

Wisconsin Medicaid and BadgerCare update

October 2000 • No. 2000-53

PHC 1762

Wisconsin Medicaid and BadgerCare Information for Providers

To:

Personal Care
Providers

HMOs and Other
Managed Care
Programs

Revisions to personal care policies

This *Update* supplements policies recently published in the Wisconsin Medicaid Personal Care Handbook. It contains additional acceptable methods of documenting travel time, which will be effective as of January 1, 2001. Also included are clarifications of requirements for personal care worker (PCW) training and registered nurse supervisory visits.

Policies reviewed in response to provider requests

Subsequent to the publication of the Personal Care Handbook, and at the request of personal care providers, the Department of Health and Family Services (DHFS) has reviewed Wisconsin Medicaid policies regarding travel time, personal care worker (PCW) training, and registered nurse (RN) supervisory visits.

This *Update* contains the following information to assist providers to interpret and comply with Medicaid policy:

- Additional acceptable methods to document travel time.
- Clarification of requirements for PCW training.
- Clarification of requirements for RN supervisory visits and changes in the definition of RN supervisory visit codes W9906 and W9044.

The information presented in this *Update* should be used in conjunction with the Personal Care Handbook.

Documentation of travel time

In the General Information section of the Personal Care Handbook, providers are instructed to document the following when billing Medicaid for PCW travel time:

- Where and when travel started and ended.
- When each period of personal care started and ended.
- Where and when return travel started and ended.

Effective January 1, 2001, providers may use the method described in the Personal Care Handbook or a computer-generated mileage program, which provides the *shortest* distance between points in both miles and minutes, to document PCW travel time.

Standards for using computer-generated travel time documentation

If a computer-generated method is used, the provider is required to follow certain documentation standards:

- Establish a routine itinerary for each PCW.
 - √ The routine itinerary must be based on travel to and from authorized locations.

- √ The only authorized locations for calculating travel time are the previous or following personal care appointment, the PCW's residence, or the provider's office.
- √ A PCW may deviate from the routine itinerary to make stops between authorized locations if the time billed does not differ from the routine itinerary for that day.
- √ When a PCW changes the routine itinerary, either a new itinerary must be documented or the method described in the Personal Care Handbook must be used to document travel time.
- Providers are required to schedule PCW visits to minimize travel time so that the service is delivered in a cost-effective manner, according to HFS 101.03(96m), Wis. Admin. Code. This requirement is also in effect when routine itineraries are utilized.
- Travel time can only be billed for dates that the PCW actually provided personal care services to the recipient.
- The provider must maintain the following information on file in the agency records:
 - √ The computer-generated map documenting the shortest distance and time between travel locations.
 - √ The routine itineraries for each PCW.
 - √ The addresses of locations for which "to" and "from" travel occurs.
 - √ The recipient's name and address.
 - √ The dates of service, start and end times, and personal care services provided.

Medicaid personal care worker training or experience requirements

According to HFS 105.17(3)(a)1, Wis. Admin. Code, Medicaid personal care training must consist of a minimum of 40 hours classroom training, at least 25 of which shall be devoted to personal and restorative care, or six months of equivalent experience. Training should emphasize the techniques of caring for the special needs of the population the PCW will serve.

Providers are encouraged to have all employees complete the 40-hour personal care training class which prepares the Medicaid PCW to provide the personal care tasks covered in HFS 107.112, Wis. Admin. Code, for the populations eligible to receive Medicaid personal care services.

The General Information section of the Personal Care Handbook provides common examples of equivalent experience, but providers may also consider other settings where the PCW may have gained experience. Regardless of the PCW's experience:

- The provider is responsible to ensure that the worker's experience is commensurate with the type of care that the worker will be providing.
- The supervising RN is required to assign the worker to do specific tasks for which he or she has been trained.
- The worker is limited to performing only those tasks and services as assigned for each recipient and for which he or she has been specifically trained.

According to HFS 105.17(3)(a)1, Wis. Admin. Code, Medicaid personal care training must consist of a minimum of 40 hours classroom training, at least 25 of which shall be devoted to personal and restorative care, or six months of equivalent experience.

Training for new assignments

To assure quality of care, the agency is required to ensure that PCWs have the training and

experience to perform assigned tasks and know the special needs of the disability group to which the recipient belongs. If a PCW:

- Lacks experience to perform specific personal care tasks and has not had training, the agency should ensure that the worker completes the 40-hour training class before assigning the new task.
- Has had training or experience providing personal care tasks, but lacks experience with the disability group to which the supervising RN wishes to assign the worker, the agency is required to provide and document whatever training is necessary to assure the PCW's competence.

Personal care worker training for medically oriented tasks

Medically oriented tasks are usually assigned for specific recipients on a case-by-case basis and usually are not included in the basic 40-hour PCW training curriculum.

