Table of Contents

Nursing Services

This chapter of the Idaho Medicaid Provider Handbook describes Medicaid-covered private duty nursing services, waiver nursing services, maternity nursing visits, and supervising registered nurse services (PCS program) by providers licensed as either a Registered Nurse (RN) or Licensed Practical Nurse (LPN).

Services or situations that only apply to a specific provider type will be specified where applicable. Should the handbook ever appear to contradict relevant provisions of Idaho or federal regulations, the regulations prevail. Any paper or digital copy of these documents is considered out of date except the version appearing on Gainwell Technologies' Idaho Medicaid website. Sections of the Idaho Medicaid Provider Handbook applicable in specific situations are listed throughout the handbook for provider convenience. Handbook chapters which always apply to this provider type include the following:

- General Billing Instructions;
- General Information and Requirements for Providers; and
- Glossary.

Handbooks can only be used properly in context. Providers must be familiar with the handbooks that affect them and their services. The numbering in handbooks is also important to make note of as subsections rely on the content of the sections above them.

> ***Example***
>
> Section 1.2.3.a The Answer requires the reader to have also read Section 1, Section 1.2 and Section 1.2.3 to be able to properly apply Section 1.2.3.a.

References are included throughout the handbook for provider and staff convenience. Not all applicable references have been incorporated into the handbook. Not all references provided are equal in weight.

- Case Law: Includes references to court cases that established interpretations of law that states and providers would be required to follow.
- CMS Guidance: These references reflect various Centers for Medicare and Medicaid Services (CMS) publications that Idaho Medicaid reviewed in the formulation of their policy. The publications themselves are not required to be followed for Idaho Medicaid services.
- Federal Regulations: These references are regulations from the federal level that affected policy development. Usually these include the Code of Federal Regulations, the Social Security Act and other statutes. They are required to be followed.
- Idaho Medicaid Publications: These are communications from Idaho Medicaid to providers that were required to be followed when published. These are included in the handbook for historical reference. The provider handbook supersedes other communications unless the documents are listed in the Policies, Procedures, and Waivers webpage under Medicaid Policies in the Policies Library.
- Idaho State Plan: The State Plan is the agreement between the State of Idaho and the Centers for Medicare and Medicaid Services on how the State will administer its medical assistance program.
- Professional Organizations: These references reflect various publications of professional organizations that Idaho Medicaid reviewed in the formulation of their policy. Providers may or may not be required to follow these references, depending on the individual reference and its application to a provider's licensure and scope of practice.

- Scholarly Work: These references are publications that Idaho Medicaid reviewed in the formulation of their policy. The publications themselves are not required to be followed for Idaho Medicaid services.
- State Regulations: These references are regulations from the state level that affected policy development. They usually include statute and IDAPA. They are required to be followed.

Some citations may not be available on the internet. Copies of the documents may be requested with a public records request. Guidance for public records requests is available on the Department's website.

1. Important Contacts

1.1. Directory

The Directory, Idaho Medicaid Provider Handbook contains a comprehensive list of contacts. The following contacts are presented here for provider convenience.

1.2. Gainwell Technologies

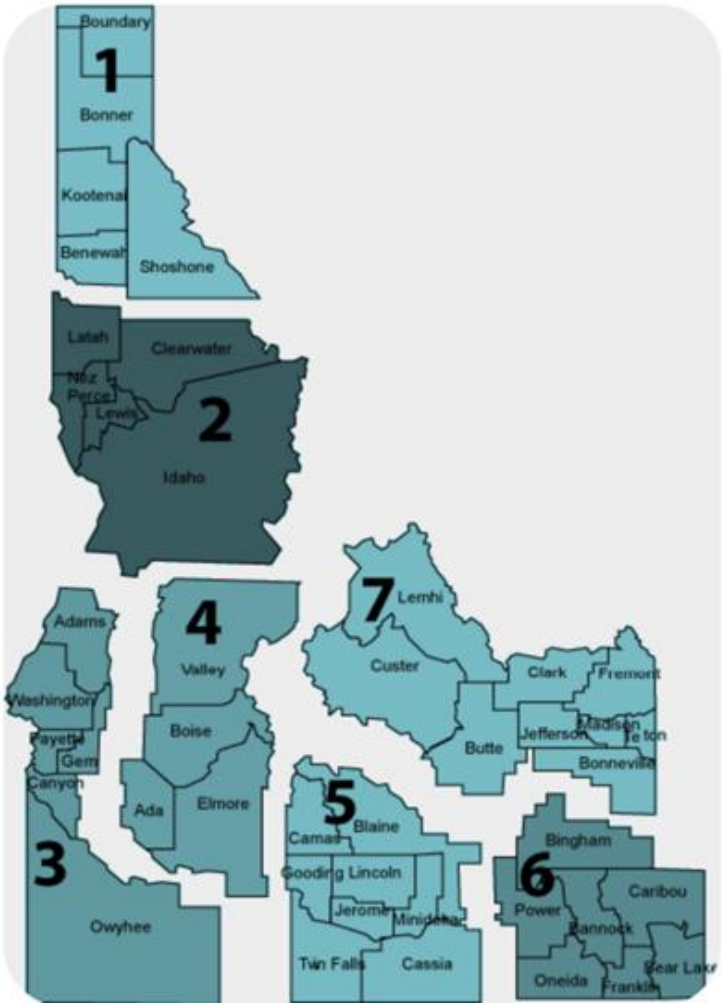
Gainwell Technologies is Idaho Medicaid's fiscal agent that handles all claims processing and customer service issues for participants not on a managed care plan.

