

Community Pathways – Draft Proposal

Service Type: Other

Service (Name): Skilled Nursing

Alternative Service Title: **SHORT TERM AND INTERMITTENT NURSING SERVICES**

HCBS Taxonomy:

Check as applicable

Service is included in approved waiver. There is no change in service specifications.

Service is included in approved waiver. The service specifications have been modified.

Service is not included in the approved waiver

Service Definition:

- A. Short Term and Intermittent Nursing Services are skilled nursing tasks provided by a Registered Nurse (RN) or Licensed Practical Nurse (LPN) in accordance with COMAR 10.27.11. 03, .04, .05, and .06.

SERVICE REQUIREMENTS:

- A. The recipient of service is not receiving or entitled to receive the licensed nursing service from other state Medicaid services (e.g., REM, Model Waiver, Home Health), Medicare, Private insurance or other program from which licensed nursing services could be received.
- B. The licensed nursing service must be cost effective when viewed as a part of the whole service package provided for the individual based on review of alternative delivery systems for this service.
- C. Service is not provided in hospital, nursing/rehabilitation facility, residential treatment center or other facility where nursing services are included in the living arrangement.
- D. Short Term and Intermittent Nursing Services are available for individual self-directed services and individuals receiving services in a DDA licensed site.
- E. Skilled nursing tasks must:
1. Be assessed by the RN;
 2. Be predictable so the nurse may be regularly scheduled to perform the task ;
 3. Be completed within a four (4) hour period of time per day; and
 4. Be assessed by the RN that the need for the service will reasonably end within a three (3) month time period.
- F. Service does not include:
1. The need for licensed nursing service assessed as a long term need (greater than 3 month duration);
 2. Licensed nursing services that are short-term but require greater than 4 hours a day to perform; and
 3. Unpredictable licensed nursing services or to services needed as the situation arises (i.e. PRN services).

- G. In order to access services, the following criteria must be met:
 1. Skilled nursing task must be determined to be predictable as per COMAR 10.27.11.;
 2. Individual must require license nursing for the performance of skilled task as determined by a Developmental Disabilities Registered Nurse Case Manager/Delegating Nurse (RN CM/DN); and
 3. The recipient of services is not hiring their own support staff as per the exemption from delegation as found in COMAR 10.27.11.01 D.
- H. The individual receiving services must be an adult of the age of 21.
- I. The program will not reimburse services provided through the school system, foster care, or other resources.
- J. This waiver service is only provided to individuals age 21 and over. All medically necessary Short Term and Intermittent Nursing Services for children under age 21 are covered in the state plan pursuant to the EPSDT benefit.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

1. Part-time services up to 4 hours per day or less for no more than 3 months.
2. Short-term services up to 3 months or less for no more than 4 hours in a day.
3. Intermittent services up to 4 hours a day or less for no more than 3 months.

Service Delivery Method (check each that applies)

- Participant Directed as specified in Appendix E
 Provider Managed

Specify whether the service may be provided by (check all that applies):

- Legally Responsible Person
 Relative
 Legal Guardian

Provider Specifications: (Instructions list the following for each type of provider that can deliver the services):

Provider Category	Provider Type Title
Individual	Individual for participants Self-Directing Services
Agency	DDA Licensed Services Provider

Provider Category: Individual

Provider Type: Individual for participants Self-Directing Services

Provider Qualifications License (specify):

License (specify):

Registered Nurse must possess valid Maryland and/or Compact Registered Nurse license

Certificate (specify):

Other Standard (specify):

Registered Nurse must:

1. Employed or under contract with the Licensed Service Provider
2. Possess valid Maryland and/or Compact Registered Nurse license
3. Successfully complete the DDA RN Case Manager/Delegating Nurse (CM/DN) Orientation
4. Be active on the DDA registry of DD RN CM/DNs
5. Attend DDA mandatory trainings
6. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year

Licensed Practical Nurse must:

1. Work under the license of the Registered Nurse
2. Possess valid Maryland and/or Compact Licensed Practical Nurse license
3. Attend DDA mandatory trainings
4. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year

Verification of Provider Qualifications Entity Responsible for Verification:

- Fiscal Management Services Provider

Frequency of Verification:

- Prior to service delivery

Provider Category: Agency

Provider Type: DDA Licensed Services Provider

Provider Qualifications License (specify):

License (specify):

DDA Licensed Services Provider as per COMAR 10.22.02

Certificate (specify):

Other Standard (specify):

Registered Nurse must:

1. Be employed or under contract with the Licensed Service Provider
2. Possess valid Maryland and/or Compact Registered Nurse license
3. Successfully complete the DDA RN Case Manager/Delegating Nurse (CM/DN) Orientation
4. Be active on the DDA registry of DD RN CM/DNs

5. Attend DDA mandatory trainings
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**Verification of Provider Qualifications Entity
Responsible for Verification:**

- DDA for verification of DDA Licensed provider
- Providers for verification of Registered Nurse and Licensed Practical Nurse qualifications

Frequency of Verification:

- DDA - annually
- Providers – prior to service delivery

Amendment DRAFT