# **DEPARTMENT OF HEALTH & SOCIAL SERVICES**



# PROPOSED CHANGES TO REGULATIONS

# HOME HEALTH AGENCY LICENSURE REQUIREMENTS AND MEDICAID COVERAGE

- 7 AAC 12. Facilities and Local Units.
- 7 AAC 125. Medicaid Coverage; Personal Care Services and Home Health Care Services.



# PUBLIC REVIEW DRAFT September 4, 2020

**COMMENT PERIOD ENDS: October 22, 2020** 

Please see the public notice for details about how to comment on these proposed changes.

## **HEALTH AND SOCIAL SERVICES**

#### Notes to reader:

- 1. Except as discussed in note 2, new text that amends an existing regulation is **bolded and underlined**.
- 2. If the lead-in line above the text of each section of the regulations states that a new section, subsection, paragraph, or subparagraph is being added, or that an existing section, subsection, paragraph, or subparagraph is being repealed and readopted (replaced), the new or replaced text is not bolded or underlined.
- 3. [ALL-CAPS TEXT WITHIN BRACKETS] indicates text that is to be deleted.
- 4. When the word "including" is used, Alaska Statutes provide that it means "including, but not limited to."
- 5. Only the text that is being changed within a section of the current regulations is included in this draft. Refer to the text of that whole section, published in the current Alaska Administrative Code, to determine how a proposed change relates within the context of the whole section and the whole chapter.

#### Title 7 Health and Social Services.

### Chapter 12. Facilities and Local Units.

#### 7 AAC 12.513. Plan of care.

The introductory language of 7 AAC 12.513(a) is amended to read:

(a) A home health agency shall, in consultation with the patient and the patient's attending physician, advanced practice registered nurse, or physician assistant, develop a plan of care for each patient accepted by the agency. The plan of care must

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#### 7 AAC 12.513(a)(1) is amended to read:

(1) be reviewed by the attending physician, advanced practice registered nurse, or physician assistant, and the professional staff of the agency as often as the patient's condition requires, but at least every 62 days;

## 7 AAC 12.513(a)(2) is amended to read:

DHSS Proposed Changes to Regulations. HCS, Home Health Agency Licensure Requirements & Medicaid Coverage (7 AAC 12, 7 AAC 125), DHSS PUBLIC REVIEW DRAFT, September 4, 2020.

Register	2021
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## **HEALTH AND SOCIAL SERVICES**

(2) be signed by the attending physician, advanced practice registered nurse, or				
<b>physician assistant</b> , and included in the patient's clinical record within 21 days of the start of				
care or the recertification date of the agency;				
7 AAC 12.513(b) is amended to read:				
(b) The agency shall promptly alert the attending physician, advanced practice				
<u>registered nurse</u> , or <u>physician assistant</u> of conditions that may require a change to the plan of				
care. The attending physician, advanced practice registered nurse, or physician assistant				
must approve any changes to the plan of care.				
(Eff. 9/6/96, Register 139; am/, Register)				
<b>Authority:</b> AS 18.05.040				
7 AAC 12.517. Nursing services.				
7 AAC 12.517(a)(10) is amended to read:				
(a) A home health agency shall furnish nursing services in accordance with a plan of care				
by or under the supervision of a registered nurse licensed under AS 08.68. A registered nurse				
employed by a home health agency shall				
•••				
(10) inform the attending physician, advanced practice registered nurse, or				
<b>physician assistant</b> and other personnel of changes in the patient's condition and needs;				

DHSS Proposed Changes to Regulations. HCS, Home Health Agency Licensure Requirements & Medicaid Coverage (7 AAC 12, 7 AAC 125), DHSS PUBLIC REVIEW DRAFT, September 4, 2020.

