



# Review of Consumer Assessment to Manage PCA Services

## Introduction

The Personal Care Management (PCM) agency should use this form to review the consumer's ability to manage Personal Care Attendant (PCA) services at the time of reevaluation and before the prior authorization for PCA services expires. This form should be attached to the Consumer Assessment to Manage PCA Services.

## 1<sup>st</sup> Review

Date of Review

Date of most recent Consumer Assessment to Manage PCA Services

Name and Title of Assessor

### Check One:

- ☐ I have reviewed the most recent Consumer Assessment to Manage PCA Services and there have been no changes.
- ☐ I have reviewed the Consumer Assessment to Manage PCA Services and there have been changes that impact the consumer's ability to manage the PCA program. (If this box is checked, conduct a complete Consumer Assessment to Manage PCA Services.)

## 2<sup>nd</sup> Review

Date of Review

Date of most recent Consumer Assessment to Manage PCA Services

Name and Title of Assessor

### Check One:

- ☐ I have reviewed the most recent Consumer Assessment to Manage PCA Services and there have been no changes.
- ☐ I have reviewed the Consumer Assessment to Manage PCA Services and there have been changes that impact the consumer's ability to manage the PCA program. (If this box is checked, conduct a complete Consumer Assessment to Manage PCA Services.)

## 3<sup>rd</sup> Review

Date of Review

Date of most recent Consumer Assessment to Manage PCA Services

Name and Title of Assessor

### Check One:

- ☐ I have reviewed the most recent Consumer Assessment to Manage PCA Services and there have been no changes.
- ☐ I have reviewed the Consumer Assessment to Manage PCA Services and there have been changes that impact the consumer's ability to manage the PCA program. (If this box is checked, conduct a complete Consumer Assessment to Manage PCA Services.)

## 4<sup>th</sup> Review

Date of Review

Date of most recent Consumer Assessment to Manage PCA Services

Name and Title of Assessor

### Check One:

- ☐ I have reviewed the most recent Consumer Assessment to Manage PCA Services and there have been no changes.
- ☐ I have reviewed the Consumer Assessment to Manage PCA Services and there have been changes that impact the consumer's ability to manage the PCA program. (If this box is checked, conduct a complete Consumer Assessment to Manage PCA Services.)