# **Independent Nurse Getting Started Checklist**

# **Independent Nurse Provider**

Independent Nurses provide continuous skilled nursing (CSN) services to complex-care members throughout the Commonwealth. Most complex-care members receive CSN services from multiple providers in a home setting. Independent Nurses do not work with an agency; they are independently contracted with MassHealth and are self-employed. They are responsible for providing services, documentation, and submitting claims for billing.

#### **Definitions**

<u>Independent Nurse</u> – a licensed nurse who independently enrolls as a provider in MassHealth to provide CSN services. Independent nurse providers are governed by 130 CMR 414.000.

<u>Continuous Skilled Nursing (CSN) Services</u> – a nurse visit of more than two continuous hours of nursing services.

<u>Complex-care Member</u> – a MassHealth member whose medical needs, as determined by the MassHealth agency or its designee, are such that he or she requires a nurse visit of more than two continuous hours of nursing services to remain in the community.

### **Pre-enrollment**

Below is a checklist of information that will be needed to complete enrollment via the <u>MassHealth</u> <u>LTSS Provider Portal</u>. Nurses who wish to enroll as a MassHealth Independent Nurse must complete the following items:

- Review the <u>IN Provider Manual</u> and <u>IN Provider Regulations</u>
- ☐ Apply for an <u>NPI Number</u>
- ☐ Review Independent Nurse Provider Application Instructional video
- ☐ Enroll as an IN Provider on the LTSS Provider Portal.
  - Register for access to the LTSS Provider Portal by clicking the Register Button at the top of the page
  - Log-in to LTSS Provider Portal to submit a new application
    - Select the Enrollment Tab
    - Select New Application
    - Select the Provider Type Independent Nurse (PT61)
    - Select Next button and Independent Nurse Application will load
  - Complete the required information on the IN Application; these forms can be found via the LTSS Provider Portal <a href="https://www.masshealthltss.com">www.masshealthltss.com</a>
    - These forms can be found on and submitted via the LTSS Provider Portal www.masshealthltss.com
      - Provider Contract for Individuals with Original Signature
      - Federally Required Disclosures Form for Individual Practitioners
      - Data Collection Form
      - Massachusetts Substitute W-9 form with Original Signature

- Electronic Funds Transfer Form with Original Signature
- Electronic Remittance Advice
- Trading Partner Agreement
- Criminal Offender Record (CORI) form with copy of a valid driver's license or passport
- COVID-19 Vaccination Status Form with proof of initial COVID-19 series or exemption letter

## **Post-enrollment**

Below is a checklist of information that must be completed by the Independent Nurse, once enrolled as a MassHealth Provider.

|       | Receive and review the <u>Independent Nurse Provider Information and Resources Document</u>    |   |  |
|-------|--|---|--|
|       | Register and Attend Mandatory IN Provider Training   |   |  |
|       | <ul> <li>To Register, Ic</li> </ul>  | g-in to LTSS Provider Portal <u>www.masshealthltss.com</u>              |  |
|       | <ul> <li>Select the trai</li> </ul>  | ning tab  |  |
|       | <ul> <li>Scroll down to</li> </ul>   | section 4. Independent Nurses   |  |
|       | <ul> <li>Click on LINK</li> </ul>  | O WEBEX/Teams REGISTRATION  |  |
|       | Sign up for MassHealt  | h Provider Bulletins and Transmittal Letters to keep updated on new     |  |
|       | regulations and/or notices   |   |  |
|       | Consider joining the IN Stakeholder Group  |   |  |
|       | <ul> <li>For more info</li> </ul>  | rmation, contact Annie Kazarnovsky at anne.kazarnovsky@mass.gov         |  |
|       | $\square$ When Community Case Management (CCM) calls to welcome you, consider their invitation |   |  |
|       | added to the IN List so  | interested members/families can contact you                             |  |
|       | ☐ Sign up for the Online CCM Nurse Directory and create a profile. Once matched with a m       |   |  |
|       | call CCM and obtain a  | prior authorization. A PA is required to deliver and bill for services. |  |
|       | <ul> <li>Review <u>Independent</u></li> </ul>  | endent and Agency Nurse Job-Aid for instructions on registering         |  |
|       | Once you have identified a member to serve, Obtain Prior Authorization from the member's       |   |  |
|       | Clinical Manager with Community Case Management (CCM)  |   |  |
|       | Check member eligibility status within the POSC EVS  |   |  |
|       | <ul> <li>To view job ai</li> </ul>   | d on how to verify member eligibility status, click <u>here</u>         |  |
|       | Submit claim(s) on POSC referencing IN service codes   |   |  |
|       | <ul> <li>Job aids on cla</li> </ul>  | im submissions can be found <u>here</u>                                 |  |
|       | o Review <u>claim</u>  | <u>zuide</u>  |  |
| Ongo  | ina  |   |  |
| Uligo | ilig   |   |  |
|       | Utilize the MassHealth   | LTSS Provider Portal to:  |  |
|       | <ul> <li>Make updates</li> </ul>   | to your provider profile  |  |
|       | <ul> <li>Complete you</li> </ul>   | r Annual CORI   |  |
|       | <ul> <li>Complete you</li> </ul>   | r revalidation every 5 years  |  |
|       | <ul> <li>Register for tr</li> </ul>  | ainings   |  |
|       | <ul> <li>Review links to</li> </ul>  | resources   |  |

MMIS Job Aid: Void a Paid ClaimMMIS Job Aid: Replace a Claim

- MMIS POSC Job Aid: Professional Claim Submission with MassHealth
- MassHealth MMIS Job <u>Aid</u>: Inquire about a Prior Authorization Request
- POSC Job Aid: View Remittance Advice Reports
- Job aids for the Provider Online Service Center (POSC)
- MassHealth LTSS Annual CORI Instructions

O Virtual Gateway Help Desk at 800-421-0938

| Review the IN Provider Bulletins and IN Transmittal Letters weekly for updates                 |  |  |
|--|--|--|
| Review and reference the <u>IN Provider Regulations</u> frequently                             |  |  |
| Regularly communicate with CCM on changes to a member's PA or medical necessity for CSN        |  |  |
| services   |  |  |
| <ul> <li>Community Case Management 800-863-6068 or <u>commcase@umassmed.edu</u></li> </ul>     |  |  |
| Communicate with CCM or search the Online CCM Nurse Directory to find additional member        |  |  |
| <ul> <li>Community Case Management 800-863-6068 or <u>commcase@umassmed.edu</u></li> </ul>     |  |  |
| Claim questions – how to submit a claim or issues with a claim, and provider questions:        |  |  |
| <ul> <li>Contact the LTSS Provider Support Center at 844-368-5184 or</li> </ul>                |  |  |
| support@masshealthltss.com   |  |  |
| Enrollment and Revalidation Questions Contact:   |  |  |
| <ul> <li>LTSS Provider Service Center at 844-368-5184 or support@masshealthltss.com</li> </ul> |  |  |
| Password reset for Provider Online Service Center (POSC) Contact:                              |  |  |