

PROVIDER BULLETIN

No. 12-30

December 18, 2012

TO: Nebraska Medicaid Nursing Facilities and Resident Physicians
FROM: Vivianne M. Chaumont, Director 
Division of Medicaid & Long-Term Care
BY: Betsie Steenson, Program Integrity Unit
RE: Physician Signed Review of the Total Plan of Care

Please share this information with administrative, clinical, and billing staff.

The purpose of this notice is to emphasize the need for all providers to keep and maintain complete records of all services performed for Nebraska Medicaid clients. These records are also required to be supplied in a timely manner for audit or review when requested by the Department, the federal Department of Health and Human Services, or other approved agency.

One of the pieces of documentation that is necessary to support the care being provided to nursing facility residents is the physician signed review of the total plan of care. The need for this review is documented in Nebraska Medicaid regulations at 471 NAC 12-007.09 Physician Services, which states that the physician must see the client whenever necessary, but at least every 30 days for the first 90 days after admission, and at least once every 60 days thereafter. The full regulation can be found at http://www.sos.ne.gov/rules-and-regs/regsearch/Rules/Health_and_Human_Services_System/Title-471/Chapter-12.pdf.

In the most recent Payment Error Rate Measurement review cycle, claims where a nursing facility was unable to provide a physician signed review of the total program/plan of care for the 60 days prior to or during the dates of service accounted for 37% of Nebraska's errors. These errors were classified as being due to either "Insufficient Documentation" or a "Policy Violation".

If the facility cannot provide this physician signed and dated document upon request for review, refunds will be requested.

With HIPAA privacy laws, many providers are concerned about the validity of information requests. If you receive a request for records, and are not sure if it is a valid request, please contact your DHHS program specialist. If you have any questions about this provider bulletin, please contact Betsie Steenson at (402) 471-9353.