State of Alaska • Department of Health and Social Services • Senior and Disabilities Services

Nursing Oversight and Care Management Services
Conditions of Participation

Nursing Oversight and Care Management (NOCM) services may be authorized for a recipient who needs extraordinary supervision and observation because of a medical condition. To qualify for these services, the recipient must be eligible under the recipient category of Children with Complex Medical Conditions or under the recipient category of Individuals with Developmental Disabilities if the IDD recipient is age 22 or older, and except for the age requirement, would qualify for the category of Children with Complex Medical Conditions.

NOCM services are provided by a registered nurse employed by a certified NOCM provider agency. The NOCM nurse will develop a nursing plan for inclusion in a recipient's support plan if the recipient is dependent on medical care or technology to maintain health; periodically experiences acute exacerbation of a severe medical condition that requires frequent or life-saving administration of specialized treatment; or is dependent on mechanical support devices. In addition, the NOCM nurse will develop and implement a plan to train the recipient and the recipient's care givers regarding how to perform the medical care tasks necessary to meet the recipient's needs.

The provider who chooses to offer nursing oversight and care management services must be certified under 7 AAC 130.220 (a)(3)(A), meet the requirements of 7 AAC 130.235, and operate in compliance with the Provider Conditions of Participation and the following standards.

I. Program Administration

A. Personnel.

1. Nursing oversight and care management services program administrator.
   a. The provider must designate a nursing oversight and care management services program administrator who is responsible for the management of the program including the following:
      i. orientation, training, and administrative supervision of NOCM nurses;
      ii. implementation of policies and procedures;
      iii. intake processing and evaluation of new recipients;
      iv. ongoing review of the delivery of nursing oversight and management services, including
         (A) monitoring the amount, duration, and scope of medical care services to assure delivery as outlined in the nursing plan;
         (B) reviewing the NOCM nurse's evaluation of the need for both recipient and caregiver training, as well as the quality of training provided; and
         (C) evaluating the effectiveness and continuing need for performance of the medical care tasks included in the recipient's nursing plan.
      v. development and implementation of corrective action plans for identified problems or deficiencies in the delivery of nursing oversight and care management services; and
      vi. submission of required reports to Senior and Disabilities Services, including critical incident reports.
   b. The provider may use a title other than program administrator for this position (e.g., program director, program manager, or program supervisor).
   c. The program administrator must be at least 21 years of age, and qualified through experience and education in a human services field or setting.

i. Required experience:
one year of full-time or equivalent part-time experience providing services to individuals in a human services setting in a position with responsibility for planning, development, and management or operation of programs involving service delivery, fiscal management, needs assessment, program evaluation, or similar tasks.

ii. Required education and additional experience or alternatives to formal education:
(A) Bachelor of Arts or Bachelor of Science degree from an accredited college or university in social work, psychology, rehabilitation, nursing; or a closely related human services field;
(B) Associate of Arts degree from an accredited college or university in nursing from an accredited college or university in social work, psychology, rehabilitation, nursing; or a closely related human services field and two years of full-time or equivalent part- time experience working with human services recipients;
(C) four years of full-time or equivalent part-time experience working with human services recipients in a social work, psychology, rehabilitation, nursing, or closely related human services field or setting; or
(D) certification as a rural community health aide or practitioner, and one year of full-time or equivalent part-time experience working with human services recipients.

d. In addition to meeting education and experience requirements, the administrator must possess the knowledge base and skills necessary to carry out the nursing oversight and care management services program.
i. The administrator knowledge base must include:
(A) the medical, behavioral, habilitative, and rehabilitative conditions and requirements of the population to be served; and
(B) the laws and policies related to Senior and Disabilities Services programs.
ii. The administrator skill set must include:
(A) the ability to supervise the development of and to evaluate the effectiveness of nursing plans and training plans for recipients and care givers; and
(B) the ability to supervise professional and support services staff.

2. Nursing oversight and care management nurse.
a. NOCM nurses must be at least 18 years of age, and qualified through experience and education to provide NOCM services for the population to be served.
b. Required education and additional experience:
Bachelor of Arts, Bachelor of Science, Associate of Arts degree or diploma from an accredited college or university in nursing, and one year of full-time or equivalent part-time clinical experience;
c. In addition to meeting education and experience requirements, NOCM nurses must possess, or develop before providing program services, the following knowledge base and skills.
i. The NOCM nurse knowledge base must include:
(A) the medical, behavioral, habilitative, and rehabilitative conditions and requirements of the population to be served;
(B) the laws and policies related to the nursing oversight and care management services program;
(C) the terminology commonly used in human services fields or settings;
(D) the elements of the nursing oversight and care management services; and
(E) the resources available to meet the training needs of the recipient and the recipient's care givers.

ii. The NOCM nurse skill set must include:
(A) the ability to develop and implement a nursing plans and training plans for recipients and care givers;
(B) the ability to organize, evaluate, and present information orally and in writing; and
(C) the ability to work with professional and support staff.

