 24 and 28](#)).

QP65-24

Distribution: [bluecrossmn.com/providers/forms-and-publications](https://bluecrossmn.com/providers/forms-and-publications)

Blue Cross® and Blue Shield® of Minnesota and Blue Plus® are nonprofit independent licensees of the Blue Cross and Blue Shield Association.

L264R03 (12/13)

The agency is also responsible to:

- Verify documentation of each PCA worker's hours worked
- Pay PCA workers based on the actual number of hours of services provided
- Have a template with English translation available when using time and activity documentation in another language
- Ensure that a PCA driving a recipient has a valid driver's license and the vehicle used is registered and insured according to MN law

### **Qualified Professional (QP) Services and Care Plan**

A PCA provider agency must provide QP services for all PCA workers and people who receive services. All PCA workers must be supervised by a QP ([Minn. Stat. § 256B.0659, subd. 14](#)).

### **QP Remote Supervision**

For recipients with chronic health conditions or severely compromised immune systems, a QP may conduct required supervision under two-way interactive audio and visual telecommunication if, at the recipient's request, the recipient's primary health care provider determines remote supervision is appropriate and documents the determination.

- Primary health care provider determination documentation is to be included in the recipient's care plan
- First supervisory visit or initial PCA care plan development may not be completed remotely

### **Traditional PCA**

At minimum, the QP must visit the service delivery location and meet with the person and responsible party (if applicable) to evaluate the PCA worker(s) and/or oversee the delivery of PCA services within the following timelines:

- Within the first 14 days the PCA worker(s) begin to provide services to the person
- Every 60 days for PCA workers who are ages 16-17
- Every 90 days during the person's first year of service
- Every 120 days after the person's first year of service

***Note:** The person must have a care plan within seven days of starting services. The QP can choose to combine the first visit with care plan development, if appropriate.*

### **PCA Choice**

At minimum, the QP must visit the service delivery location and meet with the person and responsible party (if applicable) to evaluate the PCA worker(s) and/or oversee the delivery of PCA services within the following timelines:

- Upon request of the person and responsible party (if applicable)
- Every 60 days for PCA workers who are ages 16-17
- Every 180 days

### **The QP must document all of the following information:**

- The person's PCA care plan
- The person's month-to-month planned use of PCA services
- Changes in the person's needs that require a change to the level of service and care plan
- Evaluation results of supervision visits, staff issues and corrective actions
- All communication with the person, responsible party (if applicable) and PCA workers
- Training for the person's care
- All documentation must include the date, time, and activity details

### **The QP must keep documentation, as appropriate, in:**

- The person's file at the PCA provider agency
- PCA worker employee file
- The person's home

### **Questions?**

Please contact provider services at **1-866-518-8448**.