If a medically oriented task is added to the PCW's duties after the worker qualifies to provide services through the 40-hour training class or equivalent experience, the delegating RN must train the worker for that specific task and that specific recipient following the requirements for delegation in N6, Wis. Admin. Code.

Refer to Appendices 1 and 2 in the Covered Services section of the Personal Care Handbook for further information on medically oriented tasks and delegation.

Registered nurse supervisory visits

According to HFS 107.112(3)(c), Wis. Admin. Code, the RN supervisor is required to review

the plan of care (POC), evaluate the recipient's condition, and make a supervisory review of the PCW at least every 60 days. The review shall include a visit to the recipient's home, review of the PCW's daily written record, and discussion with the physician of any necessary changes in the POC.

Supervision is defined as intermittent face-to-face contact between supervisor and assistant and a regular review of the assistant's work by the supervisor, according to HFS 101.03(173), Wis. Admin. Code. Supervision includes observation of the PCW performing tasks.

It is the RN's responsibility to determine which tasks to observe the PCW performing. The RN can observe the PCW performing medically oriented tasks or any of the Medicaid-covered activities of daily living (ADLs). Providers are required to maintain a record of the RN supervisory visits.

Providers are required to evaluate each PCW's work performance on a periodic basis, according to HFS 105.17(1)(t), Wis. Admin. Code. To assure that the recipient is receiving quality care, the DHFS recommends that when more than one PCW is assigned to care for a single recipient, the RN supervisor observe a different worker at every supervisory visit, eventually observing all workers actually performing services.

Routine Nurse Supervisory Visits

Personal care recipients are generally stable patients, and their care requires only routine supervision no more frequently than once every 60 days. Therefore, Medicaid limits reimbursement for the Routine Nurse Supervisory Visit (W9906) to once every 60 days.

Supervision is defined as intermittent face-to-face contact between supervisor and assistant and a regular review of the assistant's work by the supervisor, according to HFS 101.03(173), Wis. Admin. Code.

During that visit, the RN supervisor evaluates the recipient and usually reviews the PCW's performance at the same time.

However, if at some time during the 60-day period between routine supervisory visits the RN supervisor visits the recipient's home and observes and documents the PCW performing personal care tasks, the Routine Nurse Supervisory Visit may be made without the PCW being present.

To allow flexibility in scheduling, a routine supervisory visit may be reimbursed every 50 to 60 days per provider, per recipient. The procedure code for billing this PCW supervisory visit is W9906. The Billing section of the Personal Care Handbook provides billing instructions.

Exceptional Circumstances Supervisory Visits

Current policy limits personal care supervisory visits (W9044) to recipients that receive skilled nursing services only.

Effective September 1, 2000, providers may be reimbursed for a medically necessary RN supervisory visit in an exceptional circumstance, even if the recipient is not receiving skilled care. Reimbursement is limited to once every month.

However, to qualify for Medicaid reimbursement, the provider is required to document the medical necessity in the medical record. Medical necessity is defined in HFS 101.03(96m), Wis. Admin. Code. Refer to the Covered Services section of the Personal Care Handbook for this definition.

Training of the PCW, assessment of the recipient's condition, and other administrative duties are considered administrative expenses for which Medicaid does not reimburse separately. Medicaid does not reimburse for skilled nursing visits for agencies that are Medicaid certified to provide only personal care services.

Reimbursement for RN supervisory visits in exceptional circumstances is limited to one visit per month, per provider, per recipient, according to HFS 107.112(3)(d), Wis. Admin. Code.

To bill for a medically necessary RN supervisory visit that occurred *in addition* to the regularly scheduled RN supervisory visit of once every 50-60 days, use procedure code W9044. Refer to the Billing section of the Personal Care Handbook for more information on billing.

Procedure codes redefined

To clarify the purpose of the two RN supervisory visit procedure codes used for billing Medicaid, definitions for these codes have been changed from the definitions in Appendix 4 of the Billing section of the Personal Care Handbook. Effective September 1, 2000, the new definitions are:

Procedure code W9906:

- √ Registered Nurse Supervisory Visit – Routine Visit.
- √ Wisconsin Medicaid reimbursement limited to once every 50-60 days.

Procedure code W9044:

- √ Registered Nurse Supervisory Visit – Exceptional Circumstances.

Reimbursement for RN supervisory visits in exceptional circumstances is limited to one visit per month, per provider, per recipient, according to HFS 107.112(3)(d), Wis. Admin. Code.

- √ Wisconsin Medicaid reimbursement limited to once a month if medically necessary.

Charting time not separately reimbursable

Providers are reminded that charting time is not separately reimbursable by Medicaid. Separate charges for the time involved in completing necessary forms, claims, or reports are not Medicaid-covered services, according to HFS 107.03(17), Wis. Admin. Code.

This *Update* applies to fee-for-service Medicaid providers only.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at www.dhfs.state.wi.us/medicaid/.