Gainwell Technologies Contact Information
Gainwell Technologies Provider Services P.O. Box 70082 Boise, ID 83707 Phone: 1 (866) 686-4272 Fax: 1 (877) 661-0974 IDProviderServices@gainwelltechnologies.com The Medicaid Automated Call Service (MACS) is available twenty-four (24) hours a day, seven (7) days a week. Provider service representatives are available Monday through Friday, 7:00 A.M.-7:00 P.M. MT.
Provider Enrollment P.O. Box 70082 Boise, ID 83707 Phone: 1 (866) 686-4272 Fax: 1 (877) 517-2041 IDProviderEnrollment@gainwelltechnologies.com
Technical Services Phone: 1 (866) 686-4272 Fax: 1 (877) 517-2040 IDEDISupport@gainwelltechnologies.com

1.2.1 Provider Relations Consultants

Gainwell Technologies Provider Relations Consultants help keep providers up to date on billing changes required by program policy changes implemented by the Division of Medicaid. Provider Relations Consultants accomplish this by:

- Conducting provider workshops;
- Conducting live meetings for training;
- Visiting a provider's site to conduct training; and
- Assisting providers with electronic claims submission



Region 1 and the state of Washington
1 (208) 202-5735
Region.1@gainwelltechnologies.com

Region 2 and the state of Montana
1 (208) 202-5736
Region.2@gainwelltechnologies.com

Region 3 and the state of Oregon
1 (208) 202-5816
Region.3@gainwelltechnologies.com

Region 4
1 (208) 202-5843
Region.4@gainwelltechnologies.com

Region 5 and the state of Nevada
1 (208) 202-5963
Region.5@gainwelltechnologies.com

Region 6 and the state of Utah
1 (208) 593-7759
Region.6@gainwelltechnologies.com

Region 7 and the state of Wyoming
1 (208) 609-5062
Region.7@gainwelltechnologies.com

Region 9 and other states (not bordering Idaho)
1 (208) 609-5115
Region.9@gainwelltechnologies.com

1.3. Division of Medicaid

1.3.1. Bureau of Developmental Disability Services

Local offices help with developmental disability service applications, home and community-based waivers, assessments for personal care services, and children's services.

Region 1 – Coeur d'Alene
1120 Ironwood Dr.
Coeur d'Alene, Idaho 83814
208-769-1567
BDDSQA1@dhw.idaho.gov

Region 2 – Lewiston
1118 F St.
Lewiston, Idaho 83501
208-799-4430
BDDSQA2@dhw.idaho.gov

