

# North Carolina Medicaid Special Bulletin



An Information Service of the  
Division of Medical Assistance

Visit DMA on the Web at <http://www.ncdhhs.gov/dma>

December 2014

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**Attention:  
Personal Care Service (PCS) Providers**

## **State Plan Personal Care Services (PCS) Program Updates**

### **Effective 2015**

Providers are responsible for informing their billing *agency of information in this bulletin.*  
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## **DMA 3051**

Effective February 1, 2015, beneficiaries requesting Personal Care Services (PCS) must use **DMA 3051 - Request for Independent Assessment**. This form is a *revision* of the currently used DMA 3051- Request for *Services* form.

**On Wednesday, December 17**, the Division of Medical Assistance (DMA) will host webinar trainings on the new form and the changes that are required for beneficiaries, practitioners and providers submitting the form.

Providers may register for training by selecting a session from the below links:

10:00 p.m. Session 1

<https://libertyhealthnc.webex.com/libertyhealthnc/onstage/g.php?MTID=eb87b8efd44e7b57716d0832d1a57bf72>

2:00 p.m. Session2

<https://libertyhealthnc.webex.com/libertyhealthnc/onstage/g.php?MTID=e8b8c387c7354cf9baac8194c41039a86>

Those with questions regarding webinar registration can contact Liberty Healthcare Corporation at 919-322-5944 or 1-855-740-1400.

## **Mandatory Enrollment to QiReport**

**Registration on the QiReport Provider Interface is REQUIRED for all PCS Providers.** The PCS QiReport Provider Interface is a web-based information system used to support PCS Independent Assessments. The interface helps collect, store, and communicate beneficiary information such as decision notices, independent assessments (required to develop beneficiary plans of care), change of status assessment request, and discharge reporting.

To register, providers must complete the QiReport Registration form available on the DMA PCS web page at [www.ncdhhs.gov/dma/pcs/pas.html](http://www.ncdhhs.gov/dma/pcs/pas.html) under "Forms," and also at [www.qireport.net](http://www.qireport.net). Once the registration form is complete, send it to:

**Fax:** VieBridge, Inc. QiReport Support at fax 919-301-0765

**Mail:**

VieBridge, Inc. QiReport Team  
8130 Boone Boulevard, Suite 350  
Vienna, VA 22182

## **On-Line PCS Service Plan Implementation**

DMA tentatively plans to implement the PCS On-line Service Plan on **February 1, 2015**. Use of the online service plan will require all providers to be registered users of QiReport, the PCS Provider Interface. Providers will develop beneficiary's on-line service plan through QiReport and have electronic access to the Independent Assessment which will drive the development of the beneficiaries Service Plan.

DMA will begin testing the On-line Service Plan with a pilot group in December in preparation for implementation. A webinar training on the On-line Service Plan will be provided in January, 2015. A registration link for the webinar will be posted on the [DMA PCS web page](#) and [Liberty Healthcare of N.C. web page](#).

### **PCS 1% Rate Reduction**

Effective January 1, 2015, [N.C. Senate Bill 744 Section 12H.14A](#) mandates that the N.C. Department of Health and Human Services (DHHS) shall reduce by 1% all fee-for-services payments for services rendered to Medicaid and N.C. Health Choice beneficiaries on or after January 1, 2015. This includes State Plan PCS.

### **Home and Community Based Services (HCBS) Final Rule**

The final Home and Community-Based Services (HCBS) regulations set forth new requirements for several Medicaid authorities under which states may provide home and community-based long-term services and supports. The regulations enhance the quality of HCBS and provide additional protections to individuals who receive services under these Medicaid authorities.

The final rule includes a transition period for states to ensure that their waivers and Medicaid state plans meet the HCBS settings definition. DHHS is currently working on the transition plan which will be submitted to the Centers for Medicare & Medicaid Services (CMS) in March, 2015. The public will have an opportunity to provide input on state's transition plans. CMS expects states to transition to the new settings requirements as quickly as possible and to demonstrate substantial progress during any transition period. Information for advocates about the new CMS HCBS rules is available at <http://hcbsadvocacy.org>.

### **Adult Care Home Cost Reporting**

Recently, DHHS determined that the Division of Aging and Adult Services, as the business owner of the State/County Special Assistance program, will serve as the lead agency for facilitating the adult care home cost reporting process. This information is referenced at [www.ncdhhs.gov/control/acf/Aging\\_memo\\_10-21-2014.pdf](http://www.ncdhhs.gov/control/acf/Aging_memo_10-21-2014.pdf). The Division of Aging and Adult services will be working closely with the Office of the Controller and the Office of Internal Audit to assure implementation of the cost reporting requirements.

As further information becomes available, it will be placed on the DHHS Office of the Controller's website at [www.ncdhhs.gov/control/acf/acfac.htm](http://www.ncdhhs.gov/control/acf/acfac.htm).

***Electronic claims must be transmitted and completed by 5:00 p.m. on the cut-off date to be included in the next checkwrite. Any claims transmitted after 5:00 p.m. will be processed on the second checkwrite following the transmission date.***

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