

Bulletin Number: MSA 07-45

Distribution: Hospice, Hospitals, Medicaid Health Plans, Mental Health/Substance Abuse (Prepaid Inpatient Health Plans and Coordinating Agencies), Nursing Facilities, Program of All Inclusive Care for the Elderly (PACE), MI Choice Waiver, Local Health Departments, Area Agencies on Aging

Issued: September 1, 2007

Subject: Single Point of Entry (Long Term Care Connection) Demonstration Project

Effective: November 1, 2007

Programs Affected: Medicaid

Single Point of Entry (Long Term Care Connection) Demonstration Project

The provisions of Sections 109i and 109j of Public Act 634 of 2006 amended PA 280 of 1939, authorizing the Michigan Department of Community Health (MDCH) to conduct a Single Point of Entry (Long Term Care Connection (LTCC)) demonstration project. Accordingly, MDCH has designated four pilot regional LTCC agencies that encompass thirty-six Michigan counties.

Each of the four regional LTCCs will serve as access points for individuals seeking long term care by providing information and referral for all long term care options, services and supports. The LTCCs will serve as the sole agency within each region to assess a Medicaid beneficiary's medical/functional eligibility via the Michigan Medicaid Nursing Facility Level of Care Determination (LOCD) for nursing facilities and the MI Choice Waiver program. In order to implement this policy, LTCCs will establish a memorandum of understanding with any hospitals, nursing facilities and MI Choice Program agencies located within any of the four LTCC regions.

Demonstration Project LTCC Regions and the Counties Served

The LTCC demonstration project defined in this bulletin applies **only** to providers located within the following counties, as well as the following cities surrounding the Detroit area:

Detroit/Wayne: Serves City of Detroit, Grosse Pointe (GP), GP Farms, GP Park, GP Shores, GP Woods, Hamtramck, Harper Woods, Highland Park

Southwest Michigan: Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, Van Buren

West Michigan: Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, Osceola, Ottawa

Upper Peninsula: Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, Schoolcraft

Attached is a list of the Long Term Care Connection's regional contact information. This list, as well as additional Long Term Care Connection demonstration project information, is available on the Office of Long Term Care Supports and Services website at www.michigan.gov/lc; select Michigan's LTC Connections (Single Point of Entry) >> LTC Connections Contact Information.

Individuals living within an area served by the LTCC who are seeking long term care services outside of the area served by the LTCC are not held to the demonstration project policies.

MSA Policy Affected by LTCC Demonstration Project

The LTCC Demonstration Project modifies current LOCD policy for providers located within any of the four LTCC regions. Current LOCD policy is described in the Medicaid Provider Manual, as well as on the MDCH website at www.michigan.gov/mdch; select Providers >> Information for Medicaid Providers >> Michigan Medicaid Nursing Facility Level of Care Determination. The following summarizes the modifications to current LOCD policy for providers located within LTCC regions.

Michigan Medicaid Nursing Facility Level of Care Determination

- Beginning November 1, 2007, all nursing facility and MI Choice Program providers located within any of the four LTCC regions will no longer conduct LOCDs (list of counties/cities located on page 1 of this bulletin).
- Beginning November 1, 2007, LTCCs will be the sole agency to conduct LOCDs for all Medicaid eligible or Medicaid pending beneficiaries residing in an area served by the LTCC who are seeking Medicaid medical/functional eligibility for Medicaid long term care programs (i.e., Medicaid reimbursed nursing facilities and MI Choice Program). The LTCC will be granted access rights to necessary medical information by way of the Medicaid provider's release form(s). The LTCC staff conducting the LOCDs must be health professionals: physician, registered nurse, licensed practical nurse, or licensed social worker (BSW or MSW) or physician assistant. Non-health professional LTCC staff may perform the LOCD with oversight by a health professional.
- Beginning November 1, 2007, LTCCs will provide a copy of their LOCD to the provider within two business days of completing it. The nursing facility must enter the information from the LTCC's LOCD into the LOCD website (<https://sso.state.mi.us/>) under their National Provider Identifier (NPI) within two business days of receipt of the LTCC's LOCD. The MI Choice Program agency must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receipt of the LTCC's LOCD **only** if the MI Choice Program agency determines the applicant to require at least one MI Choice Program service.
- The LTCC will conduct LOCDs for all residents residing, or seeking Medicaid services, in an area served by the LTCC as follows:

New Admissions or Enrollments

The LTCC will conduct LOCDs for all Medicaid eligible beneficiaries or Medicaid pending applicants (Medicaid 'pending' status is defined as a Medicaid application that has been date stamped and registered by the Michigan Department of Human Services (MDHS)) who wish to enroll or be admitted into a Medicaid long term care program that is located within any one of the four LTCC regions whereby Medicaid reimbursement beyond Medicare co-insurance and deductible amounts will be requested as reimbursement for services rendered. The LTCC will respond within two business days from the date of contact by the beneficiary or applicant, or their representative, to schedule or to conduct the LOCD.

