

Service: Nursing Assessment and Health Services

Service Definition

1. This service requires face-to-face contact with the youth/family/caregiver to monitor, evaluate, assess, and/or carry out orders of appropriate medical staff pursuant to the Medical Practice Act of 2009, Subsection 43-34-23 Delegation of Authority to Nurse and Physician Assistant regarding the psychological and/or physical problems and general wellness of the youth. It includes:
 - a. Providing nursing assessments and interventions to observe, monitor and care for the physical, nutritional, behavioral health and related psychosocial issues, problems or crises manifested in the course of the youth's treatment;
 - b. Assessing and monitoring the youth's response to medication(s) to determine the need to continue medication and/or to determine the need to refer the youth for a medication review;
 - c. Assessing and monitoring a youth's medical and other health issues that are either directly related to the mental health or substance related disorder, or to the treatment of the condition (e.g., diabetes, cardiac and/or blood pressure issues, substance withdrawal symptoms, weight gain and fluid retention, seizures, etc.);
 - d. Consulting with the youth's family/caregiver about medical, nutritional and other health issues related to the individual's mental health or substance related issues;
 - e. Educating the youth and family/responsible caregiver(s) on medications and potential medication side effects (especially those which may adversely affect health such as weight gain or loss, blood pressure changes, cardiac abnormalities, development of diabetes or seizures, etc.);
 - f. Consulting with the youth and family/caregiver (s) about the various aspects of informed consent (when prescribing occurs/APRN);
 - g. Training for self-administration of medication;
 - h. Venipuncture required to monitor and assess mental health, substance disorders or directly related conditions, and to monitor side effects of psychotropic medications, as ordered by appropriate members of the medical staff; and
 - i. Providing assessment, testing, and referral for infectious diseases.

Admission Criteria

1. Youth presents with symptoms that are likely to respond to medical/nursing interventions; or
2. Youth has been prescribed medications as a part of the treatment/service array or has a confounding medical condition.

Continuing Stay Criteria

1. Youth continues to demonstrate symptoms that are likely to respond to or are responding to medical interventions; or
2. Youth exhibits acute disabling conditions of sufficient severity to bring about a significant impairment in day-to-day functioning; or
3. Youth demonstrates progress relative to medical/medication goals identified in the Individualized Resiliency Plan, but goals have not yet been achieved.

Discharge Criteria

1. An adequate continuing care plan has been established; and one or more of the following:
2. Youth no longer demonstrates symptoms that are likely to respond to or are responding to medical/nursing interventions; or
3. Goals of the Individualized Resiliency Plan have been substantially met; or
4. Youth/family requests discharge and youth is not in imminent danger of harm to self or others.

Service Exclusions

Medication Administration, Opioid Maintenance

Clinical Exclusions

Routine nursing activities that are included as a part of ambulatory detoxification and medication administration/methadone administration.

Required Components

1. Nutritional assessments indicated by a youth's confounding health issues might be billed under this code (96150, 96151). No more than 8 units specific to nutritional assessments can be billed for an individual within a year. This specific assessment must be provided by a Registered Nurse or by a Licensed Dietician (LD).
2. This service does not include the supervision of self-administration of medication.
3. Each nursing contact should document the checking of vital signs (Temperature, Pulse, Blood Pressure, Respiratory Rate, and weight, if medically indicated or if related to behavioral health symptom or behavioral health medication side effect) in accordance with general psychiatric nursing practice.

Clinical Operations

1. Venipuncture billed via this service must include documentation that includes cannula size utilized, insertion site, number of attempts, location, and individual tolerance of procedure.
2. All nursing procedures must include relevant individual-centered, family-oriented education regarding the procedure.

Service Accessibility

To promote access, providers may use Telemedicine as a tool to provide direct interventions to individuals for whom English is not their first language. Examples of this include:

- The use of one-to-one service intervention via Telemedicine, connecting the individual to a practitioner who speaks the individual's language versus use of interpreters; and/or
- The use of an interpreter via Telemedicine to support the practitioner in delivering the identified service.

Telemedicine may only be utilized when delivering this service to an individual for whom English is not their first language. The individual/family must consent to the use of this modality. This consent should be documented in the individual's record. The use of telemedicine should not be driven by the practitioner's/agency's convenience or preference.

Billing & Reporting Requirements

1. If a Medicaid claim for this service denies for a Procedure-to-Procedure edit, a modifier (59) can be added to the claim and resubmitted to the MMIS for payment.
2. When Telemedicine technology is utilized for the provision of this service in accordance with the allowance in the Service Accessibility section of this definition, the code cited in the Code Detail above with the appropriate GT modifier shall be utilized in documentation and claims submission.