

# NURSING SERVICES: DMAS REQUIREMENTS FOR SERVICE COVERAGE

Medicaid School Services  
Provider Training 2022-2023



# Objectives

- List the billing-related requirements for nursing services delivered as part of a student's Individualized Education Program (IEP) plan
- Describe billing/claims requirements for skilled nursing services

# Nursing Services

- In order to be eligible for reimbursement, skilled nursing services must be:
  - Medically necessary
  - Ordered by a Physician, Nurse Practitioner (NP), or Physician's Assistant (PA)
  - Incorporated into the student's IEP plan.
  - Detailed in the student's Plan of Care (POC) document

# Nursing Services

- Provided by a Virginia licensed RN or LPN (working under the supervision of a RN) who is employed by or under contract with the school division.
  - Supervision of a LPN is to be consistent with the regulatory standards of the Board of Nursing.
- Rendered in accordance with the licensing standards and criteria of the Virginia Board of Nursing

# Documenting Nursing Services

- The Plan of Care (POC) details the plan for providing all nursing services ordered by an appropriately qualified physician, PA or NP for the student.
- Nursing services ordered by multiple qualified providers may be listed on a single POC document.

# Documenting Nursing Services

- The POC must be implemented (signed and dated) before the start date of services.
- A POC must be renewed at least every 12 months.
- The POC can be amended within the one year at any time the written orders are changed.

# Documenting Nursing Services

- Nursing services that exceed the physician's, PA's, or NP's written order for nursing services should not be billed to DMAS

# Documenting Nursing Services

- The Nursing POC must include:
  - Student's name and date of birth
  - Student's Medicaid/FAMIS ID number
  - Date of POC implementation
  - ICD-10 code (diagnosis code)
  - Medical condition(s) to be addressed by nursing services
  - Goals to be addressed



# Documenting Nursing Services

- Planned procedures, medication, or treatment for each goal.
- Schedule for delivery of procedures, medication or treatments, including dose and route (for medications) and frequency.
- Discontinue date (if applicable)
- Comments (if applicable)

# Documenting Nursing Services

- Name of child's primary care physician
- Signature of the RN that oversees execution of the POC.

# Nursing Plan of care (POC)

**Department of Medical Assistance Services / Local Education Agency Services  
Nursing Services Plan of Care**

Student Name: \_\_\_\_\_  
Last First

Medicaid/FAMIS ID#: \_\_\_\_\_

Date of POC Implementation (mm/dd/yy): \_\_\_\_\_ \*ICD Code(s): \_\_\_\_\_  
(for billing purposes)

Identifying Issue: \_\_\_\_\_

*\*Note: Select ICD Diagnosis Code from student's medical history. Inserting this code does not constitute a medical diagnosis.*

Goals and Objectives:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Goal #	Medication, Treatment or Procedure	Dose	Frequency	Discontinue	Ordering Provider	Comment

Prescriber: \_\_\_\_\_ Primary Care Physician: \_\_\_\_\_  
Print Name (Forward copy to PCP) Print Name

RN: \_\_\_\_\_  
Print Name Signature Initials Date Signed (mm/dd/yy)

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RVSD0220

# Nursing - Billing for Services

- Nursing services will be limited to 6.5 hrs per day or 26 units per day.
- A unit is 15 minutes of nursing care.
- The National Provider Identifier (NPI) number of a DMAS-enrolled physician, physician's assistant or nurse practitioner qualified to order the service being billed must be included on claims for services.

# Nursing - Billing for Services

- Written orders for all nursing services billed to DMAS must be maintained in the student's nursing record

# Nursing - Student Log

- Must include:
  - Student's name and date of birth
  - Month and year
  - Medicaid or FAMIS ID number (must be on each page of the nursing record)
  - Name, title, and initials of nurse(s) documenting on the nursing log

# Nursing - Student Log

- Date of service
- Time of day
- Amount of time (in minutes)
- Nursing procedure
- Response to procedure (Normal or Variance)
- Comments if variance
- Initials of nurse completing the procedure

# Nursing - Student Log

- Supervision if required (repeated if more than one supervisor)
  - Supervisory date
  - Status and concerns
  - Comments and recommendations, initials
  - Signature of LPN and date
  - Signature of RN and date



# Nursing Student Log-Example

Department of Medical Assistance Services / Local Education Agency Services  
Nursing Services Student Log

Student: \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
Last First Name

Medicaid/FAMIS ID#: \_\_\_\_\_

RN: \_\_\_\_\_  
Name Title Initials

RN: \_\_\_\_\_  
Name Title Initials

LPN: \_\_\_\_\_  
Name Title Initials

LPN: \_\_\_\_\_  
Name Title Initials

Date (mm/dd)	Time of day	Amount of Time (minutes)	Nursing Procedure	Response to procedure (N/V)	Comments: Must be completed for Variance	Init.

