



Pediatric Complex Care Assistant Frequently Asked Questions

- 1) **What are Pediatric Complex Care Assistant services?**
- A. Pediatric Complex Care Assistant (PCCA) services support Montana Health Care (Medicaid) members under the age of 21 who have medically complex needs, by compensating family caregivers for specialized care. Established under 37-2-603 of the Montana Code Annotated (MCA), in response to House Bill 449 (2023), these services fill care gaps without replacing existing programs such as Private Duty Nursing, Community First Choice Services (CFCS)/Personal Care Services (PCS), or Home Health services.
 - B. Based upon the agreement between the state of Montana and the Centers for Medicare & Medicaid, PCCAs do not:
 - a. Replace Private Duty Nursing (PDN) services.
 - b. Supplant Health Maintenance Activities available under Montana's Community First Choice Services/Personal Care Services (CFCS/PCS) Self Direct Programs.
 - c. Supplant Home Health Services.

Key Details

- A. PCCAs will work through an enrolled PCCA Montana Health Care service provider agency.
- B. Services are available only to Montana Health Care members who:
 - a. Meet the medical necessity requirements;
 - b. Have a documented pediatric complex care need; and
 - c. Have a physician-ordered and prior-authorized PCCA services.
- C. PCCAs must be licensed by the State of Montana Department of Labor and Industry to deliver these services.
- D. PCCA services are a new Medicaid state plan service, not a standalone program or a service under a Medicaid waiver.

2) When will PCCA services become available?

Services will become available once the administrative rule authorizing PCCA services is approved, and enrolled agencies are available. Provider agencies may need time to prepare before offering this service. Meetings with service provider agencies interested in enrolling as a PCCA service type provider (service type 49) are ongoing, to discuss this new service and plan for its implementation.

3) Who can have PCCA services?

To qualify for PCCA services, an individual must:

- A. Be under the age of 21 years.
- B. Have a parent, guardian, other family member, or kinship care or foster care provider who elects to participate, becomes licensed as a PCCA, and who is employed by a PCCA provider agency.
- C. Be eligible for Montana Health Care programs.
- D. Require pediatric complex care services that a PCCA can provide.
- E. Have a physician-ordered and prior approved PCCA service.

PCCA services must not duplicate other services the member is receiving; however, PCCA services, Personal Care Assistant (PCA) services and PDN can all be included in a single, person-centered service plan.

4) Who can provide PCCA services?

PCCA services can only be provided by individuals who:

- A. Hold a valid and current PCCA license.
- B. Are employed through a Montana Health Care PCCA-enrolled provider.

Not all provider agencies may provide PCCA services, nor are they required to do so.

5) Can a parent have multiple roles at the same time; for example, PCCA, Personal Care Assistant (PCA), and/or licensed nurse?

Yes, a parent can serve in multiple roles, such as PCCA, PCA, or appropriately licensed nurse. However, they may not provide more than one service at the same time. A person-centered care plan and service authorization will outline how the parent's time is divided, specifying the hours billed to each service. Montana Health Care does not reimburse provider agencies at an overtime rate for employees working more than 40 hours per week across multiple service types, such as PCCA, PCA, or nursing services.

6) Can both parents be a PCCA, and what are the hours?

Yes, both parents can be a PCCA and work different shifts. Hours or units of service provision will be based upon the services and number of units based upon the prior authorization for service. Montana Health Care does not have an overtime rate for PCCA services. It is likely service provider agencies employing PCCAs will not allow for overtime. While there's no overtime pay, Montana Healthcare Programs regulations permit PCCAs to provide services at any time of day, provided they do not exceed 24 hours, or 96 units, within a single day. Scheduling and use of the prior authorized units of time is negotiated between the service agency provider, the member, and their caregivers. Members may use their authorized number of hours [units] for PCCA services within the two-week pay period. Hours do not carry over, nor can they be banked.

7) What can a PCCA do?

