



Frequently Asked Questions (FAQs) related to Advanced Practice Registered Nurses (APRN) Practice and the CARES Act of 2020

The national Centers for Medicare and Medicaid Services (CMS) has amended Chapter 7 of the Medicare Benefit Policy Manual (Pub 100-02), pertaining to Home Health Services, to incorporate Nurse Practitioners (NPs) and Clinical Nurse Specialists (CNSs) as “allowed practitioners.” The changes give regulatory permission for CNSs and NPs to certify and recertify home health services in California.

This new allowance will currently be incorporated into standardized procedures for both NPs and CNSs. Upon full regulatory implementation of Assembly Bill 890 (Reg. Sess. 2019-2020), the permission to certify and recertify home health services will be allowable without standardized procedures for eligible NPs in accordance with Business and Professions Code sections 2837.103 and 2837.104. For CNSs in California, the standardized procedure requirement remains.

What is the CARES Act of 2020?

The Coronavirus Aid, Relief, and Economic Security Act¹, also known as the CARES Act, is a piece of federal legislation that was passed in 2020 in response to the impacts of the COVID-19 pandemic. In addition to significant economic stimulus measures, the CARES Act made changes to healthcare laws to allow for greater flexibility, including changes to Medicare payment rules.

How does the CARES Act affect California APRN practice?

As a result of the CARES Act², CMS updated its regulations to designate NPs and CNSs as “allowed practitioners” that can order home health services for Medicare home health beneficiaries.

Are there specific requirements for APRNs to be able to order home health services?

Yes. The practitioner must be practicing according to state law. The NP or CNS must hold national certification in order to be eligible for reimbursement.

How does the CARES Act improve access to care?

This change increases access to care by allowing qualified APRNs to be able to assess patients and timely facilitate the provision of needed care and treatment while patients remain in the safety of their homes. An individual no longer has to be solely under the care of a physician – an individual who is under the care of a NP or CNS will also qualify. The NP or CNS can establish the patient’s plan of care and certify the patient’s eligibility. This allows the NP or CNS to sign the Home Health Certification and Plan of Care (Form CMS-485) and interim orders directly. It will eliminate the extra step of having the supervising physician sign orders that are properly given by the non-physician practitioner. This also allows the NP or CNS to perform the required face-to-face encounter.

¹ Pub.L. No. 116–136 (March 27, 2020) 134 Stat. 281.

² § 3708, subd. (f).



Are there additional benefits that may affect APRN practice?

Yes. The CARES Act also supports broader use of telecommunications systems, including remote patient monitoring, to deliver home health services under certain circumstances (such as when the beneficiary is presented from an originating site located in a rural health professional shortage area or in a county outside of a Metropolitan Statistical Area). This would allow certain patients to receive home health services without a provider entering their home.

For more detailed and up-to-date information, interested parties should consult the text of the CMS Medicare Benefit Policy Manual.

RESOURCES:

- CMS Publication – “Home Health Manual Update to Incorporate Allowed Practitioners into Home Health Policy”: <https://www.cms.gov/files/document/r10438bp.pdf>
- Medicare Benefit Policy Manual, Chapter 7 – Home Health Services: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c07.pdf>