



Commonwealth of Massachusetts
Executive Office of Health
and Human Services
Division of Medical Assistance
600 Washington Street
Boston, MA 02111

Medical Assistance Program
Municipally Based Health Services
Bulletin 3A
November 1995

TO: Municipally Based Health Services Providers Participating in the Medical Assistance Program

FROM: Bruce M. Bullen, Commissioner *BMB*

RE: NEW SERVICE CODES FOR PRIVATE DUTY NURSING REIMBURSEMENT

Background

The Division of Medical Assistance (DMA) has determined reimbursement rates for municipally based health services providers, to enable them to bill DMA for private duty nursing (PDN) services for special education students, as described in the Chapter 766 Regulations of the Department of Education at 603 CMR 28.00. These rates are **effective November 1, 1995**, and are subject to future adjustments by the Division.

In order to have the PDN specialty added, providers must make a written request to the DMA Provider Enrollment and Information Unit before submitting claims for payment with the new service codes.

Definition

PDN services administered by a registered nurse (RN) or a licensed practical nurse (LPN) are defined as "continuous specialized skilled nursing services" lasting two hours or more at a time and provided directly to one child or not more than two children.

Through agreement with the Department of Education, all PDN services determined to be related to the special education program, included in the student's Individual Education Plan (IEP), and paid for directly by school districts do not require prior authorization from DMA. Chapter 766 Evaluation TEAMS will describe the need for the number of private duty nursing hours necessary to be delivered by school systems for students to make effective progress in school. The TEAMS will base their decisions on their own assessments and determinations of medical necessity.

Receipt of PDN services must be verified based on information contained in the Special Education Service Delivery section (also known as the "service delivery grid") of the recipient's IEP. The PDN services provided must be related to the student's special education progress.

Service Codes

Municipal Medicaid providers must bill for these PDN services using the hourly rates that are listed on the following chart.

Service Codes	Agency/Individual	Hrly. Rates	Federal Share
x7670	RN Agency (one patient)	\$29.50	\$14.75
x7671	RN Individual (one patient)	\$19.10	\$ 9.55
x7672	RN Agency (two patients)	\$22.13	\$11.06
x7673	RN Individual (two patients)	\$14.33	\$ 7.16
x7674	LPN Agency (one patient)	\$22.25	\$11.12
x7675	LPN Individual (one patient)	\$14.40	\$ 7.20
x7676	LPN Agency (two patients)	\$16.70	\$ 8.35
x7677	LPN Individual (two patients)	\$10.80	\$ 5.40

Federal Reimbursement

The **federal share amount** of the rate for these PDN services will be returned to the city, town, or regional school district on a quarterly basis, along with reimbursement for other claimed services. The disbursement is currently scheduled to take place during the fourth week of the months of April, July, October, and January. The **federal share amount** for the above services is 50 percent of the hourly rate (FFP).

Retroactive Billing

Claims for PDN services may be submitted retroactively. All claims must be received by Unisys within 24 months of the date of service. Claims received after the 24-month deadline will not be reimbursed.

Claims Submission

Municipal Medicaid providers must adhere to the following requirements when billing for PDN services.

- All RNs and LPNs providing PDN services must be licensed by the Commonwealth of Massachusetts.
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Claims Submission
(cont.)

- No less than two hours and no more than 10 hours may be provided per school day per student. (Each hour is equal to one unit.) No more than 50 units per week may be provided.
- Claim form no. 9 Block 27: Description of Service must be "PDN Hour Wkdy."

The total number of hours to be considered for PDN services will be evaluated by DMA's Private Duty Nurse Program reviewers. Non-school hours will be prorated to meet the total hourly requirements listed in the *Private Duty Nurse Manual* at 130 CMR 414.407. Copies of the *Private Duty Nurse Manual* may be obtained by making a written request to Unisys.

Questions

If you have any questions concerning the information in this bulletin, please call the Provider Services Unit at Unisys at (617) 628-4141 or 1-800-325-5231, or the Division's Municipal Medicaid Program at (617) 348-5464.
