



Missouri Department of Health and Senior Services

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PM-11-06

December 2, 2010

MEMORANDUM FOR HOME AND COMMUNITY BASED CARE PROVIDERS

FROM: Celesta Hartgraves, Director
Division of Senior and Disability Services

SUBJECT: Authorized Nurse Visit Reimbursement

The Department of Social Services (DSS), MO HealthNet Division (MHD) reviewed the process by which the Department of Health and Senior Services (DHSS), Division of Senior and Disability Services (DSDS) administers the Personal Care Program (PC). MHD compared this process with Missouri's State Plan Personal Care Program approved by and on file with the Centers for Medicare & Medicaid Services (CMS). It has been determined by MHD that certain Authorized Nurse Visits currently authorized by DSDS are beyond the scope of the approved State Plan Personal Care Services Program.

Under the direction from MHD, DSDS shall no longer authorize for the reimbursement of the following Authorized Nurse Visits:

- As a standalone service. One of the primary purposes of an Authorized Nurse Visit is to provide nurse oversight of the services rendered by the Personal Care Aide. Therefore, there must be a personal care service (Basic Personal Care – Agency Model, Advanced Personal Care – Agency Model, or Personal Care Assistance – Consumer-Directed Model) included in the care plan as well. This includes the two (2) annual nurse visits.
- Development of Community Partner Referrals (CPR). DSDS shall no longer authorize for reimbursement of an Authorized Nurse Visit for the determination of whether or not an individual is eligible for HCBS through the CPR process. In an effort to assist DSDS staff in expediting the authorization of Home and Community Based Services (HCBS), HCBS providers may continue to submit CPRs, completed by a nurse or physician.

As DSDS staff are reviewing current care plans that include a standalone Authorized Nurse Visit, DSDS staff shall take appropriate action. The HCBS provider will be contacted accordingly.

As a result of MHD's review, DSDS has revised the form that is to be completed for all participants receiving monthly and semi-annual (General Health Evaluation) Authorized Nurse Visits. The revised form and instructions are included with this memo, and can also be located at the following link:
<http://www.dhss.mo.gov/seniors/hcbs/clinicalnurseassess.php>.

www.dhss.mo.gov

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In addition, the information contained in PM-11-05 regarding prefilling certain brand names of insulin will be adhered to. It is not DSDS' intent to say that physicians can no longer prescribe these types of insulin's. As stated in PM-11-05, based on manufacturers' recommendations along with the concurrence of Pharmacy and Clinical Services staff in MHD, Medicaid dollars will not be authorized to reimburse for pre-filling syringes with certain types of insulin.

- If a physician prescribes a different insulin and the pharmacy's submission of the claim hits against an early refill edit in MHD's claim system, pharmacy staff can contact MHD's Pharmacy help desk for approval of the early refill.
- Visually impaired participants may contact DSS' Rehabilitation Services for the Blind for assistance with different types of insulin administration devices. Information on this service can be accessed at: <http://www.dss.mo.gov/fsd/rsb/index.htm>, by calling 1-800-592-6004, or by emailing askrsb@dss.mo.gov.

HCBS provider staff should contact the appropriate Regional Evaluation Team regarding current participants who utilize any of the brands listed in PM-11-05.

Any questions regarding this memorandum should be directed to the Bureau of Program Integrity via e-mail at programintegrity@dhss.mo.gov or by phone at 573/526-8557.

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CC: Distribution List 3