MAP 576 Instructions for Nursing Facilities

According to state (907 KAR 1:450) and federal (42 CFR 483.158) regulations, Nursing Facilities may be entitled to reimbursement for State Registered Nurse Aides (SRNA) who are employed by the Nursing Facility and successfully complete a Nurse Aide Training and Competency Evaluation Program (NATCEP). The successful completion of a NATCEP means that the SRNA must successfully complete the state required 75 hour (minimum) KY Medicaid Services Nurse Aide Training course which includes 16 hours of clinical practice, successfully pass the KY SRNA state exam, and be registered with the Kentucky Board of Nursing (KBN). These requirements must be met (proof is required) before reimbursement may be requested. Nursing Facilities will have 30 days from the date the SRNA passes the state exam and is placed on the KBN’s SRNA registry. If there are several nurse aide students in a training class, the 30-day deadline begins on the date the last nurse aide student from the class passes the state exam and is placed on the KBN’s SRNA registry.

When submitting a MAP 576, Nursing Facilities should be sure to follow the steps outlined below:

1.) **Provide a KY vendor number.** A KY vendor number must be obtained prior to requesting reimbursement for SRNA’s. If the Nursing Facility does not have a KY vendor number, the Nursing Facility must request this through the KY Finance Cabinet and Administration Cabinet’s website (link provided below).
   https://finance.ky.gov/services/eprocurement/Pages/doingbusiness.aspx

2.) **Provide an Affidavit.** Submit an annual Affidavit with the first MAP 576 and invoice form of the contract period which begins July 1st of every year. Please note: the yearly affidavit is required, and an invoice will not be processed without this. This form is located on the Department for Medicaid Services (DMS) Nurse Aide Training (NAT) website (link provided below) in the forms section and is titled MAP 576 Required Affidavit.
   https://chfs.ky.gov/agencies/dms/dpo/bpb/Pages/natrain.aspx

3.) **Provide an Invoice form.** The MAP 576 Invoice form is located on the DMS NAT website and can be found in the forms section and titled MAP 576 Invoice for Reimbursement Request.
   • When completing this form please be sure to list the facilities name, address, and vendor number. All sections must be completed by the Nursing Facility with the exceptions of SFY Amount and the Invoice Number (these are optional sections). The accounting template is optional as well and is intended for Nursing Facilities who wish to keep track of the funds available for the budget year (budget year runs October 1st through September 30th). The contract period changes every year and runs July 1st through June 30th.

4.) **Provide a MAP 576.** The MAP 576 form is located on the DMS NAT website and is can be found in the forms section and titled Nurse Aide Training Expense Report and Authorization for Payment.
   • When completing this form please be sure to complete the form in its entirety except the section that states “For Department for Medicaid Services use only,” and have the administrator sign and date.
5.) **Provide proof.** Please remember that proof for all items being requested for reimbursement is required. Reimbursement is only allowed for SRNA’s who successfully complete the training, pass the state exam, and are placed on the KBN’s registry. Examples of proof may include but are not limited to:

- **Salary for training instructor:** must include a copy of the instructor’s paystub to verify the instructor’s hourly rate. To verify the hours the instructor trained the course and/or clinical hours, a log of the hours must be submitted and include the dates of training and signatures of the instructor and the SRNAs who successfully completed the course and passed the state exam. An example of this form is provided on the DMS NAT website in the forms section and is titled NAT Verification of Course and Clinical Hours. Please use this form if needed.

- **Copies of training material:** must include details as to what items were copied, how many copies were made for each item, total copies, and cost. An example of this form is provided on the DMS NAT website in the forms section and is titled NAT Verification of Copies.

- **Textbooks and workbooks:** an invoice must be included to verify the cost and can only be requested for SRNA’s who successfully complete the training and pass the state exam.

- **Testing fees:** an invoice must be included and must provide the date and name of the nurse aide. Reimbursement for testing can only be provided for successful tests. Failed tests are not eligible for reimbursement.

- **Classroom supplies:** copy of invoice must be provided.

- **Online Nurse Aide Training provider fees:** invoice must be included and must provide a copy of the SRNA’s certificate of completion of the online course. Online training reimbursement is only for SRNAs who have successfully completed the NAT online training and passed the state exam.