


GOVERNMENT OF THE DISTRICT OF COLUMBIA  
Department of Health Care Finance



Office of the Senior Deputy Director/Medicaid Director

Transmittal # 17-32

**TO:** Home Health Agency Providers and DME Suppliers

**FROM:** Claudia Schlosberg, J.D.   
Senior Deputy Director and State Medicaid Director

**DATE:** December 19, 2017

**SUBJECT:** **Procedures for obtaining prior authorizations for Home Health Services and Private Duty Nursing services as established under the Medicaid State Plan**

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The Centers for Medicare and Medicaid Services (CMS) approved the Department of Health Care Finance's (DHCF) Home Health Services and Private Duty Nursing State Plan Amendments (SPAs) with an effective date of October 1, 2017.

DHCF is clarifying State Plan requirements by notifying Home Health Agencies (HHAs) of their responsibility when Home Health services or Private Duty Nursing services are provided under the District's Medicaid State Plan. While we are providing the below summary, providers are advised to review copies of the approved State Plan Amendment and rules to ensure compliance with all requirements.

Amount, Duration, and Scope of Services Attachment 3.1 A: Supplement 1  
(See pages 9-9r, 10-10f)  
<https://dhcf.dc.gov/node/192202>

Amount, Duration, and Scope of Services Attachment 3.1 B: Supplement 1  
(See pages 8-8r, 9-9f)  
<https://dhcf.dc.gov/node/192342>

Home Health Services Notice of Second Emergency and Proposed Rulemaking  
<https://dhcf.dc.gov/node/1278006>

Private Duty Nursing Services Notice of Second Emergency and Proposed Rulemaking  
<https://dhcf.dc.gov/node/1278011>

Home Health Services Defined

In accordance with the federal rule (*see* 42 CFR § 440.70), Home Health services consist of the following: Skilled Nursing, Home Health Aide services, Durable Medical Equipment and Supplies, Physical Therapy, Occupational Therapy and Speech Pathology and Audiology services.

Private Duty Nursing Services Defined

Private Duty Nursing services are services for technology-dependent beneficiaries who require more individualized and continuous care than is available from a visiting nurse under the Skilled Nursing Home Health Services benefit, or that is routinely provided by nursing staff of a hospital or skilled nursing facility.

Home Health and Private Duty Nursing services must be provided to a beneficiary:

- 1) *At his/her place of residence or in a setting where normal activities occur; and*
- 2) *Based upon the beneficiary's physician's orders as part of a written plan of care that is developed by the R.N.*

Skilled Nursing services are part-time and intermittent services and must be prior authorized. Skilled nursing services may be provided without an authorization for up to six (6) hours a day for a period not to exceed five (days) *only* when there is an immediate need, such as in an emergency, or to ensure the safe and orderly discharge of the beneficiary. The six (6) hour per day limit may be exceeded based on medical necessity. (Medicaid State Plan, Supplement 1 to Attachment 3.1 A and 3.1 B, Section 7).

Beneficiaries enrolled in the Individuals with Intellectual and Developmental Disabilities Waiver (IDD Waiver) may access additional medically necessary skilled nursing hours under the Waiver after exhaustion of the six (6) hour limitation under the State Plan.

Private Duty Nursing services must be prior authorized and may not exceed a total of twelve (12) hours per day. The twelve (12) hour per day limit may be exceeded based on medical necessity. (Medicaid State Plan, Supplement 1 to Attachment 3.1 A and 3.1 B, Section 8)

To ensure that home health agency providers of Home Health services and Private Duty Nursing services comply with the Medicaid State Plan requirements, the provider must:

- 1) Receive an order (inclusive of the requirements for documenting the face-to-face encounters) for skilled nursing or other Home Health services, or Private Duty nursing services from a physician;
- 2) Ensure that an R.N. conducts an initial assessment to develop a plan of care for services;
- 3) Submit the plan of care to the physician initially, and every sixty (60) calendar days;
- 4) Ensure that the physician reviews the initial and subsequent plan of care and affixes his/her signature on the plan of care within thirty (30) calendar days of its development;

- 5) Ensure that new or revised physician orders have been obtained from the treating physician, as needed, and every sixty (60) calendar days, to promote continuity of care; and
- 6) Document the actions taken to ensure that the processes are available for review by DHCF's Long Term Care Administration or upon audit by DHCF.

In all cases where a beneficiary needs Home Health or Private Duty Nursing services, or additional hours based upon medical necessity, the provider must receive a prior authorization from DHCF, by adhering to the following steps:

- 1) Receive an order for skilled nursing, other Home Health services, or Private Duty Nursing from a physician;
- 2) Ensure that the order incorporates the requirements for documenting that a face-to-face encounter occurred within the required timeframes;
- 3) Upload the order (Form 719A) by visiting the Qualis Health Provider Portal at [www.qualishealth.org](http://www.qualishealth.org). From the Qualis Portal, select "DC Medicaid" from the Healthcare Professional Drop-Down Menu, and upload the form electronically;
- 4) Ensure that new or revised physician orders have been obtained from the treating physician initially, and every sixty (60) calendar days or as needed, to promote continuity of care; and
- 5) Document the actions taken to ensure that the processes are available for review by DHCF's Long Term Care Administration or upon audit by DHCF.

It is important that providers comply with the State Plan requirements and procedures to ensure access to services and prevent any gaps in receiving needed Home Health or Private Duty Nursing services.

You can obtain additional assistance in registering for the Qualis Health Provider Portal by contacting [ProviderPortalHelp@qualishealth.org](mailto:ProviderPortalHelp@qualishealth.org). If you have any questions about this transmittal, please contact Ieisha Gray, Director, Long Term Care Administration (DHCF), 202-442-5818, or [ieisha.gray@dc.gov](mailto:ieisha.gray@dc.gov).