Under 37-2-603, MCA, licensed PCCAs may perform specialized medical care and physician-ordered tasks that align with the individual's plan of care, as outlined below:

- A. Duties considered by the department to be equivalent to those of a certified nursing assistant (Health Maintenance Tasks (HMAs) as defined in MCA 37.8.103 and ARM 37.40.1001).

NOTE: For Medicaid reimbursement, CNA duties are not a reimbursable PCCA service. CNA is reimbursable under other Medicaid programs for which an individual may be qualified. (i.e. waiver).

- B. Medication administration.
- C. Tracheostomy care — providing suctioning, changing ties, changing tracheostomy tube for routine change, and caring for surrounding skin. Providing bag-mask ventilation in the event of an emergency. Emergently replacing the tracheostomy tube.
- D. Enteral care and therapy.
- E. Airway clearance therapies — oral (dental) suction to remove superficial oral secretions. Providing suctioning of superficial secretions in the oral cavity, including setup and cleaning of suction device; and
- F. Other services as allowed by the department put forth in rule, ARM 24.160.501 and ARM 24.160.505.

- a. Bowel care, including enema administration rectally or via an antegrade continence enema, and ostomy care.
- b. Wound care.
- c. Central-line care or IV fluid administration — enteral G-tube/J-tube feedings. Includes pump setup/discontinuation, and/or administering bolus feeds; does not include changing or replacing of equipment. Mixing feeds as directed by a physician or dietician.
- d. Airway management, including oxygen management — providing assistance in replacing oxygen tubing or nasal canula and setting oxygen at ordered flow rate, so long as the care is not in response to a respiratory event requiring the judgement and assessment of a nurse. Setting up, placing, and starting CPAP, BiPAP, or ventilator device. Changing ventilator settings or modes as per a physician order, and changing FiO2 if a physician orders to titrate.

8) What do I have to do to become a PCCA?

To obtain a PCCA license from the Montana Department of Labor (DLI), as outlined in 37-2-603, MCA, ARM 24.160.501, and ARM 24.160.505, applicants must complete the DLI online application and submit a PCCA Attestation form, MONTANA PEDIATRIC COMPLEX CARE ASSISTANT PROGRAM.

An applicant for licensure must have:

- A. Completed a DLI-approved training program and received a valid certificate from the training program; and/or
- B. Passed a hands-on, DLI-approved examination that demonstrates the applicant's competence.

The link to the online application is:

boards.bsd.dli.mt.gov/pediatric-complex-care-assistant-program/

Select “Apply for License under Professionals” for first time applications and “Renew” for subsequent years.

You will be directed to: aca-prod.accela.com/POL/Default.aspx, where you will need to create an account to access the public portal.

- C. As an applicant, you will create an account and apply online.
 - a. The online application will ask for demographic information (i.e. physical and mailing addresses, phone number, and email), background, and

personal history. Based on the answers provided, additional information may be requested, for example:

- i. A Social Security number or attestation of having one.
 - ii. An attestation indicating the applicant is the child's parent, guardian, other family member, or a kinship or foster care provider of the member (specific information about a child member will not be required).
- b. Once the DLI receives and reviews an application for PCCA licensure, the examiner will email the Physician Primary Care Provider Attestation form to the applicant. The applicant may print or email the attestation form to their provider for completion.
 - c. The provider completes the form and verifies that you, the applicant, have demonstrated competency in the PCCA services identified on the attestation form.
 - d. Once the provider signs off on the attestation form, you, the applicant, will then upload the signed form to your online account in the DLI portal. Alternatively, applicants may email their signed forms directly to the DLI licensure examiner. Uploading the form is preferred, as the examiner is automatically notified when they have a new document to review in their queue.

9) Is there a cost for the PCCA license?

Yes. To maintain licensure, PCCA holders must submit a \$25 annual renewal to the DLI. Applicants may amend a current license at no cost when a physician orders additional PCCA services due to changes in the member's complex medical care needs. The annual PCCA license fee is the responsibility of the person seeking licensure. Medicaid will not reimburse licensure costs.

