



# **ND Contractor Meeting**

---

**NOVEMBER 6, 2025**

# Agenda

- Introductions
- Organizational Changes
- SOP billing
- Billing units
- Background check update
- Medication management
- Program Updates
- Q&A





# Organizational Changes at DSHS

## Realigning for enhanced service

As part of this effort, we have consolidated key functions previously managed by the Behavioral Health, Developmental Disabilities and Aging and Long-Term Support Administrations into two core entities:

- **Behavioral Health and Habilitation Administration (BHHA)**: this division will oversee state-operated settings and manage comprehensive behavioral health and habilitation services—including 24/7 facilities and Residential Habilitation Centers.
- **Home and Community Living Administration (HCLA) formerly AL TSA**: this division focuses on coordinating home and community-based services to better support clients in their own environments.
- This new entity (HCLA) merges key functions from the community side of the Developmental Disabilities Administration and the Aging and Long-Term Support Administration
  - Home and Community Services (HCS),
  - Adult Protective Services (APS)
  - Residential Care Services (RCS).
  - Developmental Disabilities Community Services (**DDCS**) formerly DDA, focusing on maintaining continuity across developmental disability programs, services and initiatives.

<https://www.dshs.wa.gov/alert/organizational-changes-dshs> \*\* FAQs found here

# Skin Observation

## New Billing Code for Skin Observation Protocol (SOP) assessments

➤ Beginning, July 1, 2025, all SOP referrals to a contracted RN or Home Health Agency will be authorized using T1002 U2, with the following unit rates with a limit of 24 units:

\$ Individual Contracted RN: \$12.86/unit

\$ Home Health Agency: \$15.43/unit

For HCS/AAA the timeline is completed in 29 days

For DDCCS the timeline to complete is 10 days

✓ [T1002 U2 Service Code Data Sheet](#)

❖ [MB HCS H25-021](#)



## Did RN Justify Time Billed?

- A printout/report of monthly units billed, is ***not*** justification.
- Time spent by others billing on your behalf is ***not*** billable time.
- **Justification should include all of the following:**
  - Required Nurse Delegation forms (Visit form/Change of Order etc.)
  - Time/Unit tracker broken down by billable activity
  - Nursing Notes \*  
Especially collateral contact communication



# Employee Criminal Background Check

Please use this link:

**Washington State Patrol  
Criminal BGC**

<https://wsp.wa.gov/crime/criminal-history/>

I apologize for the confusion. We were wrong in the information that was passed along in July regarding the DSHS background check unit. We are not able to grant access to BCCU through our program as we do not fall into the category of direct care worker. I have asked for a review of this.

We will need to have the full printout you receive and if there are negative findings, we have a form that needs to be filled out in addition to the check. You must notify us immediately to get instructions on this.

# RCW 69.41.010 change effective June 30, 2025

- Definitions -
- 15) "**Medication assistance**" means assistance rendered by a nonpractitioner to an individual residing in a community-based care setting or in-home care setting to facilitate the individual's **self-administration** of a legend drug or legend drugs, which may include a controlled substance or controlled substances. It includes reminding or coaching the individual, handing the medication container to the individual, opening the individual's medication container, using an enabler, or placing the medication in the individual's hand, and such other means of medication assistance as defined by rule adopted by the department. A nonpractitioner may help in the preparation of legend drugs, including controlled substances, for self-administration where a practitioner has determined and communicated orally or by written direction that such medication preparation assistance is necessary and appropriate. Medication assistance shall not include assistance with intravenous medications or injectable medications, **except setting up diabetic devices for self-administration or handing injectable medications to an individual for self-administration.**

## **Self-directed care:**

Chapter 74.39 RCW Self-Directed Care

RCW 74.39.007 Definitions

RCW 74.39.050 Individuals with functional disabilities – Self-directed care

WAC 388-825-400 Self-directed care—Who must direct self-directed care?

# Medication Management

- **Medication Assistance** describes ways to help an individual take their medication and does not need delegation.
- **Medication Administration** is the way an individual receives their medication from an authorized person. This task must be delegated if it is for a LTCW to complete.

## [WAC 246-945-710](#)

### Scope and applicability.

WAC 246-945-710 through 246-945-718 only apply to medication assistance rendered by a nonpractitioner to an individual residing in a community-based care setting or an in-home care setting.

Chapter 74.39 RCW Self-Directed Care

RCW 74.39.007 Definitions

RCW 74.39.050 Individuals with functional disabilities – Self-directed care

WAC 388-825-400 Self-directed care—Who must direct self-directed care?

PRN medications are like any other medications they do not all require delegation.

Assess for:

- Function - able to get the medication to where it needs to go (the last step)
- Cognition - aware they are receiving medications





## Resources:

### **DDCS Residential Provider Resources**

#### **DDCS Medical Action Protocols**

- [Aspiration / Choking Plan Protocol](#)
- [Bowel Protocol](#)
- [Medication Administration Record Protocol](#)
- [Seizure Protocol](#)
- [Skin Observation Protocol](#)
- [Vital Signs Tracking Protocol](#)

#### **DDA Care Provider Bulletins**

- [Managing medication flyer](#)

DDCS no longer has a Nursing Services manager, and the case management staff need to work amongst themselves to tackle client specific issues. I can assist if there is something urgent regarding client safety or issues as I am the contract holder for ND. If I receive questions from you regarding DD clients, I will answer, and you will see that I am including other people in the email.



## Other Updates/Reminders

- We can use more **Skilled Nurse Contractors** so please let us know if you are interested and we can direct you to the right AAA office.
- [WABON FAQ page](#)
- [DSHS Curriculum and Materials](#)
  - Fundamentals of Caregiving
  - Nurse Delegation Core training
  - Special Focus on Diabetes
- [Updated HCA Provider Billing guide information](#)
- [Mandatory Reporter Training for Contracted Providers](#)
- [Mandatory Reporting Contacts](#)



# Questions?





# 2026 Schedule

**CONTRACTOR MEETING VIRTUAL 10 AM - 12 PM**

- **JANUARY 8<sup>TH</sup>**
- **MARCH 12<sup>TH</sup>**
- **MAY 14<sup>TH</sup>**
- **JULY 9<sup>TH</sup>**
- **SEPTEMBER 10<sup>TH</sup>**
- **NOVEMBER 12<sup>TH</sup>**

**THANK YOU  
FOR  
ATTENDING**

Meeting notes will be posted NEXT week to:

DSHS ALTA Nurse Delegation Program:  
Contractor Meetings

For Delegation/Contract questions email:  
[nursedelegation@dshs.wa.gov](mailto:nursedelegation@dshs.wa.gov)

Janet Wakefield ND Program Manager  
[Janet.Wakefield@dshs.wa.gov](mailto:Janet.Wakefield@dshs.wa.gov) or

Troy O'Malley Contract Monitor  
[Troy.omalley1@dshs.wa.gov](mailto:Troy.omalley1@dshs.wa.gov)