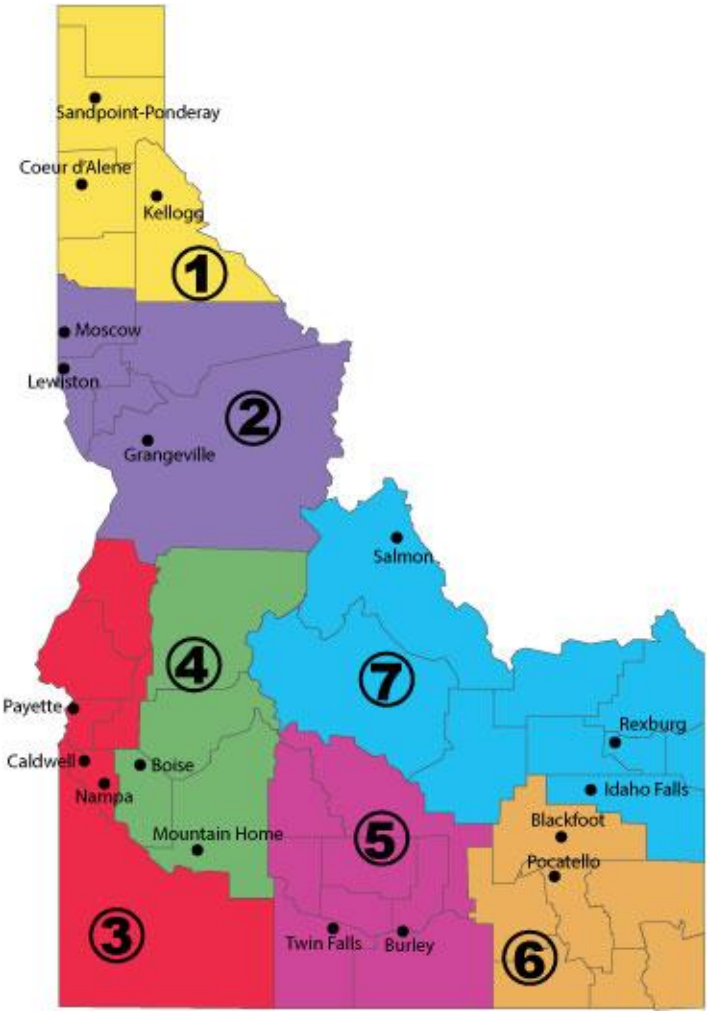
Region 3 – Caldwell
3402 Franklin Rd.
Caldwell, Idaho 83605
208-455-7150
BDDSQA3@dhw.idaho.gov

Region 4 – Boise
1720 Westgate Dr.
Boise, Idaho 83704
208-334-0940
BDDSQA4@dhw.idaho.gov

Region 5 – Twin Falls
601 Pole Line Rd., Suite 3
Twin Falls, Idaho 83301
208-736-3024
BDDSQA5@dhw.idaho.gov

Region 6 – Pocatello
1070 Hiline Rd.
Pocatello, Idaho 83201
208-239-6260
BDDSQA6@dhw.idaho.gov

Region 7 – Idaho Falls
150 Shoup Ave., Suite 4
Idaho Falls, Idaho 83402
208-528-5750
BDDSQA7@dhw.idaho.gov



Case Management is available through the Bureau of Developmental Disabilities Services (BDDS) – Children's Program at the Idaho Department of Health and Welfare to assist participant to access Children's Developmental Disability supports and Children's Habilitative Intervention Services.

BDDS – Children's Program
3402 Franklin Rd
Caldwell, ID 83605
208-334-6500
Children'sDDIntake@dhw.idaho.gov

1.3.2. Bureau of Long Term Care

The Bureau of Long Term Care manages services under the Aged and Disabled (A&D) Waiver. The Bureau can be contacted at:

Bureau of Long Term Care
PO Box 83720
Boise, ID 83720-0009
Phone 1 (877) 799-4430
BLTCCentral@dhw.idaho.gov

1.3.3. The Medical Care Unit

The Medical Care Unit is Idaho Medicaid's team that reviews Prior Authorization (PA) requests for services as listed on the Numerical Fee Schedule.

Medical Care Unit
PO Box 83720
Boise, ID 83720-0009
Phone 1 (866) 205-7403
MedicalCareUnit@dhw.idaho.gov

The status of a PA request submitted to the Medical Care Unit can be checked online at the Gainwell Technologies portal under "Authorization Status", using your National Provider Identifier (NPI). If you have questions on a Denial, click on the Notes, which will explain the reason for the Denial.

1.4. Telligen, Inc

Telligen, Inc. is Idaho Medicaid's quality improvement organization (QIO) that reviews Prior Authorization (PA) requests for some services and surgical procedures as listed on the Numerical Fee Schedule or when a prior authorization would otherwise be indicated. They also conduct reviews of inpatient stays and laboratory services.

Telligen, Inc.
670 E Riverpark Ln. Suite 120
Boise, ID 83706
Phone: 1 (866) 538-9510
E-mail: idmedicaidsupport@telligen.com

See the QIO Provider Manual for a listing of diagnoses and procedures that require PA and details regarding review processes.

2. Provider Qualifications

Providers must be a licensed registered nurse (RN) or licensed practical nurse (LPN) in good standing in accordance with the Nurse Practice Act or must be practicing on a federal reservation and be licensed in another state. Additionally, providers must satisfactorily complete a Department of Health and Welfare background check. Services must be within the scope of practice, licensure, and training of the provider rendering them. The provider, or their agency if they are ineligible to enroll directly, must have a National Provider Identifier (NPI) to be eligible for enrollment. Enrollment as an Idaho Medicaid provider and entering into a provider agreement must be completed prior to providing services for Idaho Medicaid participants.

