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# Accelerating Better Outcomes

Front Porch Chat-PCS | February 15, 2024

**Acentra**  
HEALTH

# Front Porch Chat-Objectives

- For PCS beneficiaries and caregivers/families
- Intro to Acentra Health/NCLIFTSS
- Acentra Health's Role in PCS
- PCS Case Scenarios and Answers
- Q&A



# Housekeeping

- Meeting is being recorded
- Camera and microphones off
- Presentation-30 minutes
- Q&A-15 minutes (microphones on)
- Recorded Meeting/PowerPoint and Q&A will be posted to Acentra Health website



# Meet Our Company



With over six decades of combined experience, CNSI and Kepro have **come together to become:**

**Our purpose** is to accelerate better health outcomes through quality healthcare

**Our vision** is to be the vital partner for healthcare solutions in the public sector

**Our mission** is to continually innovate solutions that deliver maximum value and impact to those we serve



# NC LIFTSS Team-PCS

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**JOHN HENNESSEY** | VICE PRESIDENT, OPERATIONS, NCLIFTSS

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**LYNEKA JUDKINS** | EXECUTIVE DIRECTOR, NCLIFTSS

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**GENEVIEVE MERRITT** | CLINICAL DIRECTOR, NCLIFTSS

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**PENNY PAUL** | PCS PROGRAM MANAGER, NCLIFTSS

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**VERONICA CRUZ** | STAKEHOLDER ENGAGEMENT & EDUCATION COORDINATOR, NCLIFTSS

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**RENEE WHITE** | CONTACT SUPPORT CENTER MANAGER, NCLIFTSS



# Intro to NCLIFTSS

- June 2023: Acentra Health, was selected by NCDHHS to deliver assessment and transition services for the NCLIFTSS Program.
- As a result, NC Medicaid expanded the existing independent assessment program to include the 1915(c) home and community-based services waivers to significantly improve coordination of Medicaid Long-Term Services and Supports (LTSS).
- Initiative to provide beneficiaries a long-requested single point of entry for accessing Medicaid LTSS and streamline processes between initial contact and service enrollment. This single point of entry is now branded as NCLIFTSS.
- NCLIFTSS (Linking Individuals & Families for Long Term Services & Support )



# Personal Care Services (PCS) and Operations

Accelerating  
Better  
Outcomes

Multidisciplinary  
Clinical Team

Stakeholder  
Engagement &  
Education Coordinator

Call Support Center

# Role of Acentra Health in PCS

As the state contractor for NCLIFTSS, Acentra Health is now responsible for:

- Processing PCS referrals
- Conducting independent assessment for individuals requesting personal care services
- Conducting quality assurance reviews
- Overseeing service plan management
- Operating a contact support center for beneficiaries, caregivers, and providers

Question:

What are Personal Care Services?



# Answer

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- State provided assistance with Activities of Daily Living (ADLs). ADLs include bathing, dressing, mobility, toileting, and eating.
- Services provided in the Medicaid beneficiary's primary private residence.
- Services provided by paraprofessional aides employed by licensed home care agencies, licensed adult care homes, or home staff in supervised living homes.
- The amount of prior-approved service is based on an assessment conducted by Comprehensive Independent Assessment Entity (CIAE) Acentra Health, to determine the beneficiary's ability to perform ADLs.



Question:

What services are and are not provided under Personal Care Services?



# Answer

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Services **covered** under PCS are:

- Assistance to help with qualifying ADLs
- Assistance with medications that treat medical conditions that effect the qualifying ADLs
- Assistance with devices directly linked to the qualifying ADLs



# Answer

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Services **not covered** under PCS are:

- Skilled nursing by Licensed Practical Nurse (LPN) or Registered Nurse (RN)
- Respite care
- Care for pets or animals
- Yard work
- Medical or non-medical transportation
- Financial Management
- Errands
- Companion sitting
- Services performed by beneficiary's legally responsible person, spouse, child, parent, grandchild, or equivalent step or in-law relationship to beneficiary



Question:

What is the eligibility criteria for PCS?



# Answer

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## **As described in Session Law 2023-306**

- Have active Medicaid
- Have a medical condition, cognitive impairment or disability that limits them from performing their activities of daily living
- Be considered medically stable
- Be under the care of their primary care physician or attending physician for the condition causing limitations
- Have seen their treating physician within the last 90 days
- Reside in a private living arrangement, or in a residential facility licensed by the State of North Carolina as an adult care home, a combination home, or a group home as a supervised living facility
- Not have a family member or caregiver who is willing and able to provide care



Question:

How many hours of Personal Care Services  
can I receive each month if  
approved?



# Answer

- **80 Hours**

- For a beneficiary who does not meet the criteria for Session Law 2013-306.

- **60 Hours**

- Early and Periodic Screening, Diagnosis and Treatment (EPSDT) on the initial assessment hour generation
- All EPSDT assessments go to NC Medicaid for final hour calculation/evaluation.

- **130 Hours**

- For a beneficiary who meets the criteria for Session Law 2013-306



# Question

How is the eligibility assessment for PCS completed?