Supervision Q 30-90 days required (see Chapter IV of the DMAS School Division manual) Supervision Date (mm/dd/yy): \_\_\_\_\_

Status/Concerns: \_\_\_\_\_

Comments/Recommendations: \_\_\_\_\_

Signature of LPN: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of RN: \_\_\_\_\_ Date: \_\_\_\_\_

Supervision Q 30-90 days required (see Chapter IV of the DMAS School Division manual) Supervision Date (mm/dd/yy): \_\_\_\_\_

Status/Concerns: \_\_\_\_\_

Comments/Recommendations: \_\_\_\_\_

Signature of LPN: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of RN: \_\_\_\_\_ Date: \_\_\_\_\_

DMAS 40  
RVSD082020 Key: N = Normal V = Variance from normal or standard

# Documenting Nursing Services

- Documentation shall be written immediately or as soon as possible after the procedure or treatment was implemented.
- It must include the date, time of day and the amount of time to complete the procedure. This includes one-on-one nurses providing continuous care.

# Nursing - Documentation of Services

- Supervisory visits are required as often as needed to ensure both quality and appropriateness of services.
- If nursing procedures are performed by a LPN, they must be supervised by a registered nurse in accordance with the Board of Nursing regulations.

# Nursing - Documentation of Services

- Nursing services documentation will be in accordance with the:
  - Virginia Board of Nursing
  - Department of Education statutes, regulations and standards relating to school health
  - DMAS LEA Provider Manual
    - Chapter VI (Utilization Review)

# Nursing - Service Limitations

- Utilization review may be performed by DMAS to determine if services are appropriately provided to Medicaid recipients and to ensure the services are medically necessary and appropriate.
- Failure to document services in the child's school nursing record will be considered not performed and at utilization review by DMAS, payment may be revoked.

# Nursing-related Personal Care

- Personal care services delivered under the supervision of a RN or LPN within their scope of nursing practice are covered by DMAS.
- Services that do not require the skill level of a RN or LPN may not be billed as nursing services, but may be billed as personal care services.
- Personal care services that require the skill level of a RN or LPN for supervision must be ordered by a physician, physician's assistant or nurse practitioner.
- Must be documented in the Personal Care Services Plan of Care.

# Nursing-related Personal Care

- The National Provider Identifier (NPI) number of a DMAS-enrolled physician, physician's assistant or nurse practitioner qualified to order skilled personal care services supervised by an RN is not required.
- **NOTE, Personal Care services for ADLs/IADLs does NOT require a physician, PA or NP order**

# Nursing - Procedure Code

- Only one code can be used for nursing services:
- T1002
  - Nursing assessment
  - Registered Nurse Services
  - Licensed Practical Nurse Services



# Nursing - Calculation of Billable Units

- To calculate nursing services, add the amount of minutes for all procedures for the month the service is delivered and then divide by 15 (a unit) to get the total number of units to be billed.
- Multiply the number of units by the rate for nursing services to determine amount to be billed.
- One-on-one nursing care can be billed for up to 6.5 hours a day (26 nursing units), based on physician order.



# RMTS FOR NURSES

## The RMTS Connection

- The Medicaid in Schools program is not a “fee-for-service” program. Schools aren’t paid based on submitting claims for the individual services provided to students.
- Instead, schools submit “interim” claims to document to DMAS that a covered service was provided to a Medicaid-enrolled student, but those “interim” claims are paid at “interim” (temporary) rates that are later re-calculated via a cost settlement process.
- This type of reimbursement program, referred to as “cost-based” or “cost settlement” is great for schools because it allows school divisions to ultimately receive reimbursement based on actual incurred costs to provide Medicaid-covered services.

