

## Community Pathways – Revised Draft Proposal

Service Type: Other

Service (Name): Skilled Nursing

Alternative Service Title: NURSE HEALTH CASE MANAGEMENT

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 Health Case Management services provides participants a licensed Registered Nurse (RN) who, when direct support staff are employed by a DDA provider agency to perform health services other than medication and treatment administration: (1) reviews the participant's health services and supports as part of a collaborative process, (2) assesses, plans, implements, coordinates, monitors, and evaluates options and services to meet the participant's health needs, (3) and uses available resources to promote quality participant health outcomes and cost effective care.
- 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 and the team to understand his or her health needs and to make recommendations to the participant and the team for obtaining services in the community;
  3. Completion of the DDA Medication Administration Screening Tool, minimally annually and when any significant changes in the cognitive status of the participant occurs, to determine and/or verify the level of support needed for medication administration;
  4. Review the participant's health services and supports delivered by the DDA provider agency direct support staff for safe, appropriate and cost-effective health care as per Maryland Board of Nursing (MBON) definition of case management;
  5. Providing recommendations to the team for accessing needed health services that are available in the community and other community resources;
  6. Communicating with the participant and his or her person-centered planning team members to ensure the team has all appropriate health information and recommendations related to the provision of health services provided via the DDA community provider agency staff;
  7. Develop health care plans and protocols, as needed, that direct the DDA licensed provider staff in the provision of health services to be performed that include (1) Activities of Daily Living (ADL) performance, (2) emergency intervention and (3) other health monitoring provided by the DDA licensed provider staff

8. Completes training, supervision, evaluation and remediation on all health services provided by the DDA licensed provider staff as identified in (1) Nursing Care Plans that direct the provision of health services to include ADL service and health monitoring and (2) emergency health protocols;
  9. Monitoring the health services delivered by the DDA- licensed community staff for compliance with the Nursing Care Plan; and,
  10. Monitoring health data collected by the DDA-licensed community provider staff as directed by the Nursing Care Plan.
- C. In provision of Nurse Health Case Management Services, the RN will collaborate with the DDA licensed provider agency in the development of policies and procedures required for delegation of any nursing tasks in accordance with COMAR 10.27.11.

#### SERVICE REQUIREMENTS:

- A. The participant may qualify for this service if he or she is: (1) able to perform self-medication and treatments as determined by the Nurse Health Case Manager; or (2) medications and treatments are provided for using the exemption from delegation from the MBON related to the gratuitous provision of care; or (3) direct support staff performing health services are employed by a DDA- licensed community provider.
- B. A participant may qualify for this service if he or she is: (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 settings; or (2) receiving Personal Support services from a DDA licensed community provider; or (3) enrolled in the Self-Directed Services Program, when direct support staff are employed by a DDA-licensed community provider.
- C. 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 or a nursing facility or rehabilitation facility or when Rare and Expensive Medicine (REM) is providing nursing services that includes staffing.
- D. Prior to initiation of the service, the Nurse Health Case Manager is required to determine that the participant is able to perform self-medication and treatments. If unable to perform self-medication and treatments, the Nurse Health Case Manager is to: (1) verify that the medications and treatments are provided for by unpaid supports; or (2) ensures that the direct support staff are employed by a DDA licensed community provider.
- E. Self-Medication and treatment performance is determined by the Nurse Health Case Management Service using the DDA approved Medication Administration Screening Tool.
- F. If the participant (1) cannot perform self-medication and treatments, or; (2) medications and treatments are provided for by paid direct support staff, or; (3) the direct support staff is not employed by a DDA community provider then this is not an available service option. The Health Case Manager will determine the appropriateness of other nursing-related services (Nurse Health Case Management and Delegation Service or Nurse Consultation service).
- G. The Nurse Health Case Management Services must include documented review of the participant's health needs, including comprehensive nursing assessment and care plans and protocols, every three (3) months and minimally an annual review or completion of the Medication Administration Screening Tool to verify ability to perform tasks of self-

medication. All resulting revisions, recommendations, remediation, and training completed must be documented by the RN.

- H. A relative, legal guardian, or legally responsible person, as defined in Appendix C-2, may not be paid to provide Nurse Health Case Management services.
- I. 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.
- J. 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.

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

Nurse Health Case Management services are limited to up to 3 hours every 90 days unless otherwise authorized by DDA.

**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 self-directed services
Agency	DDA Approved Services Provider
<b>Provider Category:</b> 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.

**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 Approved Services Provider

**Provider Qualifications License (specify):**

**License (specify):**

**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

#### **Verification of Provider Qualifications Entity**

##### **Responsible for Verification:**

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

##### **Frequency of Verification:**

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