# Answer

- The eligibility assessment, or independent assessment (IA), will be conducted by a clinical assessor using an assessment tool approved by NC Medicaid.
- The clinical assessor will combine observation, interviews, and simulation of Activities of Daily Living (ADLs), and review of beneficiary records to determine eligibility for PCS.

# Question

How can I prepare for the assessment?



# Answer

- The more information that can be provided at an assessment, the better.
- It is recommended that individuals who care for the beneficiary on a regular basis be in attendance to help speak to their ability to perform the activities of daily living on a regular day.
- Have any medical documentation that can speak to the beneficiary's physical abilities as well as all of their medications.
- The beneficiary will be asked to demonstrate their ability to perform the various activities of daily living. The beneficiary and caretakers should plan for the assessment to last 1-2 hours.



# Beneficiary Rights

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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.

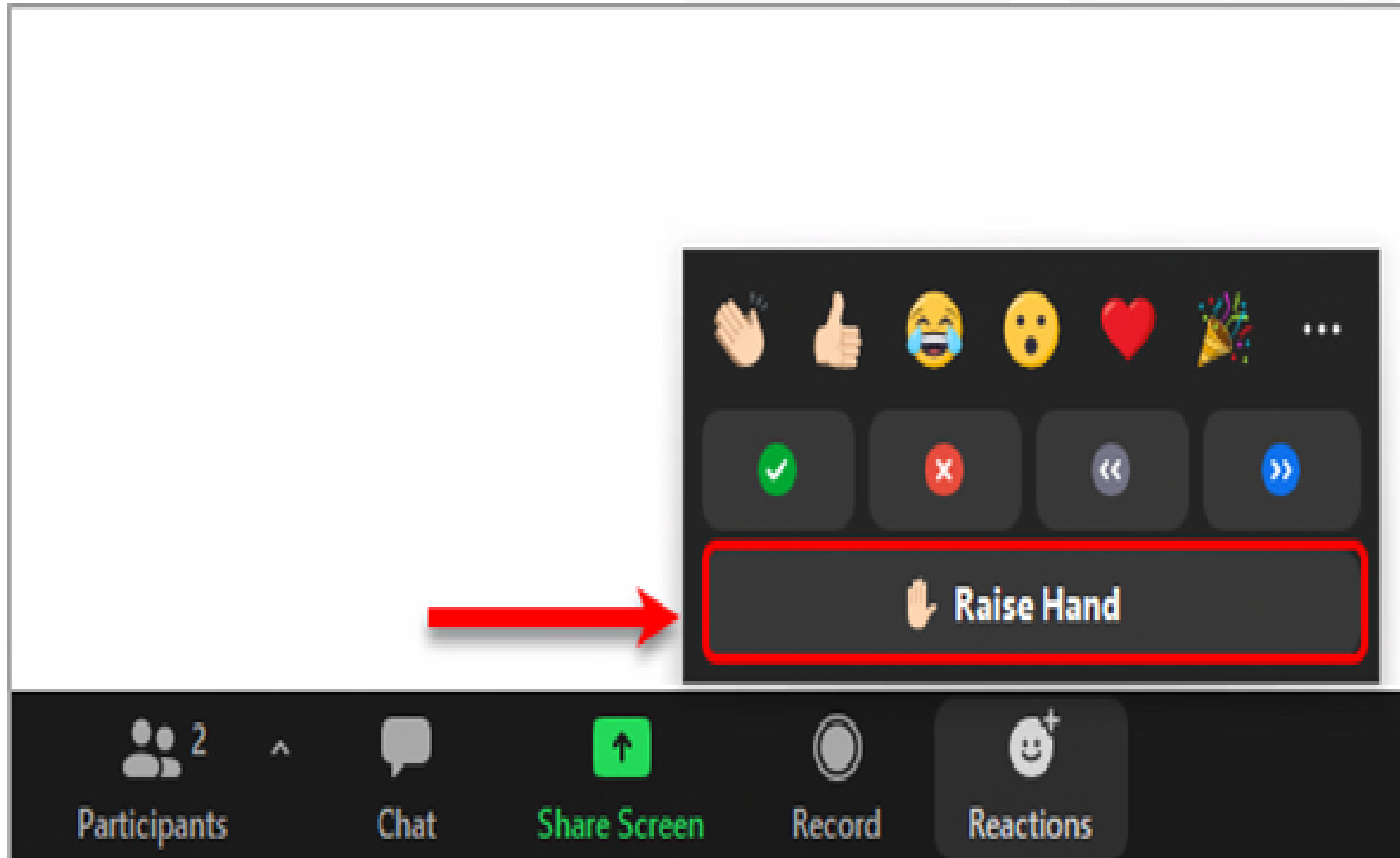


# Contact Support Center

- Questions? Call Acentra Health: 833-522-5429 (toll free) or 919-568-1717.
- PCS Fax: 833-521-2626
- PCS Expedited Fax: 833-551-2602
- Email address: [NCLIFTSS@Kepro.com](mailto:NCLIFTSS@Kepro.com)
- Website: [NCLIFTSS | PCS \(kepro.com\)](https://www.kepro.com/NCLIFTSS)



# Raise Hand Feature



# Questions & Answers