# The RMTS Connection

- The Medicaid in Schools program uses the RMTS to measure and quantify the amount of time all of the staff (providers) employed by school divisions across the state spend doing work activities that qualify for Medicaid reimbursement.
- Therefore, when you answer a moment, the RMTS is determining whether the work activity happening at the time “counts” for reimbursement in the Direct Services program, the Medicaid Administrative program, or neither program.

# The RMTS Connection

- When responding to the RMTS, providers should apply your understanding of program reimbursement and interim billing requirements to your moment responses.
- Your moment response must provide enough complete information so that we can determine whether the work you were doing can be “counted.”
- **Note:** You’ll never need to identify any student specifically, and you’ll never need to consider whether the student you were working with is enrolled in Medicaid or FAMIS when responding to an assigned moment.
  - A moment response is never about the student – it’s about your work activity

# RMTS Tips

- Provide sufficient information so that the ***context*** of your work is understood.

Don't Say:	Say this instead:
Completing paperwork	Documenting notes about the nursing care that I provided to a student
In a meeting	In a meeting with the school psychologist, classroom teacher and parent discussing a student who will be returning to school following an extended medical absence and the health care services and supports that the student will need
Calling parents of absent students	Calling parents of absent students reported to have COVID-19 to provide information about quarantine and testing requirements

## RMTS Tips

- As a licensed provider, you have special skills and training to address underlying health issues that are impacting a student's ability to succeed in the educational environment.
- When applying the skills and training of your license to a student who needs your skilled interventions, in Medicaid's view, you are addressing health care needs first and should answer moments accordingly.
- Particularly now that the Medicaid program has expanded the reimbursement to include medically necessary services provided that are unrelated to a student's IEP, be sure to convey that your intervention/care provided was a "skilled" service that required the skills and training of your nursing license to perform.
  - For example, for unplanned care of an ill or injured student, when appropriate, be sure that your moment response reflects that you performed a skilled nursing assessment, then decided on a course of action/intervention. Or if you simply administered first aid, then say that.

## RMTS Tips

- For interim billing purposes, you submit an interim claim for each “visit” or “session” that meets Medicaid’s requirements – thinking about “face-to-face” time with the student.
- Medicaid determines the true cost of providing all those services by “counting” all working time that is an ***integral component*** of service delivery through the RMTS, including:
  - Time spent documenting your service notes/progress
  - Time spent preparing to provide services (e.g. gathering the materials you’ll need, getting out supplies/equipment, reviewing the plan of care or student’s chart)
  - Time spent traveling to provide a covered services (e.g. between the elementary school and the middle school)
  - Time spent completing paperwork or electronic interim billing forms/documents



## RMTS Tips

- Because the RMTS needs to capture and “count” all the working time that is an ***integral component*** of service delivery, even when not “face-to-face” with the student, we still need to know that the Medicaid requirements for reimbursement of the related service are met.
  - If your moment responses are not clear, you might get a follow-up question asking you about the “purpose of your travel” and things of that nature.
- **Note:** with the expansion of program reimbursement to include services that are not related to a student’s IEP, your RMTS moment responses need to clearly identify work that is related to a student’s IEP vs. when it’s not.

# RMTS “Administrative” Work Activities

- Many work activities that school-based providers perform may not be reimbursable as a “direct service” but instead are reimbursed through Medicaid Administrative Claiming.
- In the Administrative Claiming program there are no interim claims, just the RMTS is used to quantify work time spent doing reimbursable activities, such as:
  - Referrals, care coordination, monitoring – “indirect service” time
  - “Big picture” planning (not specific to any one student) for health care service delivery needs/programs
  - Clinical supervision
  - Conducting or receiving training related to health care services and practice
- So be sure to clearly identify these work activities in your moment responses as well!



**Stafford Public Schools  
Collette Hokana**

**Virginia Department of Education  
Tracy White, School Health Specialist**

**Amy Edwards Medicaid Specialist**  
[Amy.Edwards@doe.virginia.gov](mailto:Amy.Edwards@doe.virginia.gov)

**Department of Medical Assistance Services**

[MedicaidSchoolServices@dmas.virginia.gov](mailto:MedicaidSchoolServices@dmas.virginia.gov)

