NC BCCCP & NC WISEWOMAN PROGRAM Enhanced Role Registered Nurse (ERRN) Monitoring Program for RNs Performing Exams for Patients Policy

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A Description of Clinical Services provided by the NC Breast and Cervical Cancer Control Program (NC BCCCP)/NC WISEWOMAN Program ERRN in the North Carolina Public Health System

BACKGROUND

A collaborative educational initiative between the Division of Public Health and the University of North Carolina Gillings School of Global Public Health helps assure accessibility and availability of STD services and NC BCCCP/ NC WISEWOMAN Program services throughout North Carolina by ERRNs. Registered nurses with ERRN certification are primary providers of NC BCCCP/ NC WISEWOMAN Program clinical services in many North Carolina local health departments. By standardizing the training of ERRNs and by following the Centers for Disease Control and Prevention (CDC) Guidelines, the North Carolina Public Health System can offer high quality, appropriate care in every county within the state who offers the NC BCCCP and NC WISEWOMAN Program. These services, when integrated with community prevention and detection programs, create better care which means better disease control (North Carolina Division of Public Health Communicable Disease Branch Technical Assistance & Training Program, 2015).

Offered through the UNC-CH Office of Continuing Education (OCE), the ERRN course combines online lectures from the Physical Assessment of Adults Course and the STD ERRN Course with a supervised clinical practicum (North Carolina Division of Public Health Communicable Disease Branch Technical Assistance & Training Program, 2015). NC BCCCP maintains a collaborative effort with the NC STD Nurse Consultants to provide joint triennial monitoring and oversight of the NC BCCCP/NC WISEWOMAN ERRNs. Currently there are approximately 16% (11) of ERRNs in North Carolina who provide NC BCCCP and/ or NC WISEWOMAN Program screening services only and who are monitored by a NC BCCCP and NC WISEWOMAN Program nurse consultant. The remaining 84% (52) are conducting STD and BCCCP services and are monitored by the STD nurse consultants (Please refer to the North Carolina Division of Public Health Communicable Disease Branch Technical Assistance & Training Program, 2015), https://sph.unc.edu/nciph/paa-std/.

POLICY

Breast and cervical cancer screening services are provided according to criteria set forth by NC DHHS in the NC BCCCP Agreement Addendum/Scope of Work.

ERRN CONTINUED COMPETENCY

The ERRN must maintain competency to perform screenings, counseling and referral of clients seeking care for breast and cervical abnormal findings through ongoing local health department quality

assurance monitoring and through Communicable Disease Branch (CDB) or NC BCCCP Regional Nurse Consultant monitoring. The BCCCP Program in the local health department must have clinician oversight by a registered nurse, mid-level practitioner, or physician. The ERRN Description of Clinical Services in Public Health (rev 10/2015), Performance Measure #3: "The local health department will ensure all registered nurses who provide clinical assessment and management of clients with NC BCCCP and STD concerns complete the Physical Assessment of Adults (PAA) and the STD Enhanced Role Registered Nurse (ERRN) training course" (North Carolina Division of Public Health Communicable Disease Branch Technical Assistance and Training Program, 2015).

After completion of initial ERRN training, the skill level of each nurse must be maintained through an acceptable level of practice. An acceptable level of practice is defined as the assessment and management of at least 50 female clients per calendar year and 10 hours of relevant clinical continuing education per calendar year. If the annual practice hour assessment and management requirements cannot be met locally, the ERRN must complete a designated NC BCCCP and/ or STD Prevention Training Center (STD PTC) practicum within the calendar year. Exceptions to this requirement for assuring continuing competency will be considered on a case-by-case basis by making a request in writing to the Technical Assistance and Training Program Supervisor or designee (North Carolina Division of Public Health Communicable Disease Branch Technical Assistance and Training Program, 2015).

Reporting Requirements: The local health department must submit electronically a list of the PAA /STD ERRN providers, the date the initial PAA/ STD Enhanced Role training was completed, a list of continuing education courses with number of relevant contact hours completed for each course, the total number and gender of NC BCCCP and/ or STD clients assessed, and the dates of PAA/ STD PTC courses attended, if applicable. Documentation of practice and continuing education will be reported annually, no later than January 15th of the following calendar year using DHHS form: ERRN Continuing Education and Skill Maintenance Verification (North Carolina Division of Public Health Communicable Disease Branch Technical Assistance and Training Program, 2015). The local health department must be able to list clients seen by each BCCCP/ STD service provider using a unique identifier such as the local health department medical record number.

For additional information about the ERRN program, please visit: http://www.sph.unc.edu/nciph/nciph-catalog

ANNUAL PAA/ STD ERRN RE-ROSTERING REQUIREMENTS

In 2020 a review of requirements was conducted for the re-rostering process. From January 1 through December 31 of each year, a currently rostered PAA/ STD ERRN must provide PAA/ STD services for a minimum of 50 STD clients and obtain 10 continuing education contact hours relevant to NC BCCCP breast and/or cervical screenings **or** assessment, evaluation, treatment, management, and prevention of sexually transmitted infections.

MEDICAID BILLING

It is the responsibility of the PAA/ STD ERRN and the employing agency to assure that the PAA/ STD ERRN meets re-rostering requirements in order to bill Medicaid for the STD services provided. NC BCCCP services are not billed but the ERRNs utilize current procedural terminology (CPT) and international classification of diseases (ICD) 10 coding for encounter records. Services provided by RNs who are rostered NC BCCCP ERRNs cannot be billed to Medicaid but can be reported by

using the 99210 or 99211 CPT code, the Z12.31 for encounter for other screening; Z124 for encounter for pelvic screening, Z01.411 for gynecological exam and N ICD-10 codes such as 88175 for pap smears. The NC BCCCP/ STD ERRN may observe clinical findings requiring a referral to a medical provider during the same clinical visit. Under these circumstances, the BCCCP/ STD ERRN should use 99210 CPT and ICD10 to record his or her time. Refer to North Carolina Division of Public Health Communicable Disease Branch Technical Assistance and Training Program Policy for STD ERRN Description of Clinical Services in Public Health (rev 10/2015).

SUMMARY

The NC BCCCP and the STD ERRN has an integral role in breast and cervical screening and STD control and treatment in local health departments. The NC BCCCP ERRN as well as the STD ERRN must be properly trained and credentialed and maintain continued competency while working in the NC BCCCP and STD clinical setting.

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Approved by:

NC BCCCP Medical Advisor

NC BCCCP Program Director

References:

NC Department of Public Health Breast and Cervical Cancer Control Program (2020). *BCCCP Agreement Addendum 2019- 2020, 2020- 2021*.

NC Division of Health and Human Services, Division of Public Health (2016). The Breast Screening Manual: A Guide for Health Departments and Providers.

NC Division of Health and Human Services, Division of Public Health (2018). The Cervical Screening Manual: A Guide for Health Departments and Providers.

North Carolina Division of Public Health Communicable Disease Branch Technical Assistance & Training Program (2015). A Description of Clinical Services provided by the Sexually Transmitted Disease Enhanced Role Registered Nurse (STD ERRN) in the North Carolina Public Health System.