Change in Medical/Functional Condition of a Current Beneficiary

The LTCC may schedule and conduct a subsequent LOCD when a change in Medicaid medical/functional eligibility status is likely to occur (i.e., eligibility based on skilled rehabilitation therapies, physician involvement, treatments/conditions, etc.).

The LTCC will perform subsequent LOCDs for current residents or participants when a change in Medicaid medical/functional condition noted in the Medicaid provider's MDS, MDS-HC or medical records indicate a change in the individual's current Medicaid medical/functional eligibility status. The provider will contact the LTCC within two business days from the noted change in condition. The LTCC will conduct and provide a copy of the subsequent LOCD to the provider within five business days from the date of the provider's contact. The nursing facility must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receipt of the LTCC's LOCD. The MI Choice Program agency must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receipt of the LTCC's LOCD **only** if the MI Choice Program agency determines the applicant to require at least one MI Choice Program service. If the MI Choice Program agency determines that the beneficiary does not require at least one MI Choice Program service, the MI Choice Program agency must contact the LTCC on the date the beneficiary was determined not to require at least one MI Choice Program service.

Non-Emergency Transfers of Medicaid-Eligible Residents and Participants

The provider must contact the LTCC within two business days of knowledge of a pending non-emergency transfer. Non-emergency transfers include transfers originating from a provider undergoing a voluntary closure.

Within five business days from the date of the provider's contact, the LTCC will conduct and provide a copy of the LOCDs for all non-emergency transferred Medicaid-eligible nursing facility residents who are transferred to another nursing facility who have not previously had an LOCD conducted by the LTCC. For residents who have had a previous LOCD conducted by the LTCC, the LTCC will provide a copy of the resident's LOCD to the new admitting provider within five business days from the provider's date of contact. The nursing facility must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receiving the LTCC's LOCD.

Within five business days from the date of the MI Choice Program agency's contact, the LTCC will conduct and provide a copy of the LOCDs for all transferred Medicaid-eligible MI Choice Program participants who are transferred from one MI Choice Program agency to another MI Choice Program agency who have not previously had an LOCD conducted by the LTCC. For participants who have had a previous LOCD conducted by the LTCC, the LTCC will provide a copy of the participant's LOCD to the new agency within five business days from the agency's date of contact. The MI Choice Program agency must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receiving the LTCC's LOCD.

The LTCC will conduct LOCDs for financially Medicaid-eligible hospital residents seeking Medicaid long term care services as stated under the guidelines in the Memorandum of Understanding between the hospital and the LTCC.

Disenrollment of a Beneficiary from a Medicaid Health Plan

The LTCC will conduct LOCDs for financially Medicaid-eligible residents who were disenrolled beyond the forty-five days from a Medicaid Health Plan which had been paying for nursing facility services. The nursing facility must contact the LTCC within two business days from the date the resident was disenrolled from the Medicaid Health Plan. The LTCC will conduct and provide a copy of the resident's LOCD to the nursing facility within five business days from the provider's date of contact. The nursing facility must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receiving the LTCC's LOCD.

Private Pay Residents Already Residing in a Nursing Facility

The LTCC will conduct LOCDs for current nursing facility residents who have applied for Medicaid (i.e., Medicaid 'pending' status as previously defined) as the payer for nursing facility services. The nursing facility must contact the LTCC within two business days from the date the nursing facility was informed of the resident's Medicaid pending status; if not informed of the resident's Medicaid pending status, then within two business days from the date the nursing facility received notification of the resident's determination of Medicaid financial eligibility. The LTCC will conduct and provide a copy of the LOCD within five business days from the provider's date of contact. The nursing facility must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receiving the LTCC's LOCD.

Facility Closure and Involuntary Transfer of a Nursing Facility Resident

Any provider that is undergoing an involuntary closure and is located within any of the four LTCC regions must send a copy of the facility's 30-day notice of discontinuance (provided to the beneficiary) to the current provider's regional LTCC. The LTCC will conduct the LOCD for the Medicaid beneficiary(ies) and provide a copy to the admitting provider at the time of transfer. The new provider must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receiving the LTCC's LOCD.

Any provider that is involved in the involuntary discharge of one or more of its residents must follow the same notification procedure outlined above. A copy of the 30-day notice of involuntary transfer that is given to the resident must be provided to the LTCC.