Providers serving Aged and Disabled (A&D) waiver and personal care services (PCS) participants must be employees of a personal assistance agency (PAA). When an A&D waiver participant's spouse, legal representative, or designee is assisting the participant to self-direct their services through a fiscal intermediary (FI), they may not provide skilled nursing. For Developmental Disabilities (DD) Waiver participants, this service may be delivered by individuals or skilled nursing agency providers.

An RN can provide either oversight of an LPN or direct care. Personal care service (PCS) program nursing service providers must have current Idaho licensure as an RN.

An independent provider is an individual who provides nursing services as an independent contractor and has a signed provider agreement on file with Idaho Medicaid.

The provider agency is an entity that takes responsibility for the care given and provides payroll and benefits to those care providers it employs. The entity must have a signed provider agreement on file with Idaho Medicaid. The provider agency must indicate on the claim if an RN or LPN provided the service delivery. An individual cannot be an agency.

All provider handbook and applicable state and federal regulations must be followed to maintain eligibility for reimbursement. See the General Information and Requirements for Providers, Idaho Medicaid Provider Handbook for more information on enrolling as an Idaho Medicaid provider.

2.1 References: Provider Qualifications

2.1.1 Federal Regulations

"Screening Levels for Medicaid Providers," 42 CFR. 455.450 (2011). Government Printing Office, https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-C/part-455/subpart-E/section-455.450.

2.1.2 Idaho State Plan

ID Adult Developmental Disabilities Waiver (0076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81466.

ID Aged and Disabled Waiver (1076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81471.

2.1.3 State Regulations

"A&D Waiver Services: Provider Qualifications and Duties." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 544. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Adult DD Waiver Services: Provider Qualifications and Duties." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 614. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Agency." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 005.02. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Conditions for Payment." IDAPA 16.03.26, *"Medicaid Plan Benefits,"* Sec. 025. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"ID Adult Developmental Disabilities Waiver." Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81466.

"ID Aged and Disabled Waiver." Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81471.

IDAPA 16.05.06, "Criminal History and Background Checks." Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160506.pdf.

"Individual Providers – Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 020. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

Medical Assistance Program – Services to be Provided, Idaho Code 56-255(5)(d)(i) (2018). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title56/T56CH2/SECT56-255.

"PCS: Procedural Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 553. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"PDN: Provider Qualifications and Duties." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 464. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Provider." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 007.10. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Provider Agreements." IDAPA 16.03.26, *"Medicaid Plan Benefits,"* Sec. 022. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Provider Application Process." IDAPA 16.03.26, *"Medicaid Plan Benefits,"* Sec. 021. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Nurses." Idaho Code Title 54 Chapter 14. Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title54/T54CH14.

3. Participant Eligibility

Nursing services are a benefit of Idaho Medicaid plans. Nursing services for participants enrolled in the Medicaid Basic Plan are limited to diagnostic and evaluation procedures only. Participants must be enrolled in the Medicaid Enhanced Plan to be eligible for additional nursing services. Not all participants are eligible for all services. Services are available based on the participant's enrollment eligibility. Incarcerated individuals or otherwise ineligible non-citizens with Medicaid coverage are not eligible for these services. Before delivery of services, providers must check eligibility to validate coverage. Eligibility can be checked by calling Idaho Medicaid Automated Customer Service (MACS) at 1 (866) 686-4272; or through the Trading Partner Account on Gainwell Technologies Idaho Medicaid website. See the General Information and Requirements for Providers, Idaho Medicaid Provider Handbook, for more detail on eligibility checks.

Participants that are accessing nursing services through the Idaho Adult Developmental Disabilities Home and Community Based Services Waiver (DD Waiver) or the Idaho Aged and Disabled Home and Community Based Services Waiver (A&D Waiver) must meet waiver eligibility criteria.

Private duty nursing (PDN) services are available under the Medicaid Enhanced Plan to participants under the age of twenty-one (21) when skilled nursing care is medically necessary due to the medical severity or complexity of the participant's condition, and the required care cannot be delegated to an unlicensed assistive personnel. The participant must require more care than is available from Home Health nursing services. Participants must have a referral from a medical provider to receive this service.

Participants are eligible to receive supervising RN services when they meet personal care services (PCS) eligibility requirements.

Pregnant individuals with incomes greater than those required for Medicaid Base or Enhanced Plan coverage, but below 133% FPL are eligible for pregnancy-related services.

3.1 References: Eligible Participants

3.1.1 Idaho State Plan

ID Adult Developmental Disabilities Waiver (0076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81466.

