

Community Pathways – Revised Draft Proposal

Service Type: Other

Service (Name): Skilled Nursing

Alternative Service Title: NURSE CASE MANAGEMENT AND DELEGATION SERVICES (CM/DN)

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. Nurse Case Management and Delegation Services provides participants a licensed Registered Nurse (the “RN Case Manager & Delegating Nurse” or “RN CM/DN”) who: (1) provides health case management services (as defined below); and (2) delegates nursing tasks for an unlicensed individual to perform acts that may otherwise be performed only by a RN or Licensed Practical Nurse (LPN), as appropriate and in accordance with applicable regulations.

B. At a minimum, Nurse Health Case Management services includes:

1. Performance of a comprehensive nursing assessment of the participant identifying his or her health, medical appointment, and nursing needs;
2. Review of the Health Risk Screening Tool (HRST) at Level 3 or above, both on an annual basis and when any significant changes in the health of the participant occurs, to assist the participant to understand his or her health needs and to develop a plan for obtaining health services in the community;
3. Completion of the Medication Administration Screening Tool, both on an annual basis and when any significant changes in the health of the participant occurs, to determine the level of support needed for medication administration;
4. Review the participant’s health services and supports to promote quality client outcomes and cost effective care according to the Maryland Board of Nursing regulations;
5. Providing recommendations to the participant, caregivers under delegation of the RN, and the team for health care services that are available in the community;
6. Communicating with the participant and his or her person-centered planning team members in order that the team can coordinate services and supports to meet the participant’s health needs;
7. Develop health care plans and protocols, as needed, that direct the paid direct support staff in the provision of health services to be performed that include (a) administration of medications, (b) performance of medical and nursing treatments, (c) activities of daily living (ADL) performance, and (d) identifying and intervening in an emergency;

8. Completes training, supervision, evaluation and remediation on all health services provided under the delegation of the RN by the paid staff as identified in the Nursing Care Plans;
9. Monitoring services delivered under delegation of the RN by direct support staff for compliance with the Nursing Care Plan; and,
10. Monitoring health data obtained by direct support staff under the delegation of the RN and as directed in the Nursing Care Plan.

C. Delegation of Nursing Tasks services includes:

1. Assessment of (a) the needs and abilities of the participant; (b) direct care staff performance of delegated nursing tasks; and (c) the environment of service or care delivery;
2. Delegation of the performance of nursing tasks (i.e., acts of a licensed nurse that include medication administration and treatment administration) to unlicensed direct care staff that may be Certified Medication Technicians (“CMT”), Certified Nursing Assistant (“CNA”), or other Unlicensed Assistive Personnel (“UAP”) in accordance with applicable Maryland Board of Nursing regulations;
3. Training, supervision, and remediation of unlicensed direct care staff who provide health services under the delegation of the RN. (e.g., administration of medication, treatments, and Activities of Daily Living (ADL) care, health monitoring) as required by applicable Maryland Board of Nursing regulations; and,
4. Provision of On-Call service, to paid direct support staff who are performing delegated nursing tasks, while delegation is occurring, for up to 24 hours per day, 365 days per year as required by applicable Maryland Board of Nursing regulations.

D. In provision of Nurse Health Case Management and Delegation Services, the RN CM/DN will collaborate with the DDA licensed provider agency or Self-Directed Service participant in the development of policies and procedures required for delegation of any nursing tasks in accordance with COMAR 10.27.11.

SERVICE REQUIREMENTS:

- A. A participant may qualify for this service if he or she is either: (1) receiving services via the Traditional Services delivery model at a DDA-licensed community provider site, including but not limited to residential, day, or employment services or; (2) receiving Personal Support services; or (3) enrolled in the Self-Directed Services Program.
- B. A participant cannot qualify for or receive this service if the participant is in a placement where nursing services are provided as part of the services, including but not limited to a hospital, a nursing or rehabilitation facility or when Rare and Expensive Medicine (REM) is providing staff for the provision of nursing and health services.
- C. In order to access services, the following criteria must be met:
 1. Participant’s health conditions must be determined by the RN CM/DN to meet delegation criteria (be chronic, stable, routine, predictable and uncomplicated) and nursing tasks are assessed to be eligible for delegation as per the Maryland Board of Nursing regulations COMAR 10.27.11;

