

NC Medicaid Personal Care Services Beneficiary Participation Guide

You have submitted a request to receive Personal Care Services (PCS) through NC Medicaid. Before conducting an assessment to determine if you are eligible or continue to be eligible for the PCS program, you need to know:

Beneficiary Rights

1. You have the right to have an independent assessment or observation to determine your ability to care for yourself.
2. You can have anyone you wish present at the assessment.
3. You can give the assessor any medical records or other information that you think would be helpful for them to understand your needs.
4. If your services are reduced or denied, you have the right to appeal.
5. You can decide not to have an assessment, but you cannot have Medicaid PCS without one.
6. If your living situation or your ability to take care of yourself changes, or if people who were helping you can no longer do so, you may request another assessment.

Beneficiary Responsibilities

1. You must be enrolled in the NC Medicaid Program.
2. The place you live in must be safe for you and your caregivers.
3. You cannot receive NC Medicaid PCS if you have people who are willing and able to help you care for yourself the same days/time PCS would be provided.
4. You must be under the care of a doctor or other healthcare provider.
5. You cannot have anyone who lives with you or is related to you take care of you and be paid for it; this includes a legally responsible person, spouse, child, parent, sibling, grandparent, or grandchild (blood relatives, step, or in-laws).
6. You must keep your address and contact information current so Medicaid can reach you.
7. You must respond to calls from Acentra Health to schedule your appointment and receive other important information.
8. You must participate in the assessment to the best of your ability and choose a PCS provider who accepts Medicaid.

*** Beneficiaries residing in their primary private residence who believe that they need additional assistance with medication management or are unable to self-administer medication, should contact their primary care provider to discuss their need for additional assistance and seek referrals to be assessed for alternative services, such as home health, which may assist with medication management.**

For the full Medicaid PCS Clinical Coverage Policy 3L, please visit: <https://medicaid.ncdhhs.gov/3l-state-plan-personal-care-services-pcs>

By signing this form, you are confirming that the guide was explained to you and that you received a copy.

For questions about your assessment, please call Acentra Health toll free at 888-317-0751 or 833-522-5429.

Beneficiary Printed Name/Signature

Date

Witness (if Beneficiary is unable to sign) Printed Name/Signature

Date

Independent Assessor Printed Name/Signature

Date

Medicaid #

DOB

A copy of PCS Beneficiary Participation Guide was left

Beneficiary declined to sign

(V5.1.16.2019)