

2026 iCare Health Plan

BC+/SSI PCW Personal Needs Assessment

Frequently Asked Questions

1. What is changing?

Beginning March 1, 2026, iCare will require initial and renewal Personal Care Worker (PCW) service requests seeking three or more hours per day to include a personal needs assessment completed by an approved personal needs assessor prior to submitting the Prior Authorization request.

2. Who is impacted?

This requirement applies to **iCare BadgerCare and SSI members** who meet any of the following criteria:

- Any PCW request of three or more hours per day,
- Changing personal care agencies and requesting three or more hours per day,
- Requesting three or more hours per day following an inactive prior authorization of 30 days or more.

Please note: This requirement is applicable solely to iCare members. If a member is enrolled in a different health plan, the Personal Care Worker (PCW) agency must adhere to the personal care service requirements established by that specific health plan.

3. When does this start?

The program will begin on March 1, 2026.

4. Who are the personal needs assessors?

For iCare BadgerCare Plus and SSI members residing WITHIN Kenosha, Milwaukee, Ozaukee, Racine, Washington, and Waukesha counties, assessments must be completed by either Independence First or Holistic Home Health Care.

Independence First:

- Email: IC_Assessments@IndependenceFirst.org
- Phone Support: (414) 291-7520

Link: [Link to Independence First referral form](#)

Holistic Home Health Care:

- Email: Tessa.Decker@Holistichh.com
- Phone Support: (414) 231-3130

For *iCare* BadgerCare Plus and SSI members residing OUTSIDE OF Kenosha, Milwaukee, Ozaukee, Racine, Washington, and Waukesha counties, assessments must be completed by *iCare* PNA assessors:

- Email: iCarePCWPNA@iCareHealthPlan.org

5. Are assessments required for requests of three or more hours per day for fewer than seven days a week?

Yes. Any request for three or more hours in a single day, regardless of the number of days per week, requires a personal needs assessment.

6. Where can providers and members find more information?

Detailed guides and further information are available on the *iCare* website: www.icarehealthplan.org/PCW.

7. Where can PCW providers direct prior authorization questions?

iCare Prior Authorization Department

General Prior Authorization questions: Phone: 414-299-5539

Fax: 414-231-1026

Email: iCarePCW@icarehealthplan.org

8. What is the new PCW service request referral process?

For service requests effective on or after March 1, 2026:

1. For initial and renewal service requests for personal care services, the PCW agency schedules an in-person assessment and completes the Personal Care Screening Tool (PCST).
2. If requesting three or more hours per day, the PCW agency must contact a personal needs assessor (Holistic Home Health, Independence First, or *iCare* PNA screeners) to conduct an additional PCST.
3. The PCW agency transfers the PCST to the personal needs assessor.
4. The personal needs assessor will contact the member to schedule an in-person visit within 7 days.
5. Upon completion, the PCST is transferred back to the PCW agency.
6. PCW RN develops the Plan of Care (POC) based on the personal needs assessor's PCST.
7. POC is sent to the prescribing provider for signature.
8. PCW agency submits the prior authorization request to *iCare* with all required documentation.

9. What documentation is required for PCW service requests?

- Completed PCW Prior Authorization Request Form
- Plan of Care with Provider Order (signed and dated within 60 days)
- Supporting clinical documentation (including in-person provider visit within 60 days)
- Documentation from relevant specialists
- Completed PCST from the personal needs assessor, dated on the day of assessment
- Completed EVV Form (f02717) Live-In Worker Identification (if applicable; must submit proof of residency)

10. Do PCW agencies need to transfer the PCST to the Personal Needs Assessor?

Yes. The PCW agency transfers the PCST in the DHS portal to the personal needs assessment agency, which then transfers it back upon completion.

11. Which assessment should I use to build the Plan of Care (POC or 485)?

The Plan of Care (POC/485) should reflect the assessment completed by the Personal Needs Assessment agency.

12. How is timely completion of assessments ensured?

iCare contracts require the Personal Needs Assessor to complete assessments within 7 days of contact from the PCW agency.

13. How will PCW agencies be notified when the assessment is complete?

The Personal Care Agency will receive an email or fax from the Personal Needs Assessor with confirmation and details of the visit.