2. Participant must require delegation as assessed by the RN as being unable to perform his or her own care. This includes the use of the Medication Administration Screening Tool to determine the need for delegation of medication.
 3. The RN CM/DN has determined that all tasks and skills required to be performed or assisted with are delegable and the interval of the RN CM/DN's assessment, training, and supervision allow for the safe delivery of delegated nursing services in accordance with Maryland Board of Nursing regulations, including but not limited to COMAR 10.27.11.03, 10.27.11.04, 10.27.11.05.
- D. Under this service: RN CM/DN must assess the participant and his or her staff, the environment, and care plan at least once every 45 days, or more often as indicated by the participant's health condition, in accordance with the Maryland Board of Nursing regulations including but not limited to COMAR 10.27.11. All resulting revisions, recommendations, remediation and training completed must be documented by the RN CM/DN.
- E. RN may delegate performance of nursing tasks to the participant's appropriately trained and/or certified paid care givers which may include spouse, parent, legal guardian, siblings, adult children, and licensed provider agency staff. When the delegation is for medication administration, the paid caregiver must be a CMT.
- F. A relative, legal guardian, or legally responsible person, as defined in Appendix C-2, may not be paid to provide Nurse Case Management and Delegation Services.
- G. Prior to accessing DDA funding for this service, all other available and appropriate funding sources, including but not limited to those offered by Maryland Medicaid State Plan, Division of Rehabilitation Services ("DORS"), State Department of Education, and Department of Human Services, must be explored and exhausted. These efforts must be documented in the participant's file.
- H. To the extent that any listed services are covered under the Medicaid State Plan, the services under the waiver would be limited to additional services as allowed and not otherwise covered under the Medicaid State Plan, but consistent with waiver objectives of avoiding institutionalization.
- ~~A. Nurse Case Management and Delegation Services are nursing service in which Registered Nurses (RN) provide health case management and the delegation of nursing tasks for an unlicensed individual to perform acts that may otherwise be performed only by a RN or Licensed Practical Nurse (LPN).~~
- ~~B. Health Case Management service including:~~
- ~~1. Comprehensive Nursing assessment of the individual including the individual's health, medical appointments, and nursing needs;~~
 - ~~2. Development of protocols to support the individual, train staff, and access emergency services available in the community;~~
 - ~~3. Completion Review of the Health Risk Screening Tool (HRST) to assist the individual at Level 3 or above to understand his/her health needs and to develop a plan for obtaining service in the community;~~
 - ~~4. Completion of the Medication Administration Screening Tool to determine the level of support needed for medication administration;~~
 - ~~5. Recommendations to the individual receiving services for accessing health services that are available in the community;~~
 - ~~6. Monitoring for compliance with recommendations from health professional;~~

7. ~~Recommendations for accessing community resources and needed healthcare services;~~
 8. ~~Communicating with individual receiving services and team members in the coordination of health care needs and recommendations appropriate to meet the health needs of the individual;~~
 9. ~~Monitoring health data;~~
 10. ~~Review of care and supports for cost efficiency and effectiveness as directed in COMAR 10.27.11.03, 10.27.11.04, 10.27.11.05, and 10.27.11.06 to ensure the right service, at the right time, for the right amount;~~
 11. ~~Development of a nursing care plans, training and supervision of the staff providing the health services including administration of medications and treatments, and activities of daily living (ADL) care/health supports;~~
 12. ~~Updates and review to the HRST Level 3 or above and Medication Screening Tool when changes in health;~~
 13. ~~Annual review and update of the HRST at Level 3 or above; and~~
 14. ~~Annual completion of the Medication Administration Screening Tool.~~
 - ~~Delegation service including:~~
 1. ~~Assessment of the needs and abilities of the individual receiving services, staff performance of delegated nursing tasks, and of the environment of service/care delivery.~~
 2. ~~Delegation of the performance of nursing tasks (i.e., acts of a licensed nurse that include medication administration and treatment administration) by unlicensed staff in accordance with the Maryland Board of Nursing Nurse Practice Act COMAR 10.27.11, 10.39.01, 10.39.04, 10.39.05, and 10.39.07.~~
 3. ~~Training, supervision and remediation of unlicensed staff that provide administration of medication, treatments and personal care (e.g., Activities of Daily Living (ADL) care) as required in COMAR 10.27.11.03, 10.27.11.04, 10.27.11.05, and 10.27.11.06.~~
 4. ~~On-Call service for when paid staff are providing delegated services for up to 24 hours per day, 365 days per year as required in COMAR 10.27.11.04 B.~~
- C. ~~Collaboration with the DDA licensed provider agency in the development of policies and procedures required for delegation~~
- ~~SERVICE REQUIREMENTS:~~
- A. ~~Nurse Case Management and Delegation Services are available for individual self directed services and individuals receiving services in a DDA licensed site.~~
 - B. ~~In order to access services, the following criteria must be met:~~
 1. ~~Individual health conditions must be determined to be chronic, stable, routine, predictable and uncomplicated as per COMAR 10.27.11;~~
 2. ~~Individual must require delegation of medication and treatments as per COMAR 10.27.11.01 which is determined by a Developmental Disabilities Registered Nurse Case Manager/Delegating Nurse (RN CM/DN) based on the Medication Technician Training Program Medication Administration Screening Tool; and~~
 3. ~~The RN CM/DN has determined that all tasks/skills required to be performed or assisted with are delegatable and the interval of RN assessment, training, and supervision allow for the safe delivery of delegated services in accordance with COMAR 10.27.11. 03, 10.27.11.04, 10.27.11.05.~~
 - C. ~~RN assessment of individual, staff, environment, and care plan are done minimally every 45 days as per COMAR 10.27.11 regulations or more often as indicated by the individual's health condition and in accordance with the Maryland Board of Nursing regulations COMAR~~

