



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

April 16, 2014

To: Nursing Supervision Agencies

From: Mark A. Leeds, Director 
Long Term Services & Supports Administration

Re: Community First Choice

This memo clarifies the Community First Choice memo dated November 26, 2013.

Community First Choice (CFC) began January 6, 2014. Nurse monitoring of personal assistance services is now covered under CFC rather than as a waiver service. Only local health departments (LHDs) may provide nurse monitoring services under CFC. There will be no payment to other agencies for nursing supervision in the future.

This provider requirement is being phased in through the summer of 2014. During this time, LHDs will be contacting each nursing agency to develop a transition plan. Current providers should continue to submit claims using the current code and rate until the LHD assumes the responsibility. After the LHD takes over the service, current providers can no longer bill for nursing supervision.

Nursing supervision DOES NOT use the ISAS call-in system for billing.

Agencies providing personal assistance services that are licensed as Residential Services Agencies must still comply with the licensure requirements in COMAR 10.07. Specifically, according to COMAR 10.07.05.12,

A registered nurse shall assess each new client who requires skilled services and assistance with the activities of daily living. The registered nurse shall also participate in developing the client's plan of care and in assigning appropriate personnel; determine whether the client requires the services of a certified nursing assistant, or whether services may be provided by an individual who is not certified; and participate in training and retraining the individuals who will provide the care, when indicated.

...an agency shall have a registered nurse to provide oversight for implementation of the care plan; delegation; supervision; and training.

All personal assistance provider agencies must continue to provide oversight and supervision by registered nurses as a part of the personal assistance service. The cost of nurse supervision is part of the administrative overhead built into the agency rate; there is no separate payment for this nurse. The time that a nurse spends on oversight and supervision is not billable and ISAS cannot be used to record the time of the nurse.

The LHD is responsible for monitoring the quality of personal assistance services. This means that they may request documents, schedule joint home visits, and inspect the quality of care. Enrolled personal assistance provider agencies must respond to LHD requests.

If you have any questions regarding this memo, please contact the Community Options Division at 410-767-1739 or dhmh.coproviders@maryland.gov.