ID Aged and Disabled Waiver (1076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81471.

3.1.2 State Regulations

"A&D Waiver Services: Eligibility." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 541. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Adult DD Services: Service Plan Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 573. Department of Administration, State of Idaho,

https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Adult DD Waiver Services: Participant Eligibility." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 611. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"ID Adult Developmental Disabilities Waiver." Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81466.

"ID Aged and Disabled Waiver." Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81471.

"PCS: Eligibility." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 551. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"PDN: Participant Eligibility." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 461. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

4. Covered Services and Limitations

All nursing services must be provided under the order of a licensed physician. The physician must:

- Provide Medicaid the necessary medical information to establish the participant's medical eligibility for services.
- Order all services to be delivered by the nursing provider.
- Sign and date all orders.
- Update participant's POC annually and as changes are indicated, sign and record date of plan approval.
- Determine if the combination of nursing services along with other community resources are no longer sufficient to ensure the health or safety of the participant and recommend institutional placement of the participant.
- Services under the Aged and Disabled (A&D) Waiver must have a signature on the participant's plan of care (POC).

4.1 A&D Waiver Nursing Services

Skilled nursing Aged and Disabled (A&D) Waiver services include intermittent or continuous oversight, training, or skilled care required to be provided by a licensed nurse within their scope of practice under the Nurse Practice Act. Services can be delegated by a registered nurse (RN) when in accordance with the Nurse Practice Act and Idaho Board of Nursing requirements. Services are authorized when the participant's needs exceed the level of care provided under the State Plan personal care services (PCS). Intermittent or continuous oversight and training refers to the supervisory RN who must oversee licensed practical nurse (LPN) services. Training may be provided to natural supports of the participant, so they may properly assist with tasks such as transferring participants whether a nurse is on site or not. Skilled nursing waiver services are not covered if they are less cost-effective than a Home Health visit. Additionally, skilled nursing waiver services must meet federal HCBS requirements as outlined in the Home and Community Based Services (HCBS) section of the Home and Community-Based Services (HCBS) and Long-Term Support Services (LTSS), Idaho Medicaid Provider Handbook.

Skilled nursing waiver service providers are responsible to evaluate for changes of condition. They must notify the plan monitor of significant changes in the participant's physical condition or response to the service delivery. For participants accessing this service through the A&D waiver, providers must also notify the Department, medical provider, and, if applicable, family. Services must be provided according to the approved service plan.

The Bureau of Long Term Care (BLTC) must authorize all A&D Waiver services prior to service delivery. The authorization will indicate the hours of service per week for which the service is authorized. Prior authorizations (PA) are valid for one (1) year from the date of authorization by BLTC unless otherwise indicated on the approval.

A&D Waiver Skilled Nursing Services		
HCPCS	**Modifier**	**Description**
T1001		**Nursing Assessment/Evaluation - RN, 1 Unit = 1 visit**
T1002		**Nursing Services - RN, 1 Unit = 15 minutes**
T1003		**Nursing Services – LPN – 1 Unit = 15 minutes**
G9001		**Coordinated Care Fee – Initial – Agency, 1 Unit = 1 Visit**
G9002		**RN Care Plan Development and Placement, 1 Unit = 15 minutes**

4.1.1 References: A&D Waiver Nursing Services

(a) Federal Regulations

"Contents of request for a waiver." 42 CFR 441.301 (2024). Government Printing Office, https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-C/part-441/subpart-G/section-441.301.

(b) Idaho State Plan

ID Aged and Disabled Waiver (1076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81471.

(c) State Regulations

"A&D Waiver Services: Coverage and Limitations." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 542. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"A&D Waiver Services: Procedural Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 543. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

IDAPA 24.34.01, "Rules of the Idaho Board of Nursing." Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/24/243401.pdf.

Medical Assistance Program – Services to be Provided, Idaho Code 56-255(5)(a)(iv) (2018). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title56/T56CH2/SECT56-255.

"Medical Necessity (Medically Necessary)." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 006.15. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Nurses." Idaho Code Title 54 Chapter 14. Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title54/T54CH14.

4.2 DD Waiver Nursing Services

Skilled nursing waiver services include intermittent or continuous oversight, training, or skilled care required to be provided by a licensed nurse within their scope of practice under the Nurse Practice Act. Services can be delegated by a registered nurse (RN) when in accordance with the Nurse Practice Act and Idaho Board of Nursing requirements. Services are authorized when the participant's needs exceed the level of care provided under the State Plan personal care services (PCS). Intermittent or continuous oversight and training refers to the Supervisory RN, who must oversee licensed practical nurse (LPN) services. Nursing oversight services are limited to one (1) time per month. If additional oversight visits are medically necessary, prior authorization can be requested. Training may be provided to natural supports of the participant, so they may properly assist with tasks such as transferring participants whether a nurse is on site or not. Skilled nursing waiver services are not covered if they are less cost-effective than a Home Health visit. Additionally, skilled nursing waiver services must meet federal HCBS requirements as outlined in the Home and Community Based Services (HCBS) section of the Home and Community-Based Services (HCBS) and Long-Term Support Services (LTSS), Idaho Medicaid Provider Handbook.