10) What information is needed on hand for submitting an online application for a PCCA license?

In addition to demographic information (i.e. your physical and mailing addresses, phone number, and email), you will need to provide your background and personal history. Based upon your answers, you may be asked to supply additional information.

Additionally, you must either supply your Social Security number or submit an attestation confirming you have one.

A child's name will not be requested; however, the PCCA applicant must attest to being the child's parent, guardian, other family member, or a kinship or foster care provider.

11) What are the training requirements for PCCA certification and licensure?

To become certified and licensed as a PCCA, you must complete training and demonstrate competency in providing pediatric complex care. The training requirements include:

A. Competency Training and Evaluation:

- a. Training must be conducted by a licensed physician, physician assistant, or advanced practice registered in Montana or hospital involved in the child's care or by an approved training provider registered with DLI.
- b. The training program must certify that you are competent to perform the services for which you are licensed.
- c. Agency-Specific Training:
 - i. The provider agency that employs you may have additional training and evaluation processes specific to their operations.
 - ii. All training must comply with Montana Healthcare Programs regulations.

12) What is the ongoing oversight for PCCA services?

Provider agencies may conduct oversight to ensure health and safety, assess service needs, and coordinate with other service providers to maintain a person-centered care plan. The service provider agency will have oversight for timekeeping, Electronic Visitation Verification (EVV), Health Insurance Portability Accountability Act (HIPAA), etc., and all service provider agency employment requirements.

13) What are the steps I need to take once I become a licensed PCCA to get paid?

- A. Identify a Medicaid service provider agency who will hire you as a PCCA. It is unknown who the Medicaid service provider agencies will be enrolling in PCCA service delivery at this time. It is suggested that you contact agencies that provide private duty nursing services, home health services, and other "like" services.
- B. Become employed by the Medicaid PCCA service provider agency.
- C. Complete any additional hiring requirements of the provider agency. This will include the provider agency enrolling you as a Rendering Provider through the provider service agency so that Medicaid can be billed for PCCA services provided; and;

- D. Follow all agency requirements regarding documentation, onboarding, employment, time sheets, EVV, HIPAA, etc.

14) How will a service provider enroll to become a PCCA service providing entity?

Service provider agencies can enroll to deliver PCCA services by completing the Montana Medicaid provider enrollment process:

A. Enrollment Process:

- a. Visit the Montana Medicaid Provider Enrollment website, and enroll as an Organization, Group for PCCA Provider Type (49).
- b. Select taxonomy codes 251E00000X or 251J00000X and choose MT MCD HMK+ as the program for enrollment.
- c. At the location level, create a team selecting (or click) the Add TEAM button. The provider will enter the TEAM name (example: Billings PCCA) and effective date within the pop up. Each provider will enroll only one PCCA per location (Example: The provider has a presence in Billings, Helena and Missoula. Billings and Helena have PCCA members. The provider will enroll one TEAM for Billings location and one TEAM for Helena location. The Missoula location will not need a PCCA TEAM added until there are active members in that location).
- d. Specific Instructions:
 - i. The program will provide detailed guidance for agencies and Conduent to ensure proper enrollment under the correct provider type and conditions.
 - ii. Ensure the agency is prepared to hire and manage PCCAs per Montana Healthcare Programs requirements.
 - iii. When enrolling to provide PCCA services, PCCA licenses will need to be submitted in the section of enrollment that requests licenses and certifications of employees.
 - iv. The enrolled service provider agency will complete an attestation noting that they will assure PCCA licenses are current and in good standing. A review will be completed annually.
 - v. Upon enrollment the service provider agency can begin hiring PCCAs and conducting their agency specific training.