~~10.27.11.03, 10.27.11.04, and 10.27.11. All revisions, recommendations, remediation and training completed must be documented by the RN.~~

- ~~D. RN may delegate to the individual's spouse, parent, legal guardian, siblings, children, and licensed provider agency staff.~~
- ~~E. Service is not provided in hospital, nursing/rehabilitation facility, residential treatment center or other facility where nursing services are included in the living arrangement.~~
- ~~F. The individual receiving services must be an adult of the age of 21.~~
- ~~G. The program will not reimburse services provided through the school system, foster care, or other resources.~~
- ~~— Services will not be covered if available under the individual's private insurance, the Medicaid State Plan (including EPSDT benefits), private or public educational services, the Rehabilitation Act, other waiver services, or through other resources.~~
- ~~H. This waiver service is only provided to individuals age 21 and over. All medically necessary Nurse Case Management and Delegation 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:

The frequency of assessment is minimally every 45 days but may be more frequent based on the MBON 10.27.11 regulation and the prudent nursing judgment of the delegating RN in meeting conditions for delegation. This is a person centered assessment and evaluation by the RN that determines duration and frequency of each assessment.

~~Nurse assessment is limited to up to three (3) hours per assessment.~~

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	<u>Individual – for self-directed services</u> Licensed Registered Nurse
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):

~~The following minimum standards are required of the RN:~~

- ~~1. Be employed by or under contract with the Participant or Licensed Service Provider providing the direct support staff;~~
- ~~2. Possess valid Maryland and/or Compact Registered Nurse license;~~
- ~~3. Successful completion of the DDA RN Case Manager/Delegating Nurse (CM/DN) Orientation;~~
- ~~4. Pass a criminal background investigation and any other required background checks and credential verifications as provided in Appendix C-2-a;~~
- ~~5. Be active on the DDA registry of DD RN CM/DNs;~~
- ~~6. Complete the online HRST Rater and Reviewer training;~~
- ~~7. Attend mandatory DDA trainings; and~~
- ~~—8. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year~~

~~1. The following minimum standards are required:~~

- ~~a. Successfully complete the DDA RN Case Manager/Delegating Nurse (CM/DN) Orientation~~
- ~~b. Passing a criminal background investigation~~

~~2. Individuals in self directing services, as the employer, determine staff specific requirements and may require additional staffing provider requirements based on their preferences and level of needs such as:~~

- ~~—Training by individual/family on individual specific information~~
- ~~—Be active on the DDA registry of DD RN CM/DNs~~
- ~~a. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year~~

Registered Nurse must:

- ~~1. Successfully complete the DDA RN Case Manager/Delegating Nurse (CM/DN) Orientation~~

- ~~b. Be active on the DDA registry of DD RN CM/DNs~~
- ~~2. Complete the online HRST Rater and Reviewer training~~
- ~~3.2. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year~~

~~Unlicensed staff paid to administer medication and/or perform treatments must be certified by the Maryland Board of Nursing (MBON) as Medication Technicians.~~

Verification of Provider Qualifications Entity

Responsible for Verification:

- Fiscal Management Services Provider

Frequency of Verification:

- Prior to service delivery and annually thereafter

Provider Category: Agency

Provider Type: DDA ~~Licensed~~ Approved Services Provider

Provider Qualifications License (specify):

License (specify):

~~DDA Licensed Services Provider as per COMAR 10.22.02~~

Certificate (specify):

Other Standard (specify):

DDA Approved Services Provider

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. Pass a criminal background investigation and any other required background checks and credential verifications as provided in Appendix C-2-a;
5. Be active on the DDA registry of DD RN CM/DNs;
6. Complete the online HRST Rater and Reviewer training;
7. Attend mandatory DDA trainings; and
8. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year

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. Complete the online HRST Rater and Reviewer training~~
- ~~6.9. Attend a minimum of two (2) DDA provided nurse quarterly meetings per fiscal year~~

~~Unlicensed staff paid to administer medication and/or perform treatments must be certified by the Maryland Board of Nursing (MBON) as Medication Technicians.~~

Verification of Provider Qualifications Entity

Responsible for Verification:

- DDA for verification of DDA Licensed approved provider
- Providers for verification of Registered Nurse licenses, certifications, and training qualifications

Frequency of Verification:

- DDA — prior to service delivery and annually thereafter
- Providers – prior to service delivery and annually thereafter