

HOUSE RESEARCH

Bill Summary

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Overview

The Medical Assistance program covers several levels of private duty nursing services. This bill changes the term “private duty nursing” to “in-home nursing,” modifies the criteria for two existing levels of nursing services, and establishes “intensive care in-home nursing” as a new level of nursing services. The bill also increases payment rates for the different levels of in-home nursing services.

Section

- 1** **Definitions.** Amends § 256B.0654, subd. 1. Changes terminology, replacing the term “private-duty” nursing with “in-home” nursing. Also modifies the definition of different levels of nursing services, and adds a new category of “intensive care in-home nursing” services.

The amendment to paragraph (a) renames “complex private duty nursing care” as “complex in-home nursing care.” Also modifies the criteria for this level of care, by replacing the requirement related to being ventilator dependent or meeting the criteria for an intensive care unit (ICU) level of care, with the requirement that a recipient meet the criteria for regular in-home nursing and need life-sustaining interventions, and further specifying that a recipient may require an ICU level of care if admitted to a hospital.

The amendments to paragraphs (b), (c), and (e) change terminology.

The amendment to paragraph (d) renames “regular private duty nursing” as “regular in-home nursing.” Also modifies the criteria for this level of care, by eliminating a reference to not needing an ICU level of care, clarifying that a recipient is considered stable “due to routine therapeutic interventions” and further specifying that episodes of instability can be “resolved through further therapeutic interventions.” States that in-home nursing services are not

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provided to recipients with life-threatening episodes of instability (rephrasing a criterion in current law) and further provides that recipients must not require “life-sustaining” or “life-saving” interventions.

A new paragraph (f) establishes “intensive care in-home nursing” as a new level of care, and defines this level of care as nursing services provided to a recipient who meets all of the criteria for complex in-home nursing, and for whom recurrent or complex life-saving interventions are needed to avoid permanent harm or death, and who would require an ICU level of care if admitted to a hospital.

Provides a July 1, 2014, effective date.

- 2** **Payments rates for in-home nursing services.** Amends § 256B.0654, by adding subd. 5. For services provided on or after July 1, 2014, increases payment rates for regular in-home nursing services by 14 percent and increases payment rates for complex in-home nursing services by 21 percent. Sets payments for intensive care in-home nursing services at a level 25 percent higher than the payment rate for complex in-home nursing services (after the increase under this section). Provides that the increases do not apply to federally qualified health centers, rural health centers, and Indian health services. Directs the commissioner to adjust managed care plan and county-based purchasing plan payments, and to require the plans to pass on the full amount of the increase to in-home nursing service providers.
- 3** **Revisor’s instruction.** Directs the revisor of statutes to change the term “private duty nursing” or similar terms to “in-home nursing” or similar terms in Minnesota Statutes and Minnesota Rules.