



Billing Information Addendum

A. Nursing facility services include, but are not limited to, a medically necessary room, dietary services including dietary supplements used for tube feeding or oral feeding such as high nitrogen diet, nursing services, minor medical and surgical supplies, and the use of equipment and facilities. Payment for the services listed in this subsection is included in the per diem rate. Nursing facility services include but are not limited to the following or any similar items:

1. all general nursing services, including but not limited to administration of oxygen and medications, hand feeding, incontinence care, tray service, nursing rehabilitation services, enemas, and routine pressure sore/ decubitis treatment;
2. services necessary to provide for residents in a manner and in an environment that promotes maintenance or enhancement of each resident's quality of life;
3. services required to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each recipient who is a resident in the facility;
4. items furnished routinely to all residents without charge, such as resident gowns, water pitchers, basins and bed pans;
5. items furnished routinely to all residents without charge, such as resident gowns, water pitchers, basins and bed pans;
6. items routinely provided to residents including but not limited to:
 - antibacterial/bacteriostatic solutions, including betadine, hydrogen peroxide, 70% alcohol, merthiolate, zepherin solution
 - cotton
 - denture cups
 - deodorizers (room-type)
 - distilled water
 - enema equipment and/or solutions
 - facial tissues and paper toweling
 - finger cots
 - first aid supplies
 - foot soaks
 - gloves (sterile and non-sterile)
 - hot water bottles
 - hypodermic needles (disposable and non-disposable)
 - ice bags
 - incontinence pads
 - linens for bed and bathing
 - lotions (for general skin care)
 - medication – dispensing cups and envelopes
 - ointments for general protective skin care
 - ointments (anti-bacterial)
 - personal hygiene items and services, including but not limited to:
 - bathing items and services, including but not limited to towels, washcloths and soap
 - hair care and hygiene items, including but not limited to shampoo, brush and comb
 - incontinence care and supplies appropriate for the resident's individual medical needs
 - miscellaneous items and services, including but not limited to cotton balls and swabs, deodorant, hospital gowns, sanitary napkins and related supplies, and tissues
 - nail care and hygiene items
 - shaving items, including but not limited to razors and shaving crème
 - skin care and hygiene items, including but not limited to bath soap, moisturizing lotion, and disinfecting soaps or specialized cleansing agents when indicated to treat special skin problems or to fight infection
 - tooth and denture care items and services, including but not limited to toothpaste, toothbrush, floss, denture cleaner and adhesive
 - safety pins
 - sterile water and normal saline for irrigating
 - sheepskins and other fleece-type pads
 - soaps (hand or bacteriostatic)
 - supplies necessary to maintain infection control, including those required for isolation type services

- surgical tape
 - over-the-counter drugs (or equivalents), including but not limited to:
 - acetaminophen (regular and extra-strength)
 - aspirin (regular and extra-strength)
 - cough syrups
 - specific therapeutic classes D4B (antacids), D6S (laxatives and cathartics) and Q3S (laxatives, local/rectal) including, but not limited to:
 - *milk of magnesia
 - *mineral oil
 - *suppositories for evacuation (Dulcolax and glycerine)
 - *Maalox
 - *Mylanta
 - nasal decongestants and antihistamines
 - straw/tubes for drinking
 - suture removal kits
 - swabs (including alcohol swab)
 - syringes (disposable and non-disposable hypodermic; insulin, irrigating)
 - thermometers, clinical
 - tongue blades
 - water pitchers
 - waste bags
 - wound-cleansing beads or paste
7. items used by individual residents which are reusable and expected to be available including, but not limited to:
- bathtub accessories (seat, stool, rail)
 - beds, mattresses, and bedside furniture
 - bed boards, foot boards, cradles
 - bedside equipment, including bedpans, urinals, emesis
 - basins, water pitchers, serving trays
 - bedside safety rails
 - blood-glucose testing equipment
 - blood pressure equipment, including stethoscopes
 - canes, crutches
 - cervical collars
 - commode chairs
 - enteral feeding pumps
 - geriatric chairs
 - heat lamps, including infrared lamps
 - humidifiers
 - isolation cart
 - IV poles mattresses (foam-type and water)
 - Patient lift apparatus
 - Physical examination equipment
 - Postural drainage board
 - Room
 - Raised toilet seat
 - Sitz baths
 - Suction machines
 - Tourniquets
 - Traction equipment
 - Trapeze bars
 - Vaporizers, steam-type
 - Walkers (regular and wheeled)
 - Wheelchairs (standard)
 - Whirlpool bath

