



June 27, 2016

Announcement 1174

## **Attention Provider Types 30 and 83: Tips Regarding Reassessment Requests and Contact Information**

Please be advised that a reassessment request for a significant change in condition may result in an increase, a decrease or no change in the weekly personal care service hours. Requests for a reassessment should be accompanied by documentation of a significant change in condition that occurred after the last assessment and would directly impact the recipient's ability to perform their personal care.

When completing the [Authorization Request for Personal Care Services \(PCS\) form \(FA-24\)](#) for a significant change in condition reassessment or annual reassessment, please verify the accuracy of the contact information for the recipient. Providing inaccurate contact information for the recipient or the alternate contact may cause a delay in scheduling the functional assessment, which may result in delayed authorizations and potential denials for continued services. PCS providers contacted by a physical or occupational therapist for the purpose of scheduling a functional assessment are expected to assist the therapist by providing accurate contact information for the recipient.