/907 KAR 1:450

INCORPORATION BY REFERENCE

JULY 2022 EDITION

**MEDICAID SERVICES MANUAL**

**FOR**

**NURSE AIDE TRAINING AND**

**COMPETENCY EVALUATION PROGRAM**

**KENTUCKY MEDICAID PROGRAM**

Cabinet for Health and Family Services Department for Medicaid Services

275 East Main Street 6WD Frankfort, Kentucky 40621

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| TABLE OF CONTENTS | |  | |
| SECTION | | PAGE | NO. |
| I. Introduction | | 1 |  |
| II. Overview of Nurse Aide Training and Competency Evaluation Program | | 2 |  |
| III. Program Requirements and Guidelines | | 5 |  |
| IV. Student Information | | 11 |  |
| V. Program Coordinator and Instructor Requirements | | 13 |  |
| VI. | Final Examination/Competency Evaluation | 15 | |
| VII. | Records | 17 | |
| VIII. | Abuse Registry, Hearing Rights, and Petition for Review | 19 | |
| IX. | Reciprocity | 20 | |
| X. | Certification | 21 | |
| XI. | Conditions of Participation and Compliance with Program Requirements | 22 | |
| XII. | Ongoing Staff Development | 26 | |
| XIII. | Reimbursements | 27 | |

SECTION I - INTRODUCTION

1. INTRODUCTION
   1. INTRODUCTION

The Kentucky Medicaid Nurse Aide Training and Competency Evaluation Program (NATCEP) Manual provides the basic federal and state program guidelines for Medicaid providers to be used when providing a nurse aide training and competency evaluation program. Precise adherence to the program guidelines shall be imperative.

* 1. GENERAL INFORMATION

The Department for Medicaid Services shall be bound by both Federal and State statutes and regulations governing the administration of the State Plan.

SECTION II - OVERVIEW OF NURSE AIDE TRAINING AND COMPETENCY EVALUATION PROGRAM

1. OVERVIEW OF NATCEP
   1. HISTORY

The nursing home reform provision of the Omnibus Budget Reconciliation Act (OBRA) of 1987 established the requirement for states to administer a nurse aide training and competency evaluation program. The NATCEP is for nurse aides who are employed by nursing facilities.

* 1. The NATCEP was developed as a collaborative effort by the following:
     1. Kentucky Community and Technical College System
     2. Kentucky Board of Nursing
     3. KY Department of Education (KDE), Office of Career and Technical Education and Student Transition
     4. Kentucky Association for Health Care Facilities
     5. Office of the Inspector General
     6. KY Cabinet for Health and Family Services, Long Term Care Ombudsman
     7. Department for Community Based Services (DCBS)
     8. District Bluegrass Long Term Care Ombudsman
     9. Department for Mental Health and Department for Behavioral Health, Developmental and Intellectual Disabilities
     10. Department for Medicaid Services.

The NATCEP has a seventy-five (75) hour course requirement. The NATCEP was designed to provide both classroom theory and instruction and clinical practice to assist the individual in gaining knowledge and skills essential to the provision of nurse aide services.

SECTION II - OVERVIEW OF NURSE AIDE TRAINING AND COMPETENCY EVALUATION PROGRAM

* 1. Purpose

The purpose of the NATCEP is to prepare the nurse aide to provide high quality, direct patient care under the supervision of licensed nurse personnel. A primary goal of the NATCEP is to ensure the availability of a well-structured, uniform curriculum across the State that will provide a foundation for high quality nurse aide services.

Federal and State laws and regulations mandate requirements for residents in nursing facilities to receive high quality health care delivered by trained personnel. Additionally, the NATCEP focuses on the fostering of independent functioning, to the extent possible, of the nursing facility resident. This requires policy and procedural instruction as well as emphasizing the establishment and maintenance of a safe, non-threatening, independence conducive environment for the nursing facility resident.

