

<b>Topic:</b>	Direct Nursing Services-Medicaid Provider Enrollment
<b>Date Issued/Updated:</b>	10/28/2016

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## Overview

**Description:** Case Managers in order to assist potential providers must be knowledgeable about policy and Oregon Administrative Rule requirements for a nurse to become a qualified Medicaid provider of Direct Nursing Services.

**Purpose/Rationale:** This guide will detail the application, enrollment and procedural process to become a qualified Medicaid provider. By Oregon Administrative Rule 411-380-0060(6)(7) and per Center for Medicare and Medicaid Services (CMS) requirements, providers must be qualified and enrolled Medicaid providers to deliver Direct Nursing Services (DNS). Case Managers cannot authorize Direct Nursing hours until a nurse provider has completed enrollment and has a current Medicaid provider number which indicates they are qualified to provide the services.

**Applicability:** Case Management Entities (CDDP's & Brokerages) will assist in providing information and assuring potential providers are fully enrolled DNS Medicaid Providers. Direct Nursing hours can be delivered (for those adults determined eligible) for In-Home (DD49/149) and Adult Foster Home (DD58) settings.

## Procedure(s) that apply:

Providers of Direct Nursing Services must be enrolled/approved Direct Nurse providers with a Medicaid provider number qualifying them to provide DNS. [Home Health Agencies](#) or [In Home Agencies](#) licensed by the [Oregon Health Authority](#) may provide Direct Nursing Services if they agree. Information confirming current licensing status can be obtained by checking the OHA links (above) and contacting Suzi Drebes or Ken Ralph at [ODDS.RNSupport@state.or.us](mailto:ODDS.RNSupport@state.or.us)

Individuals may utilize already enrolled/approved self-employed RNs or LPNs. To confirm the current enrollment status or for information about already enrolled/approved self-employed RNs or LPNs Case Managers can contact [ODDS.RNSupport@state.or.us](mailto:ODDS.RNSupport@state.or.us)

## Provider Enrollment Process

For potential self-employed RNs or LPNs, Direct Nursing enrollment packets are available for Case Managers, Individuals, family (or can be sent directly to Nurse applicants) by contacting Ken Ralph or Suzi Drebes at [ODDS.RNSupport@state.or.us](mailto:ODDS.RNSupport@state.or.us) The Provider Enrollment packet includes the following:

- Cover letter with instructions for all forms and where to send completed forms.
- Criminal Background Check form [MSC301QED](#). The provider/applicant must complete and pass a Background Check. Instructions for a Qualified Entity Designee (usually found at the CDDP office) to initiate a Criminal Background Check can be found on the form. The application type is "DD", the Position Title is "DD/Direct Nurse" and work location for CBC purposes is "Various-Client or Adult Foster Home" Once the Background Check Fitness determination is completed and sent back to the provider/applicant they attach a copy of the Fitness Determination notification with all other enrollment packet forms.
- Proof of current Professional Liability Insurance with a minimum \$1,000,000 insurance coverage.
- Oregon Health Authority Nursing Enrollment Packets. Packets require the applicants:
  - Current and unencumbered Oregon State Board Nursing License number
  - National Provider Index number (different than final Medicaid Provider number)

Provider applicants must send all of the completed forms and information together to Suzi Drebes or Ken Ralph in one of the following ways:

Fax to: 503-373-7274 Attention Suzi Drebes or Ken Ralph

E-mail to: [ODDS.RNSupport@state.or.us](mailto:ODDS.RNSupport@state.or.us)

Mail to:

Department of Human Services Attention Suzi Drebes or Ken Ralph  
500 Summer St. NE E-9  
Salem, Oregon 97301-1073

ODDS will review the enrollment packet of materials and forward the enrollment information to the Oregon Health Authority Provider Enrollment Unit. If there is incomplete or erroneous information in the packet the OHA Medicaid Provider Enrollment unit will contact the applicant directly (by e-mail) for follow up. When the enrollment has been processed the provider enrollment unit sends notification (with cc to ODDS) to the applicant with their Medicaid provider number. Upon notification by OHA or DHS the applicant will be considered a qualified Medicaid Provider of Direct Nursing Services and will be eligible to provide services. ODDS will notify the Case Manager of the applicant's qualified status. The applicant cannot be authorized or paid for work until they have been notified of their acceptance as a qualified Medicaid provider.

### **Form(s) that apply:**

- Provider Enrollment Information (Form OHA#3972)
- Provider Enrollment Disclosure Statement (Form OHA#3973)
- DMAP Provider Enrollment Attachment (Form DMAP#3114)
- Provider Enrollment Agreement (Form OHA#3975)
- Provider Enrollment Checklist (Form DMAP#3976)
- EDMS Coversheet (Form# MSC 3970)
- Background Check Request Form (Form #MSC 301QED)
- Direct Nursing Service Provider Application Checklist

## **Definition(s):**

"Background Check" means a criminal records check and abuse check as defined in OAR 407-007-0200 to 0370.

"Direct Nursing Services" mean the services described in OAR 411-380-0050 (Direct Nursing Service Requirements) that are determined medically necessary to support an individual with complex health management support needs in their home and community. Direct nursing services are provided on a shift staffing basis.

"Direct Nursing Services Criteria" means the assessment to measure the acuity and support level of nursing tasks to determine eligibility for direct nursing services.

"Enrolled Medicaid Provider" means an RN or LPN that meets and completes all the requirements in these rules, OAR 407-120-0300 to 0400 (Medicaid Provider Enrollment and Claiming), and OAR chapter 410, division 120 (OHA, Medicaid General Rules), as applicable.

"National Provider Index Number" means a federally directed provider number mandated for use on Health Insurance Portability and Accountability Act (HIPAA) covered transactions by individuals, provider organizations, and subparts of provider organizations that meet the definition of health care provider (45 CFR 160.103) and who conduct HIPAA covered transactions electronically.

"Provider" means an enrolled Medicaid provider who holds a current license from the Oregon State Board of Nursing as an RN or LPN pursuant to ORS chapter 678.

## **Reference(s):**

Oregon Administrative Rules: 411-380-0060(6)(7);407-007-0200 to 0370;407-120-0320  
Oregon Revised Statutes: 443.015;443.315;678.021

## **Frequently Asked Questions:**

**Q:** If a Nurse worked recently at a group home do they have to have another Background Check completed as part of the enrollment process?

**A:** Yes. Because the position is considered a new position type Statute requires a new Background check.

**Q:** Can a Nurse who recently went through their Oregon State Board of Nursing Background check use that determination for this position?

**A:** No. Because they will be working (as an independent contractor) with the Department of Human Services they are required to complete a new DHS Background Check.

**Q:** If a family uses an In Home or Home Health Agency do I have to assure each new nurse from the agency is enrolled?

**A:** No, as part of the enrollment process the agency is required to assure their employees meet the licensing requirements.

**Q:** How long does the enrollment process take?

**A:** Once ODDS receives the enrollment packet it sends the information to the Oregon Health Authority immediately. If the completed forms are sent accurately with all the required information the OHA Provider Enrollment Unit puts a priority on Direct Nursing enrollments. This can be less than a week sometimes within two days. The longest part of the Enrollment process may be the Background Check fitness determination. We encourage provider applicants to submit the Background Check information (to their local QED) in a timely manner and complete all of the enrollment forms as quickly and accurately as possible to reduce delays.

**Contact(s):**

**Name:** Suzi Drebes; **Phone:** 503 569-4514; **E-mail:** Suzi.Drebes@state.or.us

**Name:** Ken Ralph; **Phone:** 503 947-5191; **E-mail:** Ken.j.Ralph@state.or.us