

Fee for Service

EPSDT Personal Care Services vs. Home Health Services (including Extended Skilled Nursing Services also known as Extended Home Health)

EPSDT Personal Care Services (PCS)	Home Health (Basic and Extended)
<ul style="list-style-type: none"> ▪ Services include: basic personal care – bathing, dressing and grooming activities. Assistance with bladder and/or bowel requirements or problems. Assistance with eating and food preparation. Performance of incidental household chores for the recipient only. ▪ The recipient's condition includes a need for nursing care to manage a plan of care and/or more assistance with extensive personal care, ambulation, and mobilization. This may include 1) professional nursing care and assessment on a daily basis due to a serious condition which is unstable or 2) rehabilitative therapeutic regime requiring professional staff. ▪ Does not cover any medical tasks, medication administration, or NG tube feeding. ▪ Accompanying, NOT TRANSPORTING recipients to medical appointments. ▪ EPSDT PCS is not to function as a substitute for childcare arrangements or to provide respite care to the primary caregiver. ▪ Must be prior authorized by BHSF/Molina. Documentation that must accompany PCS request: PA-14, Daily Time Schedule, EPSDT-PCS Form 90, Plan of care approved by the physician, Social Assessment and any supporting documentation. ▪ Ages: birth through 20 ▪ Services provided by a Medicaid enrolled Personal Care Services provider. 	<ul style="list-style-type: none"> ▪ Basic Home Health Services include skilled nurse visits (RN or LPN), Aid visits, Physical Therapy, Occupational Therapy and Speech Therapy. ▪ Recipients may also receive Extended Skilled Nursing Services (Extended HH) which is multiple hours per day, several days per week for an extended period of time. Can provide medical tasks such as tube feeding, catheter maintenance and medication administration. ▪ Extended Skilled Nursing Services (Extended HH) and all therapies must be prior authorized. Home Health visits above one per day must be prior authorized by BHSF/Molina. Documentation that must accompany HH request: Physician referral on letterhead, home health plan of care, and a completed PA-07. ▪ Children may still be eligible for Extended Skilled Nursing Services even if they attend school outside the home. ▪ For Extended Services, a prescription is needed from the doctor stating the number of hours requested and a letter of medical necessity justifying the reason for extended services and the number of hours requested. ▪ Therapies can be provided by Home Health agencies, an outpatient facility, in an Early Intervention Center, rehabilitation center and at school.