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September 26, 2001

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To: Deaf-Blind Multiple Disabilities (DB-MD) Waiver Providers

Subject: DB-MD Policy Clarification No. 2001-02  
Billable Nursing Services and Non-billable Time and Activities

This transmittal addresses chapter 4, sections 4-0140, of the Deaf-Blind Multiple Disabilities (DB-MD) Standards relating to billable skilled nursing services and non-billable time and activities. The purpose is to increase consistency of service definitions and payment rates for the DB-MD Medicaid Waiver Program with other Medicaid waiver programs. All changes in service definitions and billing methods described in this transmittal became effective September 1, 2001.

**4-0141 Skilled Nursing Billable Units.**

Billable Units. Previously, any nursing activity was considered a billable unit. As of September 1, 2001, only the following nursing activities may be billed as DB-MD services by DB-MD provider agencies:

1. direct participant contact;
2. participation on the interdisciplinary team (IDT);
3. time spent in delegating, training, and supervising habilitation workers and provider substitutes in the delivery of nursing tasks that have been delegated;
4. time spent in providing nursing tasks that had been delegated to a habilitation worker in order to prevent a service break, if no habilitation worker can be found;
5. time spent in training family members, neighbors, and other informal support providers to provide needed nursing or personal care tasks;
6. time spent in performing quarterly and annual nursing assessments of participant health and functioning which include actual participant contact;
7. time spent in performing assessments and developing written specifications for adaptive aids and completion of physician orders; and
8. follow-up orientation visit following delivery of adaptive aids.

**4-0142 Non-billable time and activities.**

The following activities are not considered billable activities under the DB-MD Medicaid Waiver program for DB-MD providers:

1. supervision of habilitation providers performing habilitation tasks, unless the habilitation worker is delivering nursing tasks delegated by a registered nurse;
2. phone calls, letters, or meetings with Texas Department of Human Services (DHS) or community resources;
3. administrative meetings or staff meetings;
4. in-service training, continuing education, or conferences;
5. employee conferences or evaluations;
6. filing claims for services;
7. travel time;
8. processing paperwork or completing records or reports;
9. home modifications, medical supplies, or adaptive aids that are not approved by authorized DHS staff; and
10. collateral contact when that contact is between agency employees and individuals providing services to participants under personal service agreements or sub-contracts with the DB-MD agency.

**4-0143 Nursing Service Claim Limits.**

1. In order to avoid service breaks, the DB-MD provider agency may bill for authorized habilitation hours performed by a licensed nurse for a maximum period of 10 hours during the participant=s individual service plan effective period. When these services are provided by a nurse for more than 10 hours, they maybe billed at the habilitation rate.
  - a. The hours performed by the nurse may be billed at the nursing rate, only if there are no habilitation workers available to perform the needed delegated nursing tasks and only licensed nurses can be recruited.
  - b. The documentation must include all efforts the provider agency made in order to find a habilitation worker to deliver delegated nursing tasks in order to prevent a break in service.
2. Components of minor home modifications cannot be billed without an invoice or in more than two billings.

Time spent by a licensed nurse in performing personal care tasks in order to prevent a service break must billed at the PAS rate.

**4-0144      Nursing Unit of Service Definitions.**

1. A billable unit of service is the method of calculating the amount that the DB-MD provider agency may bill to DHS. Units are measured by increments of time.
2. Nursing services use time as the measure
  - a. One unit of service is defined as one hour
  - b. For each nursing visit, the DB-MD provider can bill for a minimum of one hour.
  - c. After the first hour, nursing is recorded as actual time spent by the nurse.
    - d. When performing monthly billing, add all recorded nursing time and round up to the nearest quarter unit.

If you have any questions concerning this policy clarification, you may contact Stephen Schoen, DB-MD Program Specialist, at 512-438-2622.

Sincerely,

*signature on file*

Becky Beechinor  
Assistant Deputy Commissioner  
Long Term Care Services

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