



TEXAS HEALTH AND HUMAN SERVICES COMMISSION

Memorandum

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EXECUTIVE COMMISSIONER

To: Managed Care Organizations
Managed Care Program Oversight
Enrollment Resolution Services
Program Support and Utilization Review
Health Plan Management

From: Emily Zalkovsky
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Subject: Nurse Assessment, Training, and Supervision of Delegated Tasks for Community First Choice and Personal Care Services in Managed Care

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This memorandum applies to managed care programs. This memorandum provides policy guidance for managed care organizations (MCOs) regarding the provision of and reimbursement for a registered nurse to assess a member, train and supervise an attendant to provide delegated tasks through Community First Choice (CFC) or Personal Care Services (PCS).

Assistance with health-related tasks is a component of state plan CFC personal assistance services (PAS) and state plan personal care services (PCS) in the Comprehensive Care Program. According to state law, health-related tasks include tasks delegated by a registered nurse (RN), health maintenance activities (HMAs), and extension of therapy. Texas Board of Nursing (BON) regulates nurse standards of practice, including delegation of nursing tasks and HMA determination. For information about delegation and HMAs, refer to the Texas Administrative Code for the Texas BON, Title 22, Part 11, Rules 224 and 225. Assistance with health-related tasks is not a component of state plan personal assistance services (also called primary home care) for members over 21.

The MCO service coordinator and/or Local Intellectual and Developmental Disability Authority (LIDDA) staff performing the person-centered service planning process assesses members for assistance with health-related tasks using [Form H6516](#), Community First Choice, Section V, Health-Related Tasks Screening Tool. The MCO service coordinator assesses a member under age 21 for assistance with health related tasks using the Personal Care Assessment Form, Section J, Licensed/ Professional Nursing Needs. If the assessment suggests the member requires

assistance with health-related tasks, the assessor must make a referral to the member's MCO to authorize an assessment by an RN to determine if any tasks may be delegated tasks or HMAs.

CFC provider agencies include:

- All home and community support services agencies (HCSSAs), licensed under Texas Administrative Code, Title 40 Chapter 97.
- Unlicensed Home and Community Services (HCS) and Texas Home Living (TxHmL) agencies.

HCSSAs providing CFC or PCS only and HCS and TxHmL agencies may contract with an RN to assess members for health maintenance activities (HMAs) and health-related delegable tasks, as well as training and ongoing supervision of the attendant to which the tasks are delegated. The same nurse that conducts the assessment must train and supervise the attendant. If the nurse is no longer able to supervise the attendant and the agency contracts with a new nurse, the new nurse must conduct a new assessment and train and supervise the attendant. If a new attendant will provide the delegated tasks, the new attendant must be trained and supervised by the RN who conducted the assessment of the member.

MCOs may require prior authorization for an RN assessment of a member to determine if health-related tasks are delegable or may be an HMA. The assessment is limited to a maximum of 2 events per year of up to 12, 15 minute units (three hours), per event, using the approved procedure code (G0162).

For tasks an RN determines are delegable, the same RN trains the member's attendant(s), as needed and provides ongoing supervision, consistent with requirements contained in the Texas Administrative Code for the Texas BON, Title 22, Part 11, Rules [224](#) and [225](#). Training and supervision of the member's attendant(s) is limited to a maximum of 12, 15 minute units (3 hours) per 30 days, using the appropriate procedure code (G0162) and modifier (U1). The member's MCO may authorize fewer units, depending on the member's assessed need and the tasks delegated to the attendant(s).

Members Using the Consumer Directed Services (CDS) Option

Members using the CDS option may determine health-related tasks without a nurse assessment. Members, or their legally-authorized representative (LAR), may train and supervise an attendant performing HMAs, consistent with Texas Government Code [§531.051](#). Members and/or their LAR may not train attendants to perform any tasks listed in Texas Administrative Code, [§225.13](#), Tasks Prohibited From Delegation.

Provider Reimbursement

Medicaid Only Members

Licensed HCSSAs should seek reimbursement from the member's MCO using procedure code G0162 when assessing a member for health-related tasks. If the RN determines it is safe to delegate health-related tasks to a member's attendant(s), the HCSSA should seek reimbursement from the member's MCO using procedure code G0162 and the modifier U1 when training and providing ongoing supervision of the attendant(s). MCOs must reimburse providers according to the MCO's policies, outlined in the MCO's provider handbook.

Non-licensed CFC providers contracting with an RN should seek reimbursement from the member's MCO using procedure code G0162 when assessing a member for health-related tasks. If the RN determines it is safe to delegate health-related tasks to a member's attendant(s), the provider should seek reimbursement from the member's MCO using procedure code G0162 and the modifier U1 when training and providing ongoing supervision of the attendant(s). MCOs must reimburse providers according to the MCO's policies, outlined in the MCO's provider handbook.

Dual Eligible Members

Licensed HCSSAs should seek reimbursement from the Texas Medicaid & Healthcare Partnership (TMHP) using procedure code G0162 when assessing a member for health-related tasks. If the RN determines it is safe to delegate health-related tasks to a member's attendant(s), the HCSSA should seek reimbursement from TMHP using procedure code G0162 and the modifier U1 when training and providing ongoing supervision of the attendant(s). A prior authorization is not required from TMHP because the member's MCO provides the prior authorization for the service.

Non-licensed CFC providers contracting with an RN should seek reimbursement from the member's MCO using procedure code G0162 when assessing a member for health-related tasks. If the RN determines it is safe to delegate health-related tasks to a member's attendant(s), the provider should seek reimbursement from the member's MCO using procedure code G0162 and the modifier U1 when training and providing ongoing supervision of the attendant(s). MCOs must reimburse providers according to the MCO's policies, outlined in the MCO's provider handbook.

If you have any questions regarding this memorandum, you may contact Amanda Dillon at 512-462-6396 or at amanda.dillon@hhsc.state.tx.us.