* 1. Objectives

Upon completion of a NATCEP, a nurse aide will be able to provide high-quality care that enhances the quality of life for residents in long-term care nursing facilities. Further, the nurse aide will have the ability to do the following:

* + 1. Demonstrate good personal habits
    2. Recognize the nurse aide's role in organizational structure of the nursing facility
    3. Identify responsibilities of the nurse aide to the resident and health care team
    4. Demonstrate basic skills and techniques in performing nurse aide procedures according to the program standards
    5. Organize and administer nursing care to residents based on a plan of care and direction from charge personnel
    6. Demonstrate knowledge of resident's rights in assisting residents with their activities of daily living
    7. Demonstrate ability to assist residents in attaining and maintaining functional independence to the extent possible

SECTION II - OVERVIEW OF NURSE AIDE TRAINING AND COMPETENCY EVALUATION PROGRAM

SECTION II - OVERVIEW OF NURSE AIDE TRAINING AND COMPETENCY EVALUATION PROGRAM

* + 1. Demonstrate proper care for and use of equipment and supplies necessary for resident care
    2. Demonstrate sensitivity to the residents' physical, emotional, social and mental health needs through skillful, directed interactions
    3. Actively participate in the maintenance of a non-threatening, independence conducive environment for the nursing facility resident
  1. Definition of a Nurse Aide

A nurse aide is defined per 907 KAR 1:450, as an individual who has successfully completed a NATCEP, and may include a nursing student, medication aide, or a person employed through a nursing pool who provides nursing or nursing-related services to a resident in a nursing facility, excluding:

1. An individual who is a licensed health professional;
2. A volunteer who provides the nursing or nursing-related services without monetary compensation; or
3. A person who is hired by the resident of family to sit with the resident and who does not perform nursing or nursing-related services.

SECTION Ill - PROGRAM REQUIREMENTS AND GUIDELINES

Ill. PROGRAM REQUIREMENTS AND GUIDELINES

1. The "basic course" consists of a minimum of seventy-five (75) hours with a minimum of sixteen (16) hours of supervised clinical training. Supervised practical training means training in a laboratory or other setting, such as a Medicaid long-term care facility, in which the trainee demonstrates knowledge while performing tasks on an individual under the direct supervision of a registered nurse or licensed practical nurse.
2. The nurse aide training program shall be conducted by a:
   1. Kentucky Community and Technical College System, including KDE, Office of Career and Technical Education and Student Transition.
   2. University program.
   3. Licensed proprietary education program.
   4. Licensed health care facilities which includes Nursing Facilities offering a nurse aide training program to its' own employees.
   5. Non-profit, church related or tax supported program that is not identified in the above categories.

Each agency, listed in Section III B. 2 – 5 above, shall request and receive approval from Medicaid Services or Medicaid Services designee. Approved nurse aide training programs shall be conducted in the Commonwealth of Kentucky.

1. The classroom instruction shall be taught in a location that meets the following requirements: ·
   1. Environment shall be conducive to adult learning i.e.: well-lighted, well ventilated, quiet room.
   2. Necessary laboratory facility, equipment and supplies are provided to include, but not limited to: Patient bed, Linens and pillows for positioning, Sphygmomanometer, Stethoscope, Electronic Thermometers, Basins (for bed bath), Wheelchair, Restraints and protective devices, Bedpan, Urinals, Scales for height and weight, Samples of records of charting, e.g., Intake and Output, Vital Signs, Catheters and related supplies, Audio-visual equipment, and any other equipment needed for simulating resident care.

SECTION Ill - PROGRAM REQUIREMENTS AND GUIDELINES

* 1. Adequate classroom and laboratory space shall be available to accommodate students. The class size shall not exceed fifteen (15) students per instructor in all settings including classroom, laboratory, and clinical.
  2. The classroom, if held in a nursing facility, shall not interfere with normal resident activities.

1. The approved texts for the nurse aide training program are:
   1. Mosby's Textbook for Long-Term Care Assistants in its most recent edition.
   2. American Health Care Association How to Be a Nurse Assistant in its most recent edition.
   3. Hartman’s Nursing Assistant Care the Basics in its most recent edition.

The competency evaluation is based on these texts. Each agency, listed in Section III B. 2 – 5, shall request approval from Medicaid Services or Medicaid Services designee in writing any changes that may alter the instructional program, including textbook selection within 30 days. Each nurse aide trainee shall acquire an individual copy of the approved textbook and workbook and shall not be charged for any portion of the costs incurred in facility-based training, including books and the initial state testing fees. Through this cooperative effort, the material shall be maintained current and consistent with the competency evaluation test.