(Eff. 9/6/96, Register 139; am\_\_\_/\_\_\_, Register\_\_\_)

**Authority:** AS 18.05.040

## 7 AAC 12.521. Therapy services.

7 AAC 12.521(a)(2) is amended to read:

- (a) Physical therapy services offered by a home health agency must be provided in accordance with a plan of care by or under the supervision of a physical therapist licensed under AS 08.84. A physical therapist employed by or on contract with a home health agency shall
- (2) establish or modify a physical therapy treatment plan upon written or verbal orders from a physician, advanced practice registered nurse, or physician assistant;

7 AAC 12.521(b)(2) is amended to read:

(b) Occupational therapy services offered by a home health agency must be provided in accordance with a plan of care by an occupational therapist licensed under AS 08.84. An occupational therapist employed by or on contract with a home health agency shall

...

- (2) establish or modify an occupational therapy treatment plan upon written or verbal orders from a physician, advanced practice registered nurse, or physician assistant;
- 7 AAC 12.521(d)(2) is amended to read:
- (d) Speech therapy services offered by a home health agency must be provided in accordance with a plan of care by a speech therapist who has a current certificate of clinical

Register	_, 2021	HEALTH AND SOCIAL SERVICES
competence in	speech pathology gr	anted by the American Speech-Language-Hearing
Association. A	speech pathologist e	employed by or under contract to a home health agency shall
•••		
	(2) establish or mod	ify a speech therapy treatment plan upon written or verbal
instructions fro	om the treating physic	cian, advanced practice registered nurse, or physician
assistant;		
(Eff. 9/6/96, R	egister 139; am	//, Register)
Authority:	AS 18.05.040	
7 AAC 12.523	. Medical social wo	rk service.
7 AAC 12.523	(b)(1) is amended to	read:
(b) A s	social worker employ	ved by a home health agency shall
	(1) assist the physici	an, advanced practice registered nurse, physician
assistant, tean	n members, and the fa	amily in understanding the social and emotional factors
related to healt	th problems of the pa	tient;
7 AAC 12.523	(b)(6) is amended to	read:
	(6) accept physician	, advanced practice registered nurse, and physician
assistant order	rs in relation to socia	l services issues;
(Eff. 9/6/96, R	egister 139; am	//, Register)
Authority:	AS 18.05.040	

# 7 AAC 12.524. Nutrition services.

DHSS Proposed Changes to Regulations. HCS, Home Health Agency Licensure Requirements & Medicaid Coverage (7 AAC 12, 7 AAC 125), DHSS PUBLIC REVIEW DRAFT, September 4, 2020.

Register \_\_\_\_\_\_, \_\_\_\_\_ 2021 HEALTH AND SOCIAL SERVICES

7 AAC 12.524(10) is amended to read:

If a plan of care requires the consultation or direct services of a dietitian, the home health agency must ensure that those services are provided by a dietitian registered by the Commission on Dietetic Registration of the American Dietetic Association. A dietitian providing services for a home health agency shall

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(10) maintain liaison with the physician, advanced practice registered nurse, physician assistant, and agency staff to ensure that their efforts are coordinated effectively and support the objectives outlined in a plan of care.

(Eff. 9/6/96, Register 139; am\_\_\_/\_\_\_, Register\_\_\_)

**Authority:** AS 18.05.040

# 7 AAC 12.526. Infusion therapy.

7 AAC 12.526(a)(3) is amended to read:

(a) If a home health agency provides parenteral or hyperalimentation services, the agency shall

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(3) administer treatments only upon the order of a physician, advanced practice

registered nurse, or physician assistant.

(Eff. 9/6/96, Register 139; am\_\_\_/\_\_\_, Register\_\_\_\_)

**Authority:** AS 18.05.040

Register \_\_\_\_\_, \_\_\_\_ 2021

**HEALTH AND SOCIAL SERVICES** 

7 AAC 12.551. Drugs.

7 AAC 12.551(a) is amended to read:

(a) If ordered by the patient's physician, [OR] advanced **practice registered** nurse

[PRACTITIONER], or physician assistant, a drug may be administered to a patient by an

employee or a contractor of the home health agency who is authorized to administer drugs by

law.