Skilled nursing waiver service providers are responsible to evaluate for changes of condition. They must notify the plan monitor of significant changes in the participant's physical condition or response to the service delivery. Services must be provided according to the approved service plan.

The Bureau of Developmental Disability Services (BDDS) must authorize all Developmental Disability (DD) Waiver services prior to service delivery. The authorization will indicate the hours of service per week for which the service is authorized. Prior authorizations (PA) are valid for one (1) year from the date of authorization by BDDS unless otherwise indicated on the approval.

DD Waiver Skilled Nursing Services		
HCPCS	**Modifier**	**Description**
T1000		**Skilled Nursing Services – Independent RN, 1 Unit = 15 minutes**
T1000	**TE**	**Skilled Nursing Services – Agency LPN, 1 Unit = 15 minutes**
T1000	**TD**	**Skilled Nursing Services – Agency RN, 1 Unit = 15 minutes**
T1001		**Nursing Oversight Services – LPN, 1 Unit = 1 visit**
T1001	**TD**	**Nursing Oversight Services – Agency RN, 1 Unit = 1 visit**
T1001	**TD**	**Nursing Oversight Services – Independent RN, 1 Unit = 1 visit**

4.1.2. References: DD Waiver Nursing Services

(a) Federal Regulations

"Contents of request for a waiver." 42 CFR 441.301 (2024). Government Printing Office, https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-C/part-441/subpart-G/section-441.301.

(b) Idaho State Plan

ID Adult Developmental Disabilities Waiver (0076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81466.

(c) State Regulations

"Adult DD Services: Coverage and Limitations." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 612. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Adult DD Waiver Services: Procedural Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 613. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

Medical Assistance Program – Services to be Provided, Idaho Code 56-255(5)(a)(iv) (2018). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title56/T56CH2/SECT56-255.

"Medical Necessity (Medically Necessary)." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 006.15. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

IDAPA 24.34.01, "Rules of the Idaho Board of Nursing." Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/24/243401.pdf.

"Nurses." Idaho Code Title 54 Chapter 14. Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title54/T54CH14.

4.3 Maternity Nursing Visit

Maternity nursing visits are prenatal office visits by a licensed registered nurse, acting within the limits of the Nurses Practices Act, for the purpose of checking the progress of the pregnancy.

These services are only available to women unable to obtain a physician, physician assistant or nurse practitioner to provide prenatal care. This service is to end immediately when a primary care provider is found. This service is limited to a maximum of nine (9) visits.

Pregnancy related services are covered for a postpartum period that begins on the last day of pregnancy and extends through the end of the month in which the sixtieth (60) day period following termination of pregnancy ends.

All pregnancy-related services require prior authorization through Telligen, Inc. Prior authorizations are valid for one (1) year from the date of authorization unless otherwise indicated on the approval.

4.3.1 References: Maternity Nursing Visit

a) State Regulations

IDAPA 24.34.01, "Rules of the Idaho Board of Nursing." Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/24/243401.pdf.

Medical Assistance Program – Services to be Provided, Idaho Code 56-255(5)(a)(iv) (2018). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title56/T56CH2/SECT56-255.

"Medical Necessity (Medically Necessary)." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 006.15. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Nurses." Idaho Code Title 54 Chapter 14. Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title54/T54CH14.

"Pregnancy-Related Services: Coverage and Limitations" IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 362. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

4.4 Private Duty Nursing

Private duty nursing (PDN) services include medically necessary care for participants performed by a licensed nurse under the Nurse Practice Act. Services that can be delegated to an unlicensed assistive personnel are not covered under this service. When services are provided by a licensed practical nurse (LPN), registered nurse (RN) supervisory visits must occur at least once every thirty (30) days.

PDN services are provided in the participant's residence, or when normal life activities take the participant outside the residence, such as school or other activities. PDN will not be authorized if PDN is only being requested outside the participant's residence, but the participant does not need PDN in the residence. A personal residence does not include licensed nursing facilities, intermediate care facilities for individuals with intellectual disabilities, resident assisted living facilities, hospitals, or public and private schools.