1. Prior to any direct contact with a resident the trainee shall have at least sixteen (16) hours of training in the following areas:
   1. Communication and interpersonal skills,
   2. Infection control,
   3. Safety and emergency procedures,
   4. Promoting residents' independence, and
   5. Respecting residents' rights.

The remainder of the seventy-five (75) hours of training shall include:

1. Basic nursing skills which shall include:
2. Taking and recording vital signs,

SECTION Ill - PROGRAM REQUIREMENTS AND GUIDELINES

1. Measuring and recording height and weight,
2. Caring for the residents' environment,
3. Recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor and caring for residents when death is imminent.
4. Personal Care Skills, including, but not limited to bathing, grooming, mouth care, dressing, toileting, assisting with eating and hydration, proper feeding techniques, skin care, transfers, positioning and turning.
5. Mental Health and Social Service Needs which shall include:
6. Modifying aide's behavior in response to residents' behavior,
7. Identifying developmental tasks associated with the aging process,
8. How to respond to resident behavior,
9. Allowing the resident to make personal choices, providing, and reinforcing other behavior consistent with the resident dignity, and
10. Using the resident's family as a source of emotional support.
11. Care of Cognitively Impaired Residents:
12. Techniques for addressing the unique needs and behaviors of individuals with dementia (Alzheimer's and others),
13. Communicating with cognitively impaired residents,
14. Understanding and responding to the behavior of cognitively impaired residents, and
15. Methods for minimizing the effects of cognitive impairments.
16. Basic Restorative Services which shall include:
    1. Training the resident in self-care according to the resident's abilities,
    2. Use of assistive devices in transferring, ambulation, eating and dressing,
    3. Maintenance of range of motion,
    4. Proper turning and positioning in bed and chair,

SECTION Ill - PROGRAM REQUIREMENTS AND GUIDELINES

* 1. Bowel and bladder training, and
  2. Care and use of prosthetics and orthotic devices.

1. Residents' Rights which shall include:
2. Providing privacy and maintaining confidentiality,
3. Promoting the resident's rights to make personal choices to accommodate their needs,
4. Giving assistance in resolving grievances and disputes,
5. Providing needed assistance in getting to and participating in resident and family groups and other activities,
6. Maintaining care and security of residents' personal possessions and environment,
7. Promoting the resident's right to be free from abuse, mistreatment, and neglect, and the need to report any such instance to appropriate facility staff, **Adult Abuse Hotline Telephone Number: 800-752-6200,** and
8. Avoiding the need for restraints in accordance with current professional standards.
9. The suggested time schedule for the Medicaid or Medicaid designee approved curriculum may be lengthened in order to meet the learning abilities of students. The instructors are encouraged to spend more than the minimum time on various topics as needed.
10. Evaluations of the course, instructor and facility shall be requested from the student at the end of each class for the purpose of program evaluation by the instructor. The evaluation shall be kept on file for the annual on-site program review.
11. Each student's training and testing records shall be maintained by the approved training provider for at least five (5) years and available upon request.
12. Prior to the start of each nurse aide training class, the approved provider must verify each enrolled student is qualified. Qualified means the individual is not listed on the following:

* The Nurse Aide Registry and Abuse Registry maintained by the Kentucky Board of Nursing, and
* The Kentucky Adult Caregiver Misconduct Registry maintained by the Cabinet for Health and Family Services (CHFS).

SECTION Ill - PROGRAM REQUIREMENTS AND GUIDELINES

Verification documents must be maintained with the class records for a minimum of five (5) years.

The instructor shall also inform each student that upon successful completion of the nurse aide training and competency evaluation program their name shall be placed on a state registry, which shall be made available to other states and interested parties.

1. A trainee shall be terminated from the NATCEP when documented and substantiated evidence is presented that the trainee is guilty of resident neglect, abuse, or misappropriation of resident property. These individuals shall be placed on the abuse registry maintained by the Kentucky Board of Nursing for the Department in accordance with 907 KAR 1:450.
2. A student shall pass a minimum of three (3) written or oral tests throughout the classroom course with an average score of at least seventy (70) percent to be eligible for the state competency evaluation. If more than three (3) tests are given, ALL test scores must be included in the average and included with the student’s classroom records to be reviewed during the annual on-site review.

