

Based upon my review of the record, I hereby MODIFY the Initial Decision affirming Respondent's reduction of Petitioner's Personal Care Assistant ("PCA") services to 21 hours per week. For the reasons which follow, I find that a reassessment should be performed.

Petitioner is a Medicaid eligible individual currently receiving 30 hours per week of PCA services. She elects to receive those services through the Personal Preference Program (PPP) which permits the eligible recipient to hire a caregiver of their choosing, in this case her brother. PCA services are non-emergency, health related tasks to help individuals with activities of daily living and with household duties essential to the individual's health and comfort, such as bathing, dressing, meal preparation and light housekeeping. The decision regarding the appropriate number of hours is based on the tasks necessary to meet the specific needs of the individual and the hours necessary to complete those tasks.

On August 21, 2017, Petitioner's managed care organization (MCO), Amerigroup, conducted a scheduled assessment. Using the State-approved PCA Beneficiary Assessment Tool, the MCO nurse had a face-to-face visit with Petitioner and considered several categories related to her functional limitations and determined the amount of time Petitioner needed for each category. Based on this assessment, the nurse determined that the needed services can be provided within 21 hours per week. Unfortunately, the nurse who performed the assessment did not testify at the hearing and thus Petitioner was unable to question her about her findings.

I find it significant that Petitioner's witness, Michael Newell, R.N., used his own assessment tool to support his determination that Petitioner required 32.3 hours of PCA support each week, but that when using the state PCA tool he found a requirement of

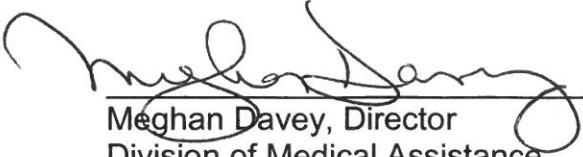
24.3 hours each week. Given the marginal difference in Amerigroup's finding (21 hours) and Newell's findings (24 hours) when using the same PCA tool, it appears as though any additional hours would only be used for supervision or companionship which is not an authorized use of the service. See N.J.A.C. 10:60-3.8(c). This would be contrary to the purpose of the PCA program, which is intended to provide medically necessary assistance with specific health related tasks.

The difficulty I have with United Healthcare's determination in this case is that the assessing nurse did not testify at the hearing. As a result, Petitioner and the ALJ were unable to question her about her findings and scoring in the assessment tool. Furthermore, once PCA services are authorized, a nursing reassessment is performed every six months or more frequently if warranted, to reevaluate the individual's need for continued care. N.J.A.C. 10:60-3.5(a)3. Since the last assessment was performed in February, Petitioner is due for a reassessment. For this reason, coupled with the fact that the assessing nurse did not testify at the hearing, I find that a new assessment is warranted. Should Petitioner disagree with the results of this assessment, she may request another fair hearing at that point.

THEREFORE, it is on this ^{9th} day of JULY 2018,

ORDERED:

That Amerigroup perform a reassessment. Petitioner's services shall be continued at 30 hours per week pending the reassessment.


Meghan Davey, Director
Division of Medical Assistance
and Health Services