



# **ND Contractor Meeting**

**March 6, 2025**



# Agenda

- Introductions
- Medicaid Fraud Control Division presentation
  - \* No PowerPoint provided for dissemination
- Q&A
- Insurance review
- Other updates
- Q&A



# Insurance Requirements

- The named insured on your insurance should be your business entity name (The first/top name listed on your business license)
  - For a Sole Proprietor this would commonly be your last, first name.
  - For an LLC, this will be your Business Name.
- The contract requires both a Professional Liability Policy and a General Liability Policy (General, Supplemental, Workplace or Premise) in the amounts of \$1million per occurrence and \$2million aggregate **for each.**
- DSHS must be named as additionally insured, the following language must be present on your Certificate of Insurance **exactly:**  
**“The State of Washington, Department of Social & Health Services (DSHS), its elected and appointed officials, agents, and employees of the state, shall be named as additional insured”**

Questions? Email [NursingContracts@dshs.wa.gov](mailto:NursingContracts@dshs.wa.gov)

# Authorizations and Billing

- Please check on authorization status when billing and prior to authorization ending. This will be in P1. This will assist with errors in billing and f/u that may need to be made with the CM.
  - Bill in a timely manner to avoid errors.
  - Inform Providers in writing that you **must** be notified immediately if there is a change in condition, change in medication or task, the client goes to acute care, and passes away.
  - If the client is in an acute or skilled facility, you can only bill with **prior approval from CM**. This is intended to be for your day of service when they move from home to facility. This is State Only Funds and must be approved. Please see the next slides for more information.
  - If the CM would like an assessment prior to discharge from an acute facility they must ask you in writing and put in a SOAP RAC for authorization of billing. You can give them the units needed after the client is seen if that is helpful for the CM.
  - As a nurse delegator it is not your responsibility to do case management, and we cannot pay you for case management. As it may be helpful for placement the CM will need to authorize this as an exception when client is in an acute or skilled facility.
- Please see Chapter 13 and DDA Policy next slides.

## CM instructions for HCS, AAA and DDA

- Before a client can receive delegation, you must determine that the client:
  - a) Has an “unmet” or “partially met” need for a skilled task (per CARE) such as medication management, and either:
    - a. Lacks the informal support to provide the delegated task, *or*
    - b. Is unwilling or unable to self-direct their care.

\*See Chapter 3 [Chapter 3.docx \(live.com\)](#)
  - b) Resides in an approved community setting; and

- c) Medicaid Care Services (MCS) and State Funded LTC for Non=Citizens receiving personal care under the state-funded programs can also receive RND services. *See Chapter 7g.*
  - Community First Choice (CFC)
  - CFC + Community Options Program Entry System (COPES)
  - Roads to Community Living (RCL)
  - New Freedom
  - Residential Support Waiver (RSW)
  - ALTSA only pays for ND if the client lives in an AFH.
  - Developmental Disability Administration (DDA) Services
  - MAC/TSOA

### *Authorization of Nurse Delegation services; hospital or institutional*

- When a client resides in or admitted to an institutionalized setting, the case manager may request a DSHS contracted Nurse Delegator to assess the client to determine the appropriateness of delegation and begin the delegation process.
- Services will be authorized under an ALTSA Recipient Aid Category (RAC) 3490 State Only Adjusted Payment (SOAP) or DDA RAC 3930 State Funded Community Support Services.

### *Authorization of Nurse Delegation services for a new client who is not currently on services.*

- Please follow steps below:
1. We must use state only funds via ALTSA RAC 3490 State Only Adjusted Payment (SOAP) or DDA RAC 3930 State Funded Community Support Services to pay for nurse delegation services while client is in a hospital or institutional setting.
  2. Add the RAC on the RAC eligibility screen with start/end dates that match the dates of service that the client is in the institutional setting.
  3. Create a social service authorization for nurse delegation services.
  4. Because the client does not yet have personal care or other community services the service line will generate the following error, #30115 “Nurse Delegation services can only be authorized with certain other service.
  5. This error should be forced by the ALTSA Nursing Delegation Program Manager or the DDA case manager’s supervisor or a DDA Payment Specialist.



# RAC and State Only Adjusted Payments

## ALTSA RACs

- Used when client is eligible for services and in Community Based Setting (Home, AFH, Supported Living)
- Typically, RAC will be named after a program client is on (COPES, CFC etc.)
- Matched through Medicare/Medicaid (Federal and State Funded)
- Designed for on-going supports
- Long term authorizations (1 year)

## State Only Adjusted Payments (SOAP RAC)

- Used to determine if a client is eligible and/or when client is **not** in a Community Based Setting (Ex: Hospital)
- Medicare/Medicaid pays a Facility Setting to provide all needed supports and services
- Funding is provided only through State dollars (no Federal Match/funding)
- Designed to be short term
- To bill under an ALTSA/DDA RAC when a client is hospitalized is considered “double dipping”. Medicaid/Medicare is paying a hospital to provide for all needs, so ALTSA/DDA shouldn’t be matched for services provided.
- State only dollars are used to avoid this conflict (SOAP RAC)
- Important to keep in close contact with CM/NCC.

## Other Updates:

- Request for additional units for ALTSA and DDA will come only to [Nursedelegation@dshs.wa.gov](mailto:Nursedelegation@dshs.wa.gov) there is a NEW RFAU form to use. Please update to this one.
- Please update **all** your documents to the most current if you haven't already.
- WABON FAQ <https://nursing.wa.gov/practicing-nurses>
- Audits have started and you will need to follow the timeline given to you for responses.





# 2025 Schedule

Contractor Meeting Virtual 10 AM to 12 PM

- May 1<sup>st</sup>
- July 10<sup>th</sup>
- September 4<sup>th</sup>
- November 6<sup>th</sup>





# Thank you for attending

Meeting notes will be posted NEXT week to:  
DSHS ALTSA Nurse Delegation Program:  
Contractor Meetings

For Delegation/Contract questions email:  
Janet Wakefield ND Program Manager  
[Janet.Wakefield@dshs.wa.gov](mailto:Janet.Wakefield@dshs.wa.gov) or  
\*\* [nursedelegation@dshs.wa.gov](mailto:nursedelegation@dshs.wa.gov)

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