- 15) **Can nonfamily individuals who want to be PCCAs complete the competency evaluation instead of the training requirements? (for example, CNAs, EMTs, nursing students, other medical professionals, etc.)**

No. A pediatric complex care assistant may provide services only to an individual under 21 years of age for whom the care assistant is a parent, guardian, other family member, or a kinship care or foster care provider. Training is provided to the parent, guardian, other family member, or a kinship or foster care provider by the physician, pediatrician, or hospital who typically provides care to the child. The DLI currently does not have any registered training providers, so responsibility for training lies with the physician, pediatrician, or hospital.

- 16) **Can parents who are currently serving as a PCA switch to become a PCCA?**
Qualifying individuals who are serving as a PCA may become PCCAs when:

- A. They have completed training and comprehension requirements;
- B. They have obtained their DLI license;
- C. The physician-ordered PCCA services have been prior authorized for the service provider agency enrolled in the PCCA program; and
- D. The service provider agency hires the individual as a PCCA.

- 17) **How will PCCA hours be authorized?**

PCCA services must be prior-authorized.

The service provider will coordinate the prior-authorization process, not the family or the physician provider.

PCCA services are reimbursed per unit, with a maximum of 96 units (equivalent to 24 hours) allowed per day.

The Department may authorize a different number of service units than a provider requests. Federal regulations require Montana Healthcare Programs to authorize reimbursement only for the time required to perform an identified skilled task. Other services such as PCA, Home Health, etc. may be obtained under other programs the individual is eligible for, examples include Waiver, Self-Direct, etc.

The prior authorization (PA) process for PCCA hours includes the following steps:

- A. Request for Services:
 - a. The Service Provider Agency submits the PA form to the member's physician.
 - i. PA must have a National Provider Identifier (NPI) and all the other information required by CMS

- ii. The service provider agency tracks the PA.
 - b. All PCCA services must be supported by a physician's order and must be consistent with the individual's plan of care.
 - c. Upon the doctor providing the PCCA prescription/orders, signed PA and supporting documents, the service provider submits the PA for PCCA services through a third party, Mountain Pacific (MP).
 - d. The current PCCA license should be included with PA when submitted to the third-party contractor.
 - e. MP shall not approve or endorse any care plan that lacks such an order.
 - f. MP role is purely administrative and does not constitute the delegation of nursing tasks as defined under Montana law.
- B. Assessment: MP conducts an assessment to determine or verify the number of PCCA hours the member is eligible to receive based on medical necessity.
- a. The assessment will consider:
 - i. PCCA tasks.
 - ii. Other services the member receives (i.e., home health, PCA, PDN, etc.) Given that PCCA tasks may overlap with other services, MP will work with members to identify areas of duplication and streamline service provision.
 - b. During the assessment, MP will identify all medically necessary tasks that could be included in the PCCA authorization per the physician's order.
- C. Service Authorization:
- a. MP provides a service authorization to the provider agency, which then services can be implemented and billing for the service can be put in motion.
 - b. Requests must be renewed every 90 days during the first 6 months of service, and every 6 months thereafter, or at any time the condition of the member changes, resulting in a change to the amount of PCCA services required.
- D. Care Plan Development:
- a. The provider agency collaborates with the family, the PCCA, and other service partners to create a coordinated person-centered plan.

- b. The plan specifies the number of hours and the tasks the PCCA will perform based on their licensure and service authorization, avoiding service duplication.

18) Can the hours be adjusted between Private Duty Nursing and PCCA services?

To ensure the efficient and effective use of resources, and to avoid redundancy, all services must be evaluated to confirm that they do not replace private duty nursing (PDN) or duplicate services accessible through other Medicaid-funded initiatives or any other public or private programs.

If a physician determines a member's condition requires skilled nursing, PDN remains mandatory. PCCA services should only apply when a physician explicitly certifies that tasks are within a caregiver's training as a PCCA.

PCCA services may be utilized when private duty nursing (PDN) services are not available in the service area when such services align with the member's medical needs and goals. This policy aims to maximize the utility of available resources while delivering comprehensive and non-redundant services to our beneficiaries.

Please note, PDN services are not 1:1 with PCCA services.