The following cannot be counted toward passing the class or factored into the seventy (70) percent requirement:

* 1. Open book tests
  2. Take home tests
  3. Extra credit
  4. Workbook completion/activities
  5. Repeating the same test to increase score
  6. Any other graded activity within the classroom/clinical setting

1. The instructor shall advise the KCTCS Regional Nurse Aide Coordinator, of those students who have successfully completed the seventy-five (75) hours of nurse aide training and are eligible to take the state competency evaluation by means of the Kentucky Medicaid Nurse Aide Test Roster.

SECTION Ill - PROGRAM REQUIREMENTS AND GUIDELINES

M. The program coordinator/instructor shall maintain a skills check-off list that contains at a minimum:

* 1. A listing of objectives for the program; and
  2. The date the student demonstrated the objective successfully in the lab or clinical setting; and
  3. The name of the instructor supervising the performance.

At the successful completion of the nurse aide training program, the nurse aide and his employer shall receive a copy of the:

1. Skills check-off, and
2. Certificate of course completion
3. For facility-based programs, students may not work independently in a facility on any performance (skill) objective that has not been satisfactorily performed for the classroom instructor. The student shall continue to receive supervision for all duties and skills not satisfactorily performed until satisfactory performance is confirmed.

SECTION IV - STUDENT INFORMATION

IV. STUDENT INFORMATION

1. In order for the Kentucky Medicaid Program to reimburse the cost of nurse aide training, nurse aides that meet all the following criteria may be entitled to reimbursement of a portion of your expenses to complete a nurse aide training program:
2. If not employed by a long-term care facility or received an offer of employment from a long-term care facility on the first day you start a nurse aide training program, and
3. have incurred out-of-pocket expenses for a nurse aide training program, and
4. become employed or receives an offer of employment from a long-term care facility within twelve (12) months of completing a nurse aide training program

All questions about reimbursements are to be directed to your Long-Term Care Facility Administration after you become employed or receive an offer of employment. Your facility would be required to submit a MAP-576 to the Kentucky Department for Medicaid Services if you qualify.

1. For pre-licensure practical nursing or registered nursing students to challenge the nurse aide exam, the individual must have successfully completed a nursing fundamentals course or courses that cover the nurse aide equivalent competencies, along with an associated clinical rotation within the past twelve (12) months. Qualified nursing students shall not be required to complete the seventy-five (75) hour nurse aide training program. An official transcript shall be presented to the KCTCS Regional Nurse Aide Coordinator.
2. An individual employed in a permanent position as a nurse aide shall satisfactorily complete the nurse aide training and competency evaluation program within four (4) months of date of hire.
3. An individual, who is not employed as a nurse aide, shall have one year from the completion of an approved nurse aide training program to successfully complete the competency evaluation exam.
4. A nurse aide employed on a temporary, per diem, leased, or any other non-full-time status shall have completed a NATCEP or competency evaluation program (CEP) prior to working in a nursing facility.

SECTION IV - STUDENT INFORMATION

1. An individual (former nurse aide) who has not performed eight (8) hours of nursing or nursing-related services for pay for a twenty-four (24) month continuous period, shall be required to complete a new nurse aide training and competency evaluation program and competency evaluation exam.
2. Each time a nurse aide training course is completed the nurse aide trainee shall have three (3) opportunities to successfully complete the entire competency evaluation exam.
3. Absences shall be monitored by the instructor. A student may be given the opportunity to make up the absence at the instructor's discretion. If the student is allowed to make up the absence, the specific content that was missed is the content that is to be covered during the make-up hours.
4. All students must complete the initial sixteen (16) hours of classroom training prior to direct involvement with a nursing facility resident.

SECTION V – PROGRAM COORDINATOR AND INSTRUCTOR REQUIREMENTS

V. PROGRAM COORDINATOR AND INSTRUCTOR REQUIREMENTS

The Program Coordinator will be responsible for the following:

* 1. Planning and coordination of nurse aide program and activities,
  2. Ensuring implementation of policies and practices,
  3. Monitoring instructors and their workloads, practices, and outcomes, **and**
  4. Ensuring the program is in compliance with all federal and state regulations at all times.

