## 9505.0360 HOME CARE NURSING SERVICES.

- Subpart 1. **Definition; home care nursing service.** For purposes of this part, "home care nursing service" means a nursing service ordered by a physician to provide individual and continual care to a recipient by a registered nurse or by a licensed practical nurse.
- Subp. 2. **Prior authorization requirement.** Medical assistance payment for home care nursing service provided to a recipient without prior authorization is limited to no more than 50 hours per month. Prior authorization is a condition of medical assistance payment for home care nursing services to a recipient in excess of 50 hours per month and for home care nursing services provided in a hospital or long-term care facility.
- Subp. 3. **Covered service.** A home care nursing service in items A to C is eligible for medical assistance payment:
- A. service given to the recipient in his or her home, a hospital, or a skilled nursing facility if the recipient requires individual and continual care beyond the care available from a Medicare certified home health agency or personal care assistant or beyond the level of nursing care for which a long-term care facility or hospital is licensed and certified;
  - B. service given during medically necessary ambulance services; and
- C. service that is required for the instruction or supervision of a personal care assistant under part 9505.0335. The service must be provided by a registered nurse.
- Subp. 4. **Payment limitations.** To be eligible for medical assistance payment, a home care nursing service must meet the conditions in items A to D.
  - A. The service must be ordered in writing by the recipient's physician.
- B. The service must comply with the written plan of care approved by the recipient's physician.
  - C. The service may be provided only if:
- (1) a home health agency, a skilled nursing facility, or a hospital is not able to provide the level of care specified in the recipient's plan of care; or
- (2) a personal care assistant is not able to perform the level of care specified in the recipient's plan of care.
- D. The service must be given by a registered nurse or licensed practical nurse who is not the recipient's legal guardian or related to the recipient as spouse, parent, or child whether by blood, marriage, or adoption.

Statutory Authority: MS s 256B.04

**History:** 12 SR 624; L 1987 c 209 s 39; L 2014 c 291 art 9 s 5

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