7 AAC 12.551(c) is amended to read:

(c) The agency shall document all drugs a patient may be taking, including a drug not

prescribed by the attending physician, advanced practice registered nurse, or physician

assistant.

(Eff. 9/6/96, Register 139; am\_\_\_/\_\_\_, Register\_\_\_\_)

**Authority:** 

AS 18.05.040

7 AAC 12.561. Clinical records.

7 AAC 12.561(a)(1) is amended to read:

(a) A home health agency shall maintain a clinical record for each patient. The clinical

record must be legible and maintained in accordance with accepted professional or occupational

standards. The clinical record must be readily available upon the request of the

(1) attending physician, advanced practice registered nurse, or physician

assistant;

7 AAC 12.561(b)(4) is amended to read:

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6

JHSS PUBLIC REVIEW DRAFT, September 4, 2020.

Register ,	2021	HEALTH AND SOCIAL SERVICES

(b) A clinical record must include the following items:

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(4) name of the attending physician, advanced practice registered nurse, or physician assistant;

7 AAC 12.561(b)(6) is amended to read:

(6) copies of summary reports sent to the attending physician, advanced practice registered nurse, or physician assistant;

7 AAC 12.561(c) is amended to read:

(c) Clinical progress notes must be written or dictated on the day that care or service is rendered. The clinical progress notes must be incorporated into the patient's clinical record within seven days. Summaries of the care or service reported must be submitted to the attending physician, advanced practice registered nurse, or physician assistant at least every 62 days.

(Eff. 9/6/96, Register 139; am\_\_\_/\_\_\_, Register\_\_\_)

**Authority:** AS 18.05.040

Chapter 125. Medicaid Coverage; Personal Care Services and Home Health Care Services.

7 AAC 125.310. Home health care services.

The introductory language of 7 AAC 125.310(a) is amended to read:

(a) The department will pay a public or private home health agency for the following home health care services, if recommended by a licensed physician, advanced practice

<u>registered nurse</u>, or <u>physician assistant</u> as part of a plan of care developed in accordance with 7 AAC 125.320:

### 7 AAC 125.320. Requirements for home health care services.

The introductory language of 7 AAC 125.320(b) is amended to read:

(b) A home health agency must submit a request for prior authorization on a form provided by the department, and must include a written statement from the attending physician advanced practice registered nurse, or physician assistant that

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The introductory language of 7 AAC 125.320(d) is amended to read:

(d) A physician, advanced practice registered nurse, or physician assistant shall develop a plan of care for a recipient of home health care services. The plan of care must include ...

The 7 AAC 125.320(f) is amended to read:

(f) To determine the immediate care and support needs of the recipient, and except as provided in (h) of this section, a registered nurse shall complete an initial assessment of the recipient no more than 48 hours after the referral, no more than 48 hours after the recipient's return to the recipient's place of residence, or on the physician, advanced practice registered nurse, or physician assistant-ordered start-of-care date.

Register \_\_\_\_\_, \_\_\_\_ 2021 HEALTH AND SOCIAL SERVICES

The introductory language of 7 AAC 125.320(h) is amended to read:

(h) If speech-language pathology, physical therapy, or occupational therapy is the only

service ordered by the physician, advanced practice registered nurse, or physician assistant,

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The introductory language of 7 AAC 125.320(i) is amended to read:

(i) The attending physician, advanced practice registered nurse, or physician assistant

shall review the plan of care, initial assessment, and comprehensive assessment

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The introductory language of 7 AAC 125.320(j) is amended to read:

(j) At least annually, a physician, advanced practice registered nurse, or physician

**assistant** shall review a recipient's need for supplies. The department may require more frequent

physician, advanced practice registered nurse, or physician assistant reviews for particular

prescribed items.

...

(Eff. 2/1/2010, Register 193; am 5/1/2019, Register 230; am\_\_\_/\_\_\_, Register\_\_\_)

**Authority:** AS 47.05.010 AS 47.07.030 AS 47.07.040