1. Program Coordinator Requirements
   * + 1. Registered Nurse;
       2. Minimum of two (2) calendar years of experience as an RN; Which must include one (1) calendar year of long-term care nursing facility services as an RN;
       3. Completion of an approved sixteen (16) hour Methods of Instruction Course (MOI)

The Director of Nursing (D.O.N.) may be the program coordinator of a long-term care nursing facility program but shall not perform the actual training, therefore the D.O.N. is not required to complete a M.O.I. course in teaching adults.

1. Instructor Requirements
   1. Be a registered nurse (RN) who possesses a minimum of two (2) calendar years of nursing experience, which must include one (1) calendar year of long-term care nursing facility services as an RN.
   2. Be a licensed practical nurse who has at least one-year experience and provides supplement to the registered nurse instructor
   3. Completion of an approved sixteen (16) hour Methods of Instruction Course (MOI
   4. A registered nurse or a licensed practical nurse may be granted reciprocity from another state for the Methods of Instruction (MOI) training if the training is equivalent to Kentucky's course work. A certificate of completion and a course curriculum shall be submitted to Medicaid

Services or Medicaid Services designee for approval.

SECTION VI - FINAL EXAMINATION/COMPETENCY EVALUATION

VI. FINAL EXAMINATION/COMPETENCY EVALUATION

1. The Kentucky Community and Technical College System, has responsibility for the final written or oral examination and the skills demonstration aspect of the competency evaluation. The test questions are developed based on the State-approved curriculum by the KCTCS with input from Medicaid Services. The test has been validated by KCTCS to ensure its reflection of the material presented in the training. The KCTCS also has the responsibility to maintain the integrity of the test and the individual examinations.
2. Only individuals eligible to work and that have successfully completed the competency evaluation program (CEP) shall be listed on the nurse aide registry. Test candidates shall present to the competency evaluation proctor the following documents that are outlined on the Homeland Security I-9 form to verify employability in the United States. Employees may present one selection from List A or a combination of one selection from List B and one selection from List C:
   1. Documents that establish both Identity and Employment Authorization; OR
   2. Documents that establish Identity; AND
   3. Documents that establish Employment Authorization
   4. All personal documents shall identify the individual's matching full name to include middle initial.
3. The performance evaluation shall be administered and evaluated by a registered nurse with at least one (1) year experience in providing care for the elderly or the chronically ill of any age.
4. The oral examination may be substituted for the written examination. If oral, the examination shall be read in a neutral manner. A nurse aide may bring a non-electronic translating dictionary to use when taking the written exam but may not bring an interpreter.
5. A long-term care nursing facility may request the KCTCS to conduct the competency evaluation, for an additional per trip fee, at their location for their employees. KCTCS has the sole discretion to review and approve the testing site prior to testing.

SECTION VI - FINAL EXAMINATION/COMPETENCY EVALUATION

1. The skills demonstration aspect of the examination shall consist of a minimum performance of five (5) tasks. These five (5) tasks are selected from a pool of evaluation items and shall include the required personal care skills. To satisfactorily complete the evaluation the student shall make a score of at least seventy (70) percent and successfully demonstrate five (5) procedures under the observation of the examiner. Any critical criteria task shall be accomplished with 100 percent accuracy. Task related evaluation items are developed to also evaluate non-task orientated competency of the student, such as communication, comprehension, and psychosocial skills.
2. A person who fails the competency evaluation exam the first time shall have the opportunity to retake the test twice. The trainee shall be advised of the areas he/she did not successfully complete. If the test is failed for the third time, the individual shall retake and successfully complete the entire training program before being allowed to retest. Successful completion of the competency evaluation shall be accomplished within four (4) months of the date of hire. If a nurse aide trainee has not successfully completed the training and testing and changes employers he/she shall be allowed three (3) times to train and nine (9) times to test within the year.