8. laundry services whether provided by the facility or by a hired firm, except for residents' personal clothing which is dry cleaned outside of the facility
9. non-emergency routine transportation for routine activities, such as outings scheduled by the facility, non-emergency visits to physicians, dentists, optometrists or other medical providers within 20 miles of the facility

SEPARATELY BILLABLE ITEMS

In addition to the amount payable, Medicaid will reimburse nursing facilities located in the state of Montana for the following separately billable items:

- adhesive
- adhesive remover
- blood tubing, arterial or venous
- blood glucose test strips for dialysis
- blood glucose test or reagent strips for home blood glucose monitor
- breathing circuits
- cannula, nasal
- catheter care kit
- external urethral clamp or compression device
- face tent
- feeding supply kits
- feeding syringe
- gastrostomy/jejunostomy tube, any material, any type
- humidifier
- implantable access catheter (venous, arterial, epidural, subarachnoid, peritoneal, etc.) external access
- implanted pleural catheter
- mouth piece
- nasal interface (mask or cannula type) used with positive airway device
- nasogastric tubing (with or without stylet)
- nebulizer, with compressor
- nutrient solutions for parenteral and enteral nutrition therapy when such solutions are the only source of nutrition for resident who, because of chronic illness or trauma, cannot be sustained through oral feeding
- nutrition administration kits
- oropharyngeal suction catheter
- ostomy bags (pouches)
- ostomy belt
- ostomy face plate
- ostomy filter
- ostomy irrigation set and supplies
- ostomy irrigation supply, cone/catheter, including brush
- ostomy lubricant
- ostomy rings
- ostomy skin barriers
- ostomy surgical tray
- oxygen contents, portable, liquid
- oxygen contents, portable, gas
- oxygen contents, stationary, gas
- oxygen contents, stationary, liquid
- oxygen tubing
- regulator
- respiratory suction pump, home model, portable or stationary
- stand/rack
- stomach tube – Levine type
- tracheostomy care kit for established tracheostomy

- tracheostomy, inner cannula (replacement only)
- urine test or reagent strips or tablets
- urinary catheters
- urinary insertion trays (sets)
- urinary collection bags

Payment for these solutions will be allowed only where:

- the department determines they are medically necessary and appropriate, and authorizes payment before the items are provided to the resident;
- routine nursing supplies used in extraordinary amounts and prior authorized by the department;
- oxygen concentrators and portable oxygen units (carts, E tank and regulators), if prior authorized by the department;
- durable medical equipment and medical supplies, not nursing facility services; all prescribed medications, including flu shots and tine test;
- other non-emergency routine transportation not identified on page 4 (9) and emergency transportation;
- provider of other medical services or supplies, which are not nursing facility services.

ITEMS BILLABLE TO RESIDENTS

The nursing facility resident may be billed for the following items or services not covered by Medicare or Medicaid:

- gifts purchased by residents
- social events and entertainment outside the scope of the provider's activities program
- cosmetics and grooming items and services in excess of those for which payment is made by Medicare and Medicaid
- personal comfort items, including tobacco products and accessories, notions, novelties, and confections
- personal dry cleaning
- beauty shop services
- television, radio and private telephone rental
- less-than-effective drugs (exclusive of stock items)
- vitamins, multivitamins, vitamin supplements and calcium supplements
- personal reading material
- personal clothing
- flowers and plants
- privately hired nurses or aides
- specially prepared or alternative food requested instead of food generally prepared by facility
- the difference between the cost of items usually reimbursed under the per diem rate and the cost of specific items or brands requested by the resident which are different from that which the facility routinely stocks or provides (e.g., special lotion, powder, diapers).

A provider must provide a medically necessary private room at no additional charge and may not bill the recipient any additional charge for the medically necessary private room.

The resident may be billed for the extra cost of a private room if the private room is not medically necessary and is requested by the resident.