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Medicaid Audit Protocol For Personal Care Services **OMIG Identifies Over 20 Areas To Evaluate Program Compliance**

Last month, New York's Office of the Medicaid Inspector General ([OMIG](#)) released an audit protocol for Personal Care Assistance (PCA) providers. This protocol is not a substitute for actual compliance with federal and/or state legal mandates, and provider contracts with local county social services departments (LDSS). However, OMIG published this information in order to assist providers in complying with Medicaid requirements, as well as understanding what they can expect during audits.

Some key elements of the protocol include the following:

- A Plan of Care must be documented at least once every six months. It should identify the type, frequency, and duration of any PCA services provided to a patient. Agencies must have billing hour/service provision documentation consistent with that Plan of Care and any applicable LDSS contract. Proof of LDSS authorization is required for any billed services beyond what the Plan of Care calls for.
- Unless otherwise specified in the Plan of Care or the LDSS contract, a registered nurse must visit each case every 90 days, including an orientation visit before any services are provided. Appropriate documentation includes a written report for each supervision visit, along with the assigned aide's time records because he/she must be present for each scheduled visit.
- All claims for reimbursement must be made within 90 days of service unless a valid exception code is used to justify an untimely submission. A provider should also demonstrate that it has fully applied each patient's excess income spend-down before billing Medicaid for any services it provided.
- Providers must have documentation showing that their personal care aides meet Medicaid's requirements in several different areas. These include training, personnel and criminal records, performance assessments, medical exams, and continuing education.

OMIG's list of audit protocol can be viewed [here](#). Providers can expect that the enumerated items will be the focus of OMIG's review when auditing a personal care program.

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