SECTION VII - RECORDS

1. RECORDS
2. Within fifteen (15) days, but not to exceed thirty (30) days of satisfactory completion of the competency evaluation, KCTCS shall forward to the registry, the names and social security numbers and other identifying information of students who have successfully completed the competency evaluation. No registration charges shall be imposed on individuals placed on the registry.
3. The student shall be advised, in writing, by KCTCS of the competency evaluation results.
4. The registry shall contain the name of each individual who has successfully completed the competency evaluation. It shall also include the name of each individual who has successfully challenged the competency evaluation program or has been granted an exemption or reciprocity. Any findings of abuse, neglect, or misappropriation of property shall be placed on the registry. Documentation shall include the nature of the allegation and evidence that led the State to conclude that the allegation was valid, the date of the hearing and its outcome, and a statement by the individual disputing the allegation, if he chooses to make one. This information shall be included in the registry within ten (10) working days of the findings and shall remain on the registry permanently unless the findings were made in error, the individual was found not guilty in a court of law, or the state is notified of the individual's death.

It is the employing facility's responsibility to verify that the nurse aide is on the nurse aide registry in good standing. Documents verifying successful completion of a NATCEP shall not substitute for confirmation by the registry.

The nurse aide registry shall renew a nurse aide's registration at least once every two (2) years. Registration shall be denied if the nurse aide has not worked a minimum of eight (8) hours as a nurse aide for compensation for twenty-four (24) consecutive months.

SECTION VII - RECORDS

1. Upon request the state shall provide specific information from the registry as follows:
   1. Whether or not the aide's name is on the registry as having completed the nurse aide training competency evaluation program or competency program;
   2. The findings of any substantiated complaint received regarding the aide; and
   3. Any statement made by the aide regarding the complaints.

SECTION VIII - ABUSE REGISTRY, HEARING RIGHTS, AND PETITION FOR REVIEW

1. ABUSE REGISTRY, HEARING RIGHTS, AND PETITION FOR REVIEW

The Commonwealth of Kentucky, Office of Inspector General is designated by the Centers for Medicare and Medicaid Services as the state survey and certification agency to:

* 1. In accordance with 42 CFR 483.156(b)(2) be responsible for placing findings of resident neglect, abuse, and misappropriation of resident property by a nurse aide; and

B. Provide for an implicated nurse aide in accordance with Administrative Regulation 906 KAR 1:100 procedures for:

* 1. A hearing;
  2. Appeal rights; and
  3. A petition for review.



SECTION IX - RECIPROCITY

1. RECIPROCITY
   1. A Nurse aide whose name is on another State's Nurse Aide Registry may be granted reciprocity in Kentucky. The individual may be deemed competent for employment in a nursing facility based upon written verification from the agency that maintains the involved State's Nurse Aide Registry. This verification shall include the aide's name, social security number or other identification number, the date the name was placed on the registry and any documented findings pertaining to the individual. In addition, an employment record shall be provided to the registry to verify that twenty-four (24) months have not expired since he worked for pay as an aide. Reciprocity shall not be granted for anyone who has a validated complaint which is documented on a registry.

To request reciprocity, a nurse aide may call:

Kentucky Nurse Aide Registry

312 Whittington Parkway Suite 300-A

Louisville, KY 40222-5172

Telephone: (502) 429-3346

Toll Free: (888) 530-1919

Fax: (502) 429-1247

















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SECTION X - CERTIFICATION

1. CERTIFICATION
2. Certification of nurse aides is NOT required; therefore, the term "Certified Nurse Aide" or “CNA” shall NOT be used in connection with completion of this course. This is the Medicaid approved nurse aide training program for nurse aides and the registry shall be used only for validation of successful completion of the nurse aide training and competency evaluation program. The registry shall also provide information pertaining to any documented finding by a state of resident neglect, abuse or misappropriation of resident property involving an individual listed on the registry, as well as any brief statement of the individual's disputation of the findings.
3. Long-term care facilities are encouraged to provide recognition to students who have successfully completed the competency evaluations.

