

## Delmarva iBudget Tool Revisions

### Quick Reference Guide – Special Medical Home Care

**Overview:** The Special Medical Home Care review tool has decreased from 13 to 11 standards. There is one new standard and a total of four standards from the old HCBS review tool that have been removed—these are shaded in gray. There are no changes to the Administrative standards specific to Special Medical Home Care.

The table below compares the old to the new.

#### Service Specific Standards:

Old – HCBS Waiver	New - iBudget
The file includes daily progress notes on days the service was rendered, directly related to the individual’s plan of care and treatment.	The provider maintains Daily Progress Notes covering services provided and billed during the period under review.
The file includes the current nursing care plan and revisions.	The record includes the current Nursing Care Plan and revisions.
The file includes the nursing assessment (completed at the time of the first claim submission and annually thereafter).	The record includes the Nursing Assessment (completed at the time of the first claim submission and annually thereafter).
The file includes a current prescription for the service.	The record includes prescription for the service.
The file includes the list of duties to be performed by the nurse.	The record includes the list of duties to be performed by the nurse.
The Provider maintains current service authorization(s) for the service being rendered and billed.	The provider maintains current Service Authorization(s) for the service being rendered and billed.
The provider renders the service in accordance with the service authorization and the Handbook.	The provider renders the service in accordance with the Service Authorization and the Handbook.
	The provider is in compliance with billing procedures and the Medicaid provider agreement. <b>(Previously reviewed another standard)</b>
The provider does not receive reimbursement for residential habilitation or residential nursing services.	The provider does not receive reimbursement for Residential Habilitation or Residential Nursing services.

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Old – HCBS Waiver	New - iBudget
	The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis. <b>(NEW)</b>
The Provider submits documents to the Waiver Support Coordinator as required.	The provider submits documents to the Waiver Support Coordinator as required.
<i>The provider has service logs for each date of service that are reflective of the individual's communicated personal goals.</i>	
<i>The individual see's medical and dental professionals routinely and as needed.</i>	
<i>The Provider addresses recommendations, MD orders and other service needs in a timely manner.</i>	
<i>The provider is a group home that employs registered nurses, licensed practical nurses, and certified nurse assistants licensed or certified in accordance with Ch 464.</i>	

**Administrative Standards:** This section references Administrative standards specific **only to Special Medical Home Care**. Please refer to the Administrative (All) document for information on Administrative requirements applicable to all providers.

Old – HCBS Waiver	New - iBudget
The provider meets all minimum educational requirements and levels of experience.	The provider meets all minimum educational requirements and levels of experience.