19) How can PCCA hours be adjusted if a member has a change in their nursing or Personal Care Assistant (PCA) schedule?

If there is a care need to move hours from one service type to another, consideration will be given to the specific tasks, appropriateness, and potential service duplication.

To transfer hours between service types — such as from PCA to PCCA or vice versa — providers must request adjustments to both services' PAs, which will require physician orders. Any care tasks moved must align with the requirements of the service type receiving them.

Additionally, if a member is moving services from one authorization to another, each authorization must include enough applicable services to maintain program eligibility. For instance, if a PCCA or PCA provider becomes unavailable — due to a schedule change, vacation, provider loss, or other unplanned absence — and there is a need to increase PCCA hours, only care tasks appropriate for a PCCA may be added. Not all hours can be transferred directly; only tasks approved for PCCA services and required by the member may be moved between authorizations for the requested period. Adjusting a PA requires collaboration among the member or family, the physician, the PCCA provider agency, and other relevant service entities.

Adjusting the PA may take up to 14 days; however, the adjusted PAs for PCCA and provider may be dated retroactively, to account for the time when the change took

place. The PCCA must be licensed during this time, to provide the PCCA services. This adjustment can be retroactive to the date of the actual change, to ensure no gaps in billing or care. Please note, the PA for self-directed PCA services cannot be dated retroactively. Additionally, because some situations require a physician's signature, the process may take longer.

A PA is required to transfer hours from one PCCA service authorization to another service. The request should be submitted through the agency providing the PCCA services and employing the PCCA. Changes in condition may warrant a request to increase or decrease PCCA services.

20) Can PCCAs work overnight hours?

Montana Healthcare Programs regulations do not restrict the hours when a PCCA may provide services. Provider agencies will work with their employees to establish schedules based on the member's care needs, the PA, and plan of care. Keep in mind, Montana Health Care Programs do not have an overtime rate for PCCA services, and service provider agencies are unlikely to provide overtime above and beyond a 40-hour work week.

21) Will PCCAs be able to work overtime?

Montana Health Care does not reimburse provider agencies at an overtime rate for employees working more than 40 hours per week across multiple service types, such as PCCA, PCA, or nursing services.

22) Can PCCAs accompany a member to the hospital?

Montana Healthcare Programs cannot reimburse PCCA services while a member is admitted to or is under the care of the hospital, as this would be considered a duplication of services. However, Montana Healthcare Programs can reimburse PCCA services accompanying a member to the hospital as medically necessary, until the member is under the care of the hospital staff.

23) What are the supervision requirements for PCCAs?

PCCAs are licensed professionals and must renew their license annually. Upon initial hire and for each renewal, they are required to provide proof of licensure to their employing service provider. As the employer of the PCCA, the service provider is responsible for overseeing the administrative requirements for licensed professionals hired by the agency. This includes providing standard supervision to ensure compliance with timely reporting, service documentation, and billing procedures. The provider must also ensure that home environment safety standards are met. In addition, the provider is responsible for delivering HIPAA and confidentiality training, along with other required training as part of the agency's

onboarding process. The employing service provider agency will approve the PCCA's timesheet for billing the PCCA services.

Service provider agencies may conduct an initial background check. They must review the List of Excluded Individuals and Entities (LEIE) as provided by the Office of Inspector General (OIG) of the U.S. Department of Health and Human Services, or other applicable lists excluding individuals or entities from participating in Montana Healthcare Programs under state or federal law.

It is the responsibility of the service agency provider to be knowledgeable about sections of ARM that relate to their provider type, provider policies, and covered services.

The service provider agency does not provide clinical oversight of the PCCAs employed by the organization. A licensed PCCA is an "other licensed professional" and assumes their own liability for service provision.

24) Can supervisory visits be performed by agency nurses already working in the home, or must it be a separate nurse supervisor?

A nurse providing services in the home may not conduct supervisory visits. A licensed PCCA cannot be supervised by a nurse per the Nurse Practice Act. PCCA services are not considered "delegated tasks" under the Nurse Practice Act.