SECTION XI - CONDITIONS OF PARTICIPATION AND COMPLIANCE WITH PROGRAM REQUIREMENTS

1. CONDITIONS OF PARTICIPATION AND COMPLIANCE WITH PROGRAM REQUIREMENTS
   1. Approval to conduct a NATCEP:

In order to conduct a NATCEP the agency or facility must request and receive approval by the Department for Medicaid Services or Medicaid Services designee. Requests for approval shall be submitted to Medicaid Services or Medicaid Services designee by means of a completed MAP-414, in its most current edition. The request shall include written documentation pertaining to the following:

1. That the state-approved basic curriculum shall be followed.
2. That all requirements shall be met with regard to program content, hours of classroom instruction and clinical practice.
3. The qualifications of the classroom instructor and program coordinator.
4. The method of clinical supervision.
5. The qualifications of any other faculty members for any aspect of the program.
6. The physical facilities that shall be used in classroom and skills training.
7. Assurances of access to a long-term care facility for the clinical experience aspect of the program with a written memorandum of agreement if other than a facility-based program.
8. A description of each complaint received about the facility in the previous two (2) years.
9. For facility-based programs, a signed statement indicating that the facility is in good standing with the Office of the Inspector General.
   1. Within ninety (90) days of receipt Medicaid Services or Medicaid Services designee shall advise the requester whether or not the program has been approved or request additional information. The approval of a nurse aide training and competency evaluation program shall not be for a period longer than two (2) years. Approved programs shall notify Medicaid Services or Medicaid Services designee in writing and receive approval when there are substantial changes made to their programs within 30 days. No charges shall be imposed on individuals employed by nursing facilities for training or testing required as result of the changes.

SECTION XI - CONDITIONS OF PARTICIPATION AND COMPLIANCE WITH PROGRAM REQUIREMENTS

* 1. Disapproval to conduct a NATCEP

1. Pursuant to 42 CFR 483.151, training programs offered by or in a nursing facility shall not be approved if in the previous two (2) years they have had:
2. A waiver of the licensed nurse or registered nurse requirement for a period of in excess of forty-eight (48) hours;
3. An extended (or partial extended) survey;
4. Sanctions imposed by Medicare or Medicaid law including a civil money penalty as imposed by federal regulations, denial of payment for new admissions, appointment of temporary management, closing the facility or transferring residents, or termination.
5. Had facility participation terminated under the State plan;
6. Was subject to a denial of payment for medical assistance under the state plan;
7. Operated under temporary management appointed to oversee the operation of the facility and to ensure the health and safety of its residents; or
8. Was closed or had its residents transferred due to department action.
9. If approval is withdrawn for an existing Nurse Aide Training program, the department shall notify the program in writing, indicating the reason(s) for withdrawal of approval of the program. An individual who has started a training program for which approval has been withdrawn shall be allowed to complete the course.
10. In accordance with 42 USC 1396 r, the department may waive the disapproval of programs offered in a nursing facility if the department:
11. Determines that there is no other such program offered within thirty (30) miles of the facility;
12. Assures through an oversight effort that an adequate environment exists for operating the program in the facility;
13. Provides notice of waiver determination and assurances to the State long term care ombudsman; and
14. Duration of Waiver - A waiver may not exceed two (2) years but must be withdrawn earlier if the facility is

subsequently found to no longer meet the waiver criteria.

SECTION XI - CONDITIONS OF PARTICIPATION AND COMPLIANCE WITH PROGRAM REQUIREMENTS

* 1. Initial Post-Approval and Ongoing Review:

1. After initial approval of the training program, each program shall be monitored as follows:
2. Approved nurse aide training programs conducted by nursing facilities shall be monitored on-site, during the regularly scheduled standard survey process done by the Office of the Inspector General (O.I.G.).
3. The monitoring system used by KCTCS shall be used for the nurse aide training programs conducted by KCTCS and KDE, Office of Career and Technical Education and Student Transition. This monitoring shall be conducted on-site annually by the KCTCS. The KCTCS shall submit an annual report to Medicaid Services.
4. Medicaid Services or Medicaid Services designee shall conduct the monitoring of all other approved nurse aide training programs. After initial program approval, Medicaid Services or Medicaid Services designee shall conduct an annual on-site review.
5. For annual reviews, the following may be requested (records must be kept for a minimum of 5 years):

