

PROVIDER BULLETIN

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PRIVATE DUTY NURSING (PDN) SERVICES – COVID-19 CHANGES

EFFECTIVE: MARCH 13, 2020

APPLIES TO: Private Duty Nursing Agencies

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This bulletin is to advise of changes to private duty nursing services processes due to the ongoing COVID-19 outbreak.

Beginning March 13, 2020 and until the end of the public health emergency due to COVID-19, the following changes are implemented:

ANNUAL PERFORMANCE EVALUATIONS

Annual performance evaluations that come due will not be required to have any on-site visits performed. (The current requirement is two on-site visits.)

RN SUPERVISORY VISIT

RN supervisory visits for participants receiving LPN services will not be required. (The current requirement is for an RN supervisory visit once every 60 days.)

PERSONNEL TRAINING

The four hours of orientation training for new employees is waived with the exception of child abuse/neglect indicators and reporting, and universal precaution procedures.

PERSONNEL QUALIFICATIONS

Family members, including legal guardians, who are an RN or an LPN currently licensed and employed by an agency and meet any other program requirements may provide authorized private duty nursing services. The competency evaluation for LPNs will be waived for an LPN that is a family member of the participant and has experience providing the services in the plan of care to the participant.

GRADUATE NURSES

Nursing care by a graduate LPN or graduate RN will be allowed. A graduate LPN or graduate RN may provide nursing services (during this public health emergency) until receipt of the results of the first licensure examination taken by the graduate nurse or until ninety (90) days after graduation, whichever comes first.

PROVIDER REASSESSMENTS

Provider 60 day assessments to reestablish the plan of care and resumption of care assessments following a hospitalization may be completed through telehealth as determined appropriate by the PDN provider.

PLANS OF CARE (485)

For initial assessments and reassessments, verbal or written orders for care/services must be obtained prior to delivery of service. The submission of the 485 Plan of Care form may be delayed; however, it must be submitted within 30 days after the end of the public health emergency. Prior authorization will be completed by the Bureau of Special Health Care Needs upon receipt of the 485 Plan of Care.

APPLICABILITY

The information in this bulletin applies to managed care and fee-for-service providers. Managed care enrolled providers should contact their Managed Care Organization for questions regarding private duty nursing billing, reimbursement and credentialing.

Provider Bulletins are available on the MO HealthNet Division (MHD) website at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD website at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the MO HealthNet ID card.

Provider Communications Hotline
573-751-2896