25) Can supervision be provided virtually?

The employing service provider supervisory visit may be made by using a HIPAA-compliant, two-way audio-video telecommunications technology that allows for real-time interaction between the service provider agency, the member, and representative as needed.

26) Can PCCA training requirements be fulfilled online or remotely?

PCCA-specific tasks must be certified in person by a physician or DLI-approved training program for PCCA licensing.

27) Can any portion of the training be completed in a simulation lab?

The location of the PCCA training is up to the discretion of the primary care provider of the individual for whom the licensee will provide care, or an approved and registered training provider specially equipped to provide training for pediatric complex care.

28) How much will a PCCA be paid? Will all agencies pay the same amount?

Montana Healthcare Programs will reimburse provider agencies for PCCA services at the rates as approved in ARM. The proposed bill rate for the PCCA service is \$10.78 per 15-minute unit (\$43.12 per hour). The employed PCCA gross wage is

subject to applicable taxes and any elected employee contributions or wage deductions, such as 401(k) withholdings. The service provider agency will set their wages based upon the aforementioned. Provider agency wage rates for PCCA services may vary. The PCCA rates are subject to review every two years and may be amended through rate amendments and subsequent ARM hearings.

29) Will family caregivers hired as PCCAs be required to submit documentation for PCCA hours performed such as Electronic Visit Verification (EVV)?

Yes. EVV is required. All Montana Healthcare Programs services must include documentation of services provided. Provider agencies are responsible for developing their own documentation templates for PCCAs to complete. The development of a care check list to reduce documentation burdens for families is in discussion; however, implementation is at the discretion of each individual agency. Agencies are also responsible for submitting documentation to MP for a member's PCCA assessment or reassessment.

30) Which agencies will be providing PCCA services?

Montana Healthcare Programs is collaborating with provider agencies who are interested in providing PCCA services. Agencies are not identified as PCCA providers until they complete the enrollment service.

31) What is the difference between a PCCA, a home health aide (HHA), and a PCA?

The following chart and definitions describe the differences between these three service types:

Service	Care Tasks	Training	Supervision
PCCA	Limited to services listed in 37-2-603, MCA and ARM 24.160.501 and ARM 24.160.505	Must meet licensure requirements as outlined in 37-2-603, MCA	Administrative supervision
HHA	ADLs, Incidental Services	Must meet HHA qualifications as outlined in 42 CFR 484.80 (75-hour training required)	Every 14 days if receiving skilled care from the agency. Every 60 days if the agency provides HHA services.

PCA	ADLs and Incidental activities of daily living (IADLs)	Four-hour administrative training	No supervision – this is a consumer-directed program.
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Definitions:

Activities of Daily Living (ADLs): activities related to personal care, specifically bathing, grooming, dressing, toileting/continence, transferring/ambulation, and eating.

Instrumental Activities of Daily Living (IADLs): activities that are instrumental to the care of the member's health and are performed by a PCA, such as meal preparation and clean-up, housekeeping, laundry, shopping, maintenance of medical equipment, transportation to medical providers, and completion of paperwork.

Incidental Services: additional services that may be needed when ADLs are performed (for example, light cleaning, preparing a meal, removing trash).

Enhanced Care Services: specific set of tasks that PCCAs may provide as outlined on their PCCA certification.

For more details, please refer to FAQ #7.

32) Can members receive both PCCA services and PCA services?

Montana Healthcare Programs members can have both PCCA services and PCA services if they meet the medical-necessity criteria for both services AND do not have a duplication of services.

The number of hours authorized by the Department may be different than the number of hours the provider requested. Federal regulations require Montana Healthcare Programs to authorize reimbursement only for the time required to perform the identified skilled task for PCCA.

33) Can unused PCCA hours accumulate and be used at any time during the PA period? For example, if the PA span is one year, and the authorized services or times are for a two-week period, can I move unused hours to another week or month?