PDN providers are responsible to evaluate for changes in the participant's medical condition and to notify the medical provider immediately of any changes or response to PDN services and documenting the notification in the service record. They must also notify the Department within forty-eight (48) hours or on the first business day after a weekend or holiday of any change in the participant's condition or if they are hospitalized.

The Bureau of Long Term Care (BLTC) must authorize all PDN services prior to service delivery. The authorization will indicate the hours of service per week for which the service is authorized. Prior authorizations are valid for one (1) year from the date of authorization by BLTC unless otherwise indicated on the approval.

PDN Services		
HCPCS	**Modifier**	**Description**
T1001		**Nursing Assessment/Evaluation - RN, 1 Unit = 1 visit**
T1002		**Nursing Services - RN, 1 Unit = 15 minutes**
T1003		**Nursing Services – LPN – 1 Unit = 15 minutes**
G9002		**RN Care Plan Development and Placement, 1 Unit = 15 minutes**

4.4.1 References: Private Duty Nursing

b) State Regulations

IDAPA 24.34.01, "Rules of the Idaho Board of Nursing." Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/24/243401.pdf.

Medical Assistance Program – Services to be Provided, Idaho Code 56-255(5)(a)(iv) (2018). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title56/T56CH2/SECT56-255.

"Medical Necessity (Medically Necessary)." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 006.15. Department of Administration, State of Idaho,

https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Nurses." Idaho Code Title 54 Chapter 14. Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title54/T54CH14/.

"PDN: Limitations." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 462. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"PDN: Participant Eligibility." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 461. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"PDN: Provider Qualifications and Duties." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 464. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

4.5 Supervising RN for Personal Care Services

Supervisory registered nurses under the personal care services (PCS) Program have the responsibility for supervising the delivery of PCS to the participant. Nursing services under the PCS Program do not include hands-on care. A registered nurse (RN) who is functioning as a personal assistant may not provide supervisory RN services to the same participant.

The Bureau of Long Term Care (BLTC) must authorize all PCS Supervisory RN services prior to service delivery. The authorization will indicate the hours of service per week for which the service is authorized. Prior authorizations are valid for one (1) year from the date of authorization by BLTC unless otherwise indicated on the approval.

Supervising RN for PCS		
HCPCS	**Modifier**	**Description**
T1001		**Nursing Assessment/Evaluation - RN, 1 Unit = 1 visit**
G9002		**RN Care Plan Development and Placement, 1 Unit = 15 minutes**

4.5.1 References: Supervising RN for PCS

a) State Regulations

Medical Assistance Program – Services to be Provided, Idaho Code 56-255(5)(a)(iv) (2018). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title56/T56CH2/SECT56-255.

"Medical Necessity (Medically Necessary)." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 006.15. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"PCS: Coverage and Limitations." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 552. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

5. Prior Authorization

See the General Billing Instructions, Idaho Medicaid Provider Handbook for more information on billing prior authorized services.

6. Documentation

All nursing services provided must be on a nursing plan of care, which must be maintained in the participant's home. The nurse is responsible for the nursing plan of care, which is based upon the nurse's assessment and observation of the participant, orders of the participant's physician, the service plan, information from the participant, and other relevant members of the care team as needed. The nursing plan of care must include all aspects of the medical care necessary to be performed, including the amount, type, and frequency of such services. The nursing plan of care must be revised and updated based upon treatment results or as necessary to meet the participant's changing medical needs, but at least annually.

Providers must maintain records which must include the date, start and end time of service delivery, and comments on participant's response to services delivered. When services are provided by a licensed practical nurse (LPN), skilled nursing provider, or other non-licensed direct care provider, providers must document that oversight of services by a registered nurse (RN) is in accordance with the Idaho Nurse Practice Act and Idaho Board of Nursing requirements. When nursing services are delegated to a non-licensed provider, the type, amount of supervision and training to be provided must also be included in the plan.

All providers are required to generate records at the time the service is delivered and to maintain documentation that supports reimbursement for services. Individual services may have additional documentation requirements. General requirements for documentation and signatures can be found in General Information and Requirements for Providers, Idaho Medicaid Provider Handbook, including standard retention requirements. Records limited to checklists with attendance/appointments, procedure codes, and units of time are insufficient to meet this requirement. Documentation must be signed and dated by the person delivering the service with their name clearly printed.

Documentation must be made available immediately upon request by Department personnel acting in their official capacity. Services delivered without adequate documentation are not eligible for reimbursement. Providers must only submit records for utilization management when requested by the Department. Documentation sent unsolicited, or not for a service requiring prior authorization, will not be reviewed by the Department. Unreviewed documentation does not constitute approval or authorization of a service.

