

Personal Care Services

Provider Guide



Monthly Service Hour Limit Reminders

From [State Plan Personal Care Services \(PCS\), 3L \(PDF\)](#) section 5.3.1

Monthly Service Hour Limits:

The following **hour limits** apply to a beneficiary who meets PCS eligibility requirements and coverage criteria in this policy unless warranted by a doctor's order (signed attestation on the 3051 form) or utilization of EPSDT.

- A beneficiary **under 18 years:**
 - » Authorized to receive up to 60 hours of service per month
- A beneficiary aged **18 years and older:**
 - » Authorized to receive up to 80 hours of service per month

NOTE: Providers can use the secure provider portal to view authorizations and approved monthly units: [Secure Provider Portal Guide Viewing Assessments and Authorizations Provider Guide \(PDF\)](#)

Plan of Care/Service Plan Reminders

From [State Plan Personal Care Services \(PCS\), 3L \(PDF\)](#) section 5.4.11

Requirements for Selecting and Changing PCS Providers:

The **new PCS Provider** shall be required to:

- Develop a new service plan
- And complete this service plan within seven business days of accepting the referral.

Provider organizations shall be reimbursed only for PCS authorized hours and services specified and scheduled in the validated PCS service plan

NOTE: Provider organizations are expected to **complete and submit** their plan of care/service plan to Carolina Complete Health via **fax: 833-238-7694**. This should be submitted upon notification of authorization determination.

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EVV Visit Data Reminders

From [State Plan Personal Care Services \(PCS\), 3L \(PDF\)](#) section 7.4.2

Electronic Visit Verification (EVV) Technology Options and Requirements:

Effective January 1, 2021:

- Providers are required to use EVV solution to capture in-home aide visits through mobile applications, telephone, or fixed visit verification devices.
- EVV visit verification validation components required by the 21st Century Cures act:
 - Type of service performed
 - Individual receiving the service
 - Date of the Service
 - Location of Service delivery
 - Individual providing the service
 - Time the service begins and ends. (If using HHAEExchange, this refers to the clock in and clock out times for providers using HHAEExchange, view the FAQ for How do I Clock in and out?)

Initiating and Reauthorization of PCS Service

Initial Authorization:

1. The [CCH Personal Care Services Request "3051" Form](#) is to be **completed by member's primary care provider** or attending physician. This can be found on the [Manuals, Forms, and Guides](#) page.
2. **Fax** the 3051 form to Carolina Complete Health Care Management: **1-833-706-0238**
3. Once this form is received a **face-to-face visit will be scheduled** within 30 days by CCH Care Manager
4. After the assessment is completed and if medical criteria are met, the start of care date will be determined and an authorization will be created by CCH and shared with the agency. This document will include purchased tasks to be completed by PCS attendant. Agencies will receive the authorization via fax and can also view on the CCH [Secure Provider Portal](#).

Reauthorization:

- Providers **do not need to request reauthorization** of PCS.
- CCH LTSS Care Managers are responsible for reauthorizing PCS through face-to-face visits and assessments.
- Providers can access the following using the [Secure Provider Portal](#):
 - **Member health records**
 - **Assessments**
 - **Authorization status**

NOTE: For support using the Secure Provider Portal, reach out to your [Provider Engagement Administrator](#).

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Additional PCS Provider Resources

The job aids below, accessible through your HHA portal, are also available on the [HHAeXchange Knowledge Base](#).

- [HHAeXchange Provider Support Portal](#)
- [HHAeXchange Client Support Portal Job Aid](#)
- [Provider Managed Billing Diagnosis Codes Job Aid](#)
- [Billing Review Problems and Resolutions](#)
- [Prebilling Problems and Resolutions](#)
- [Common EDI Rejections](#)
- [EDI Tool Job Aid](#)
- [Reviewing Visits on the Prebilling Page](#)
- [Viewing Claims Status Job Aid](#)
- [Patient Office Move](#)
- [Rate Management](#)
- [Secondary Billing \(Linked Contracts\) Job Aid](#)
- [EDI Provider Rebilling Job Aid](#)
- [Accepting Placements \(Linked Patients\) Job Aid](#)

Home Health and Personal Care Services Provider Resources



Need Help?

- If the member is actively in care management for PCS, you may request to speak to the assigned **Care Manager** or **LTSS Manager**.
- For additional support, please contact **Provider Services** at 1-833-552-3876.

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