No. The authorization for services is on a biweekly basis only.

34) How do we document the hours the PCCA is working with a member, distinguishing between PCCA and parental responsibility?

Documentation should reflect only PCCA services.

35) Are PCCA services meant to replace PDN services?

No. PCCA services are not meant to replace PDN services. PCCAs are not authorized to provide care that requires skilled nursing. The ordering medical provider determines which tasks require skilled nursing as opposed to the PCCA.

36) PCCA Supervision Requirements:

- A. Ensure the authorized PCCA services align with the PCCA licensure. Changes in member condition may require the licensee to obtain updated certification.
- B. The service provider agency must ensure the following information is documented and maintained:
 - a. PCCA licensure & employment
 - i. Each employed PCCA holds a current license, renewed annually.
 - ii. Documentation verifies each PCCA meets licensure criteria under 37-2-603, MCA.
 - iii. The agency serves as the employer of record for PCCAs for payroll and federal hiring purposes
 - b. Program compliance
 - i. Documentation and follow-up processes are in place when a member receiving PCCA services does not comply with program requirements.
 - ii. Oversight staff are identified and verified through proper documentation.
 - iii. All PCCAs comply with EVV requirements.
 - c. Member support
 - i. Members are informed of PCCA service requirements.
 - ii. Resources are provided to help members develop backup service plans, both paid and unpaid.
 - d. Person-centered planning
 - i. A Person-Centered Plan (PCP) is developed upon admission.
 - ii. The PCP is reviewed and revised when the member's condition changes, or PCCA or HMA services are added.

37) How is a PCCA claim paid?

The service provider agency will follow the standard Medicaid claims process using the provider portal claim site: claims and Provider Portal: Home OMMS MT Portal. The service provider agency will fall under the category of provider billing a team.

The state is currently updating the provider enrollment system for this new provider type. The claims processing system will need to be updated (this request has been submitted to Conduent); guidance or direction for the enrolling agencies and Conduent on how to enroll PCCA providers is being worked through; procedure codes for billing and billing rules and fee schedules are being drafted, and the provider manual pages and other rules for PCCA are being drafted.

38) Why is Montana Healthcare Programs creating PCCA services?

Montana Healthcare Programs created this new service to establish a paid family caregiver model and expand support for pediatric members. Given the ongoing nursing workforce shortage, many families have been providing significant care to members. Montana Healthcare Programs are committed to continuing work on initiatives to bolster the provider workforce.

39) As a kinship care or foster care parent of a pediatric Montana Healthcare Member, what do I need for PCCA licensure when there may be multiple children in the home having complex pediatric care needs?

In the case of a member in kinship care or a foster care home, the foster care provider only needs one PCCA license, regardless of the number of children who are members with complex pediatric care needs residing within the home.

For licensure, the PCCA applicant must provide an attestation from the provider and indicate the training they are certified to perform. The certified PCCA services are displayed on the license certificate.

In situations where foster care members in a foster care home do not have the same medical provider, the PCCA licensee can either obtain training from their individual medical care providers or complete an available training program from a Montana DLI-registered training provider. The Montana DLI can add additional PCCA service training and certifications to PCCA licensure.

While a PCCA is only required to have one PCCA license for all eligible members in a foster care home, each individual member will have their own PA for PCCA services. The PCCA license must have the required certifications noted on their license for the PA services. When it comes to EVV and claim submission for reimbursement, each will be based upon the individual. For example, if two (or more) foster care members receive PCCA services, the PCCA will need to schedule, clock in, and clock out for each child. Grouping services for multiple members is not allowed for EVV or for reimbursement of claims. The service provider agency will submit claims based upon the individual services provided to an individual member.

40) Is eligibility for Montana Health Care Programs (Montana's Medicaid) required to continue receiving PCCA services if my household income changes, and the member no longer qualifies?

Eligibility must be maintained in accordance with the requirements to continue having PCCA services through Montana Healthcare programs.

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