

Technology and reimbursement

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The Recent CNS Examples from My Clinical Experience: The medical technology sector has also joined in the 'green' revolution band wagon and are also trying to make certain that their environmental footprint stays as low as impact as possible. This is in trying to keep up with the society that is more aware about their environmental impact responsibility (Hanson, 2005). Still on the technology that we employed in my midwifery clinical experience, we utilized the mother baby bracelet. Its main function was to prevent a situation where the mother ends up going with the wrong baby accidentally or switching their baby with another. It was also effective in preventing outright stealing of babies from the hospital. This helped to create a feeling of security among the mothers at the hospital which is good for the recovering mothers and also for the hospitals administration. In case of any of a mother switching her baby with another whether intentionally or by accident, there would be an alarm that went off attracting the attention of the security staff and other administrators.

The only drawback to this system was whereby the nurse forgot to enter the code in the computer after a mother took her baby; as a result the alarm would immediately go off and the whole unit would be under security lock down. This also happened whenever a nurse would take a baby to the mother's room and neglect to enter the baby's code in the system thus triggering the alarm. This was the only disadvantage to the system but it can be overcome by ensuring the nurses do not forget to input the security code when needed to. The chances are there that these mother baby bracelets can malfunction or may confuse the operator. It is important that nurse operating the mother baby bracelet should possess thorough information on

the device and its functions.

The usage of Smartphones is another example. Smart phones can also play a vital role in helping the nurses with EMR (electronic medical record). They can be of great help to the students on the rotations. During my experience, I have seen staff using smartphones for direct and quick consultation with other clinicians, to search for related drugs, to check the patient's record and files and to maintain the patient's record. Portability is the basic advantage of smartphones. They are handy and easy to carry. One can access the required information from anywhere, so the clinicians are not bound to one particular location. Along with advantage, some disadvantages are also associated with these smartphones. Sometimes, they can stop working (no services) at a particular location. They have a standard yet limited battery life and you need to make sure that your smartphone is well-charged and, connected to a fast-speed wi-fi connection.

The above examples are associated with the recent CNS practice as they are widely used to improve the efficiency, accuracy and delivery of information and on-time quick communication between the patient and the nurse or the clinician.

2- How to Obtain Reimbursement for my Services as a CNS:

To obtain reimbursement for my services as a CNS, it is important for me to hold a license for that particular state in which I am working. It is also important for me to hold a certification or a degree in my field of interest in nursing sphere. Also, it is equally important to be certified as a CNS by any legal concerned body. It is highly important to understand that Medicare carriers are billed directly for their professional services when furnished to

hospital patients, both inpatients and outpatients. The employer of a CNS, rather than the hospital, must bill the carrier for their professional services when furnished to hospital patients. Hospitals should not bill for the professional services of a CNS, unless the CNS is employed by the hospital (CMS, 1998).

The professional services of CNSs furnished to hospital inpatients and outpatients may be billed directly by the CNS to the carrier under their respective Medicare billing number or their National Provider Identifier (NPI), once the NPI is effective. The employer of a CNS may bill the carrier directly for the professional services of the CNS furnished to hospital inpatients and outpatients under the CNS Medicare billing number or the NPI, once the NPI is effective. As a clinical nurse specialist (CNS) I can follow the following steps to achieve reimbursement from the client's insurance carrier for services rendered. The principles on inpatient reimbursement are usually based on similar rules. Using these guidelines, a CNS is guaranteed to get their reimbursement for services rendered.

References:

C. M. Hanson (2005). *Advanced practice nursing: An integrative approach*. St. Louis: Elsevier 3rd ed., pp. 415-446.

CMS website (1998). A revised Chapter 12, Section 120. 1—Direct Billing and Payment—of the Medicare Claims Processing Manual attached to CR 5221.