1240-G - PRIVATE DUTY NURSING AND LICENSED HEALTH AIDE SERVICES

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I. PURPOSE

This Policy applies to ALTCS E/PD and DES DDD (DDD) Contractors; Fee-for-Service (FFS) Program including Tribal ALTCS; and all FFS populations, excluding Federal Emergency Services Program (FESP). (For FES, refer to AMPM Chapter 1100). This Policy establishes requirements regarding medically necessary Private Duty Nursing Services for ALTCS members.

II. DEFINITIONS

For purposes of this Policy:

LICENSED HEALTH AIDE (LHA) Pursuant to ARS 32-1601, a person who is licensed to provide or assist in providing nursing-related services pursuant to ARS 36-2939:

1. Is the parent, guardian, or family member of the Arizona Long-Term Care System (ALTCS) member who is under 21 years of age and eligible to receive Private Duty Nursing or skilled nursing respite care services who may provide Licensed Health Aide (LHA) services only to that member and only consistent with that member's plan of care.
2. Has a scope of practice that is the same as a Licensed Nursing Assistant (LNA) and may also provide medication administration, tracheostomy care, enteral care and therapy, and any other tasks approved by the State Board of Nursing in rule.

Additional definitions are located on the AHCCCS website at: AHCCCS Contract and Policy Dictionary.

III. POLICY

A. PRIVATE DUTY NURSING SERVICES

1. ALTCS members may receive private duty nursing services in their own home. Private duty nursing services are provided for more than two hours in duration or in excess of four hours in a single day. Private duty nursing services are provided as an alternative to hospitalization or institutionalization when care cannot be safely managed within the timeframe of intermittent home health nursing care and when determined to be cost-effective.

2. Private duty nursing services shall be ordered by a physician and provided by a Registered Nurse (RN) or a Licensed Practical Nurse (LPN) as specified in 42 CFR 440.80. If the services are furnished by an LPN, the services shall be provided under the supervision and direction of an RN or physician, and the LPN shall be employed by a Home Health Agency (HHA). Services may be provided through a Medicare certified HHA, a state licensed HHA (if a Medicare certified HHA is not available per criteria as specified in AMPM Policy 310-I), or by an Independent RN.

3. For private duty nursing services provided by an Independent RN, the following applies:
   a. Independent RNs shall submit, in writing, references from recent employment to the Contractor, or, for services to FFS members, to the AHCCCS/DFSM Tribal ALTCS unit. All references shall be contacted, and the results documented prior to the Contractor or the AHCCCS/DFSM Tribal ALTCS unit approving the provision of private duty nursing services from the Independent RN,
   b. The Independent RN shall complete a clinical and administrative record keeping orientation prior to providing private duty nursing services. The orientation shall be provided by a nurse approved by, or contracted with, a Contractor. For FFS Tribal ALTCS providers, training will be specified by the AHCCCS/DFSM Tribal ALTCS unit, Independent RNs shall receive written orders from the member's Primary Care Provider (PCP) or physician of record,
   c. The Independent RN is responsible for all documentation of member care, and is responsible for the transmission of said documentation to the ALTCS member's PCP or physician of record,
   d. The Contractor or the Tribal ALTCS Program shall maintain documentation supporting at least one of the three circumstances as specified in AMPM Policy 310-I when services are provided by a state licensed HHA (if a Medicare certified HHA is not available) or an Independent RN,
   e. Contractors and the AHCCCS/DFSM Tribal ALTCS Unit who contract with Independent RNs to provide private duty nursing services shall develop oversight activities to monitor service delivery and quality of care provided by the Independent RN, and
   f. Contractors and the AHCCCS/DFSM Tribal ALTCS Unit shall provide a backup for the Independent RN.

B. LICENSED HEALTH AIDE

1. ALTCS members may receive LHA services in the setting in which normal life activities take place. LHA services are provided as an alternative to hospitalization or institutionalization when care cannot be managed within the timeframe of intermittent home health nursing care and when determined to be cost-effective.

2. Private duty nursing services, respite services by an RN or LPN, and LHA services cannot be provided concurrently (e.g., during the same hours). In addition, the use of LHA services shall reduce a member's private duty nursing service hours.

3. LHA services shall be provided under the supervision and direction of an RN or physician. Supervision of LHAs includes observing the LHA's competency in performing the necessary duties as required by the individual patient; and supervisory visits shall occur within the LHAs first week, again within the first 30 days, again within the first 60 days, and at least every 60 days thereafter.

4. LHAs shall be employed only by an HHA and licensed by the State Board of Nursing.

5. LHA Services shall be provided through a Medicare Certified HHA, as specified in AMPM Policy 310-I.

6. One unit of LHA services is one visit. A visit is usually two hours but may be greater or lesser depending on the time it takes to render the procedure(s). For instance, care that is completed within two hours and 29 minutes would equal one unit of authorized services. Care rendered that lasts two hours and 30 minutes, would be two units of authorized services. Visits shall include at least one of the components listed for home health aides under AMPM Policy 310-I. Authorization for the number of visits per day will be based on medical necessity determined by the plan of care and subject to prior authorization.

7. Respite care is provided as an interval of rest and/or relief to a family member or other individual caring for an ALTCS member. When LHA services are authorized for respite purposes, the LHA cannot be the same individual for whom the respite is intended. Refer to AMPM 1250-D for additional respite information.

Refer to Attachment A for a listing of medical supplies that are included in FFS home health skilled nursing visit rate.

Refer to Attachment B for a list of services that may be provided by a home health nurse or LHA.