II. Program operations

A. Quality management.

1. The provider agency must develop a system to monitor the development and implementation of nursing plans and recipient and care giver training plans to ensure the plans:
   a. are complete and submitted within required timeframes;
   b. address all medical care needs and training needs identified in the recipient's assessment; and
   c. address recipient health, safety, and welfare.
2. The provider agency must implement:
   a. a protocol for analysis, annually at a minimum, of the data collected through its monitoring system;
   b. a procedure for correcting problems uncovered by the analysis; and
   c. a process for summarizing the annual analysis and corrective actions for inclusion in a report to be submitted to Senior and Disabilities Services with the provider's application for recertification or to be made available upon request.
3. At a minimum, the provider agency must determine whether:
   a. NOCM services meet the needs of the recipients; and
   b. recipients and their planning teams are encouraged to participate in the development of the nursing and training plans.

B. Billing for services.

1. The provider agency may not submit a claim for reimbursement for NOCM services:
   a. unless the support plan in which NOCM services are requested has been approved by Senior and Disabilities Services; and
   b. until NOCM services have been rendered and documented in case notes.
2. NOCM services may not be rendered at a location over 200 miles from the location of the office of the provider agency unless approved in a recipient's support plan, and may not be claimed unless the location and actual contact time with the recipient or time spent on behalf of the recipient in the recipient's location are indicated in the claim.

III. The NOCM process.

A. Provider responsibilities.

The provider must operate its NOCM services program for the following purposes:

1. to assist the recipient in accessing the support needed to live the life that the recipient chooses at home, at work, and in the community;
2. to foster the greatest amount of independence for the recipient;
3. to enable the recipient to remain in the most appropriate environment in the home or community; and
4. to treat recipients with dignity and respect in the provision of services.

B. Person-centered planning process.

1. Recipient orientation.
   The NOCM nurse must
   a. ensure the nursing assessment and planning process is timely, ;
   b. orient the recipient, the recipient's family, caregivers, and informal supports to NOCM services;
   c. discuss the right of the recipient, the recipient's family, and paid and unpaid caregivers to contact the NOCM nurse, and a method to make such contact.
2. Planning team participation.
   The NOCM nurse must
   a. collaborate with team members to develop a support plan that includes nursing and training plans;
   b. provide a copy of the nursing plan and the training plan to the recipient's care coordinator for inclusion in the recipient's support plan.
3. Integrated program of services.
   The NOCM nurse must
   a. consult with the recipient, the recipient's representative, and paid and unpaid caregivers to determine whether the recipient or the caregivers will perform necessary medical tasks, and whether training is needed to perform those tasks;
   b. incorporate the findings of that consultation and the most recent nursing assessment in the nursing and training plans; and
   c. review the nursing and training plans with the recipient and the recipient's family and paid and unpaid caregivers

C. Nursing plan and training plan implementation.

The NOCM nurse must

1. 1. deliver a copy of the NOCM nursing plan and training plan to SDS, the recipient and to each individual who will receive training to perform medical care tasks within 10 business days of receiving the pre-authorization approval from Senior and Disabilities Services;
2. ensure caregivers are adequately trained to perform medical care tasks for the recipient;
3. facilitate or provide training as necessary to the recipient and caregivers; and
4. support the recipient's independence by encouraging the recipient, family, and informal supports to be responsible for care to the greatest extent possible.

D. Recipient and provider contacts.

1. Recipient contacts.

The NOCM nurse must

a. evaluate whether changes in the needs or status of the recipient require adjustments to the nursing or training plan;

b. provide revised nursing and training plans to the recipient's care coordinator, if adjustments result in the need to amend the recipient's support plan;

c. discuss with the recipient and recipient's representative whether caregiver performance of medical care task is satisfactory; and

d. when applicable, document in case notes the content of each contact with the recipient or a caregiver, including:

i. the method used to make that contact meaningful in terms of monitoring the health, safety, and welfare of the recipient;

ii. a summary of the contact and the names of those in attendance; and

iii. whether services are adequate, delivered safely, respectfully, and acceptably to the recipient

iv. the name and relationship to the recipient of any caregiver whose performance of medical care tasks was observed, any problems that were observed, and whether the NOCM nurse provided training or recommended further training from a medical provider or the recipient's representative.

v. contacts with other medical professional on the recipient's team to coordinate medical care, clarifying orders and relay information to paid and unpaid caregivers.

2. Provider contacts

The NOCM nurse must contact each medical care service provider for a recipient as needed to

a. ensure coordination in the delivery of multiple services by all providers;
b. address problems in service provision; and
c. coordinate training for that provider's employees who perform medical care task.

E. Recipient health, safety, and welfare.

When the NOCM nurse notices any material changes or registers concerns regarding a recipient's emotional, physical, or psychological condition, the NOCM nurse must report immediately the changes or concerns to the recipient's care coordinator and the recipient's representative, and, as appropriate, to other providers of services.