6.1. References: Documentation

6.1.1. Federal Regulations

Disclosure of Information by Providers and Fiscal Agents, 42 CFR 455, Subpart B (2023). Government Printing Office, https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-C/part-455/subpart-B.

6.1.2. Idaho State Plan

ID Adult Developmental Disabilities Waiver (0076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81466.

ID Aged and Disabled Waiver (1076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81471.

6.1.3. State Regulations

"A&D Waiver Services: Procedural Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 543. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

Administrative Remedies, Idaho Code §56-209h(3)(2018). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/title56/t56ch2/sect56-209h.

"Adult DD Services: Service Plan Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 573. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Documentation of Services and Access to Records." IDAPA 16.05.07, "The Investigation and Enforcement of Fraud, Abuse, and Misconduct," Sec. 101. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160507.pdf.

"Nurses." Idaho Code Title 54 Chapter 14. Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title54/T54CH14/.

"PCS: Procedural Requirements." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 553. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"PDN: Provider Qualifications and Duties." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 464. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Records." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 035. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

7. Reimbursement

Providers must be enrolled to receive reimbursement from Idaho Medicaid. Providers have the burden of proof to establish entitlement to payment. The nursing provider and, when necessary, the independent RN or agency providing oversight, are paid a fee-for-service as established by Medicaid. Usual and customary fees are paid up to the Medicaid maximum allowance listed in the Provider Reimbursement Rates for specific procedure codes, modifiers, descriptions, unit equivalencies, and allowed amounts. Separate claims for payment must be submitted for each provider. Payments are limited to the services specified on the participant's plan of care (POC).

Questions about pricing should be directed to the Office of Reimbursement, Idaho Division of Medicaid, at (208) 287-1180 or email MedicaidReimTeam@dhw.idaho.gov. Requests for a reimbursement rate review should be directed to the Provider Rate Review team at MedicaidRateReview@dhw.idaho.gov.

Claims must be billed with the appropriate primary diagnosis code in field 21 on the CMS-1500 claim form or in the appropriate field of the electronic claim form. Services can only be billed for the following places of service:

- **03** School
- **12** Home
- **33** Custodial Care Facility, if such services are not included in the negotiated service agreement with the facility
- **99** Other (Adult Day Health)

Enter this information in field 24B on the CMS-1500 claim form or in the appropriate field of the electronic claim form.

The following places are excluded as personal residences: licensed Skilled Nursing Facilities (SNF) or Intermediate Care Facilities (ICF), licensed Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), licensed shelter homes, licensed professional foster homes, and licensed hospitals.

See the *General Billing Instructions*, Idaho Medicaid Provider Handbook regarding billing, prior authorization, and requirements for billing all other third party resources before submitting claims to Medicaid. See the Participant Financial Responsibility section of the General Information and Requirements for Providers, Idaho Medicaid Provider Handbook for information on when billing a participant is allowable including co-payment.

7.1. References: Reimbursement

7.1.1. Idaho State Plan

ID Adult Developmental Disabilities Waiver (0076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81466.

ID Aged and Disabled Waiver (1076.R07.00). Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81471.

7.1.2. State Regulations

"A&D Waiver Services: Provider Reimbursement." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 545. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Adult DD Waiver Services: Provider Reimbursement." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 615. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Burden of Proof." IDAPA 16.05.03, *"Contested Case Proceedings and Declaratory Rulings,"* Sec. 133. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/2023%20Archive/16/160501.pdf.

"General Payment Procedures." IDAPA 16.03.26, "*Medicaid Plan Benefits*," Sec.030. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

"Mandatory Application." IDAPA 62.01.01, *"Office of Administrative Hearings,"* Sec. 800.01. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/62/620101.pdf.

"PCS: Reimbursement." IDAPA 16.03.26, "Medicaid Plan Benefits," Sec. 555. Department of Administration, State of Idaho, https://proddfmmainsa.blob.core.windows.net/dfm-admin-website/rules/current/16/160326.pdf.

Provider Payment, Idaho Code 56-265 (2020). Idaho State Legislature, https://legislature.idaho.gov/statutesrules/idstat/Title56/T56CH2/SECT56-265.

Appendix A. Nursing Services, Provider Handbook Modifications

This table lists the last three (3) years of changes to this handbook as of the publication date. Changes to references or of a non-substantive technical nature are not captured.

Nursing Services, Provider Handbook Modifications				
Version	**Section/Column**	**Modification Description**	**Date**	**SME**
5.0	All	Published version	01/23/2026	TQD
4.1	All	Updated for modernization	01/23/2026	W Deseron B Kennedy