* Proof of KBN Abuse Registry checks (must be completed prior to the start of class; search must be conducted using social security numbers)
* Proof of CHFS Kentucky Adult Caregiver Misconduct Registry checks (must be completed prior to the start of class; search must be conducted using social security numbers)
* Criminal Background checks (must be completed prior to the start of class; for individuals eighteen (18) years old and older) unless required by the clinical facility.
* Tuberculosis Testing and TB Risk Assessment (per 902 KAR 20:205 and current CDC guidelines)
* Statement of Understanding
* Nurse Aide Task List (must be initialed and dated as the skills are completed)
* Proof of Kentucky Commission on Proprietary Education (KCPE) licensure and/or licensure renewals

(for proprietary programs)

SECTION XI - CONDITIONS OF PARTICIPATION AND COMPLIANCE WITH PROGRAM REQUIREMENTS

* Instructor Evaluations
* Proof of a minimum of three (3) (minimum) written or oral course exams with average of 70% pass rate.

1. If the program is found to be noncompliant, a plan of correction shall be submitted to the program’s monitoring entity within thirty (30) days. If the plan of correction is not submitted or is not approved, the program shall be decertified and shall not be eligible to reapply for a nurse aide training program until two (2) years from the date of decertification.
2. Medicaid Services or Medicaid Services designee shall withdraw the approval of a nurse aide training and competency evaluation program that does not permit unannounced visits by the State. If a nurse aide training program is decertified for any reason, no new trainees shall be enrolled. However, those trainees in the process of training shall be allowed to finish the training and take the state competency test.

SECTION XII - ON GOING STAFF DEVELOPMENT

XII. ON GOING STAFF DEVELOPMENT

1. Each nursing facility is required to provide a minimum of twelve (12) hours of ongoing staff development annually, per date of employment, for each nurse aide employed who has completed the training program. The facilities shall complete a performance review of each nurse aide at least once every twelve (12) months and shall document that the staff development shall be based on the outcome of these reviews. Staff development must also include any topics outlined in current Federal regulation. Cognitive impairment, Alzheimer's disease, and Dementia's other than Alzheimer's disease, and special needs of these residents shall also be addressed annually. The facility shall ensure that nurse aides are able to demonstrate competency in skills and techniques necessary to care for resident's needs, as identified through resident assessments, and described in the plan of care. The training may be conducted in groups or on an individual basis when necessary.
2. Each nurse aide shall be compensated for time spent in staff development and there shall be documentation of the content of the training program and a staff attendance record kept. Nursing facilities may develop an internal policy to ensure staff development attendance.

SECTION XIII REIMBURSEMENT

XIII. REIMBURSEMENT

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* + - 1. The Kentucky State Medicaid Program provides for the reimbursement of costs to Nursing Facilities incurred in completing a nurse aide training and competency evaluation program or competency evaluation program for nurse aides employed by, who become employed by or who obtain an offer of employment from a facility within 12 months of completing such program.
      2. A nurse aide who is employed by or has received an offer of employment from a facility on the date on which the aide begins a nurse aide training program shall not be charged for any portion of the program, including fees for textbooks, other required course materials, and initial state testing fees.
      3. If an individual who is not employed, or does not have an offer to be employed, as a nurse aide becomes employed by, or receives an offer of employment from a facility not later than twelve (12) months after completing a nurse aide/training program, the department must provide for the reimbursement of costs incurred in completing the program on a pro rata basis during the period in which the individual is employed as a nurse aide. ·
      4. The Nurse Aide Training (NAT) maximum reimbursement amount is $.45 per Medicaid patient day.
      5. The days used to determine the maximum allowable NAT reimbursement is the Medicaid days reported on the Nursing Facility Medicaid supplemental schedules received by the department from each provider for the most recent twelve­ month period preceding the federal fiscal year.
      6. The billing form MAP-576 shall be used by each nursing facility to bill the Kentucky Department for Medicaid Services for its actual and reasonable cost of providing nurse aide training. Each nursing facility shall complete and file a MAP- 576 within thirty (30) days of course completion.

SECTION XIII REIMBURSEMENT





* + - 1. NAT reimbursement claims shall be submitted to:

**Cabinet for Health and Family Services**

**Department for Medicaid Services**

**Division of Policy and Operations**

**Benefit Policy Branch**

**275 East Main Street, 6 W-D**

**Frankfort, KY 40621-0001**

**Attention: Nurse Aide Training Coordinator**