

Attention Provider Types 30 and 83:

Changes to Authorization Notices Effective June 1, 2016

Effective June 1, 2016, Personal Care Services (PCS) provider types 30 and 83 will no longer receive a copy of the Functional Assessment Service Plan. You will receive the Approved Personal Care Service Plan, which is a one-page document containing the recipient's demographic information, any pertinent medical information and the total authorized personal care service hours.

In keeping with the "flexibility of services" policy in Medicaid Services Manual (MSM) Chapters 2600 and 3500, you will receive notice of the weekly authorized hours and must develop a schedule with the recipient that will best meet the recipient's personal care service needs. Time authorized is based on the recipient's functional ability within each individual task. Flexibility of services allows for the total weekly hours to be tailored within any of the nine covered personal care tasks to best meet the needs of the recipient. The number of days per week services are to be provided will be determined between the PCS provider and the recipient when they determine their service schedule. The schedule should be based on the recipient needs and not for the convenience of the personal care service agency or the personal care assistant.

The provider is responsible to verify the recipient's prior authorization utilizing the Electronic Verification System (EVS) and to provide a copy of the Approved Personal Care Service Plan to the recipient. If you have not registered to use EVS, please go to www.medicaid.nv.gov and select the "EVS" tab to register or review the EVS User Manual Chapter 1 for step by-step instructions. For assistance with obtaining a contact the Hewlett Packard Enterprise secured EVS login, Field Representatives at NevadaProviderTraining@hpe.com.