ATTACHMENT 3.1-A Item 7b Applies to both Categorically and Medically Needy

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

## State Nebraska

## LIMITATIONS - HOME HEALTH NURSING SERVICES - HOME HEALTH AIDE SERVICES

- 1. Home health aide services must be:
  - a. Necessary to continuing a medical treatment plan;
  - b. Prescribed by a licensed physician;
  - c. Recertified by the licensed physician at least every 60 days; and
  - d. Supervised by a registered nurse.
- 2. Home health agency services must be prior authorized by the Medicaid Division.
- 3. Prefilling syringes with insulin for a blind diabetic is reimbursed only as a home health nursing service. Home health agencies will not be reimbursed for prefilling insulin syringes for a blind diabetic by a home health aide.
- 4. Skilled nursing visits are not a prerequisite for the provision of home health aide services.
- 5. <u>Telehealth</u>: Home health aide services are not covered when provided via telehealth technologies.