
WISCONSIN MEDICAID UPDATE

June 10, 1996

UPDATE 96-19

TO:
Nurses in Independent
Practice

RCS and Private Duty Nursing Services: Clarification of Administrative and Case Coordination Responsibilities

Individual Nurse Administrative Responsibilities

Medicaid Providers May Not Charge Certain Fees to Independent Nurses

Medicaid providers may not charge the following fees to independent nurses:

- referral fees (e.g., a monthly amount for the opportunity to participate in the care of the recipient)
- finder's fees (e.g., an amount for finding the recipient)
- coordination fees (e.g., an amount per hour for coordinating the care of a recipient)

Such fees are considered "kickbacks" and are in violation of federal and state laws. Wisconsin Medicaid refers any suspect activity to the Wisconsin Department of Justice (DOJ) for investigation of possible criminal action.

Certified Providers May Only Use Their Provider Number for Services That They Personally Provide

Providers certified by Wisconsin Medicaid are personally accountable for the

truthfulness, accuracy, timeliness, and completeness of all claims, cost reports, prior authorization requests, and any supplementary information (HSS 106.02 (9) (e) 1., Wis. Admin. Code).

Certified nurse providers *may not* use their Medicaid provider number to bill for another provider's services.

Failure to Comply with Medicaid Regulations May Result in Recoupments

Services for which records or other documentation were not prepared and maintained as required under HSS 106.02 (9), Wis. Admin. Code, are not reimbursable. Certified providers may not bill recipients for covered services that are not reimbursable due to the provider's failure to comply with regulations. For example, providers may not bill recipients if the provider failed to follow prior authorization or billing procedures.

Using a Billing Service

Certified providers may bill Wisconsin Medicaid directly or use a billing service or agent. Certified providers may pay the billing service or agent an hourly rate or a flat amount per claim.

Certified providers *may not* base payment to the billing service or agent on the actual amount of payments collected from Wisconsin Medicaid. Federal and state regulations (including HSS 106.03 (5), Wis. Admin. Code) prohibit providers from making this type of payment to billing services or agents.

Respiratory Care Service (RCS) Case Coordination Responsibilities

Wisconsin Medicaid may reimburse up to five hours of case coordination a month for each recipient. Approved RCS case coordination hours are included within the maximum number of hours a nurse can provide, as defined in HSS 107.113 (5) (d), Wis. Admin. Code.

Case coordination must be provided when more than one nurse is necessary to staff the recipient's case. (HSS 107.113 (3), Wis. Admin. Code). Also, the case coordination must be done by an RN (HSS 107.113 (1) (i), Wis. Admin. Code).

Case coordination activities include working *with* the recipient (or legal representative) in coordinating health care services provided to the recipient (HSS 107.113 (1) (i), Wis. Admin. Code).

Prior authorization requests for RCS must state the name and license number of the RN performing the case coordination responsibilities (HSS 107.113 (3) (a), Wis. Admin. Code).

The designated case coordinator must be identified in the written plan of care. All case coordination activities provided by the designated case coordinator must be documented in the clinical record, including the extent and scope of specific case coordination provided (HSS 107.113 (4) (e), Wis. Admin. Code).

Private Duty Nursing Case Coordination Responsibilities

Private duty nursing service case coordination is not separately reimbursable. As specified in HSS 107.12 (1) (f), Wis. Admin. Code, Wisconsin Medicaid reimburses private duty nursing services for the actual time spent in direct care which requires the skills of a licensed nurse. Any activities and time spent on case coordination has been included in the established rates.

Therefore, the time spent on this activity is *not* separately reimbursable.

Although case coordination is not separately reimbursable for private duty nursing services, providers must comply with the following:

1. Case coordination must be provided by an RN when more than one nurse is necessary to staff the recipient's case (HSS 107.12 (1) (d) 1. c., Wis. Admin. Code).
2. Prior authorization requests for private duty nursing must state the name and license number of the RN performing the case coordination responsibilities (HSS 107.12 (2) (d), Wis. Admin. Code).
3. All case coordination activities provided by the designated case coordinator must be documented in the clinical record, including the extent and scope of specific case coordination provided (HSS 107.12 (3) (c), Wis. Admin. Code).
4. Case coordination activities include working *with* the recipient (or legal representative) in coordinating health care services provided to the recipient.

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