Emergency Transfer of a Nursing Facility Resident

Any provider located within any of the four LTCC regions that is undergoing an emergency transfer (i.e., hazardous condition: flood, fire, loss of electricity, etc.) of one or more of its residents must contact the LTCC as soon as is reasonably feasible, notifying the LTCC of the emergency transfer. Within two days of the emergency transfer, the provider must fax or provide to the LTCC a list of all the residents who were, or who are, residing with that provider who were, or who will be, transferred. The new admitting provider must conduct the Emergency Transfer LOCD within two business days from the date of the emergency transfer. The Emergency Transfer LOCD is accessed from the bottom of the LOCDs Welcome Screen in the LOCD website (<https://sso.state.mi.us/>). The new provider must also contact the LTCC within two business days from the date the new provider conducted the Emergency Transfer LOCD. The LTCC will conduct and provide a copy of the LOCDs for the emergency transferred Medicaid beneficiaries to the admitting provider within five business days from the provider's date of contact. The nursing facility must enter the information from the LTCC's LOCD into the LOCD website under their NPI within two business days of receiving the LTCC's LOCD.

Note: The Emergency Transfer LOCD does not determine Medicaid medical/functional eligibility; it allows for transfer of Medicaid reimbursement from the previous provider to the new provider who admitted an emergency transferred beneficiary.

Medicaid Eligibility

- Medicaid services will be reimbursed only when the LTCC's LOCD determines the beneficiary to be medically/functionally eligible OR when subsequent LOCDs conducted by the LTCC continue to determine the beneficiary as medically/functionally eligible AND when the LOCD is submitted by the provider into the LOCD website under their NPI within two business days of receiving a copy of the LTCC's LOCD.
- If there is a discrepancy of Medicaid medical/functional eligibility between the LTCC's LOCD and the medical/functional information reported on a nursing facility's MDS, the nursing facility must contact the LTCC within two business days of their signed and dated 14-day MDS (for new admissions) or within two business days of their first signed and dated MDS following the LTCC's LOCD (for current residents). If there is a discrepancy of Medicaid medical/functional eligibility between the LTCC's LOCD and the medical/functional information reported on the MI Choice Program agency's MDS-HC, the agency must contact the LTCC within two business days of their signed and dated MDS-HC.

- If a Medicaid Retrospective Review determines that the LTCC's admission or enrollment decision, or continued stay decision in the case of a current beneficiary, was in error, the provider will not be held liable to Medicaid for repayment of the beneficiary's admission, enrollment or continued stay if the nursing facility provider contacted the LTCC within two business days of the nursing facility's signed and dated 14-day MDS (for new admissions), or within two business days of the nursing facility's signed and dated MDS following the LTCC's LOCD (for current residents), or within two business days of the MI Choice Program agency's signed and dated MDS-HC, to report a discrepancy of Medicaid eligibility between the medical/functional information reported in that MDS, or that MDS-HC, and the LTCC's LOCD. The provider remains responsible for the completion of all MDS and MDS-HC reviews and for assuring that the beneficiary continues to meet the Medicaid medical/functional criteria for a nursing home stay or MI Choice Program participation on an ongoing basis.

Adverse Action Notice and Exception Review

- If the LTCC determines a beneficiary to be ineligible based on their LOCD, or no longer eligible based on any subsequent LOCD, the LTCC must issue an Adverse Action Notice and appeal options to the beneficiary on the date of the adverse action. The language in the LTCC's Adverse Action Notice must inform the ineligible beneficiary of their right to contact the MDCH peer review organization designee to request a Nursing Facility Level of Care Exception Process Immediate Review, as well as their right to a Medicaid fair hearing.

OR

- If the LTCC determines a beneficiary to be ineligible or no longer eligible based on their LOCD, or any subsequent LOCD, the LTCC may contact the MDCH peer review organization designee on the date of the adverse action to request the Nursing Facility Level of Care Exception Review on behalf of the beneficiary. If the MDCH peer review organization designee determines the beneficiary to be ineligible, the MDCH peer review organization designee is responsible for issuing the Adverse Action Notice to the beneficiary. The language in the MDCH peer review organization designee's Adverse Action Notice must inform the ineligible beneficiary of their right to a Medicaid fair hearing.

Telephone Intake Guidelines

- Beginning November 1, 2007, MI Choice Program agents located within any of the four LTCC regions may no longer conduct Michigan Medicaid Nursing Facility Telephone Intake Guidelines (TIG). Contacts made to the MI Choice Program agent are to be referred to that agency's regional LTCC. The LTCC will conduct the TIG within two business days of contact from a consumer. An Adverse Action Notice must be issued to beneficiaries who are determined ineligible based on the TIG. An Adverse Action Notice includes the beneficiary's right to request a Medicaid fair hearing.

Waiting Lists

- Beginning November 1, 2007, MI Choice Program agencies located within any of the four LTCC regions may no longer add beneficiaries or applicants to official "Waiting Lists" as defined in current MI Choice Program policy on the MDCH website at www.michigan.gov/mdch; select Providers >> Information for Medicaid Providers >> Michigan Medicaid Nursing Facility Level of Care Determination.
- On November 1, 2007, MI Choice Program Waiver agencies must forward their waiting lists to the LTCC within their region and must inform beneficiaries and applicants on their waiting lists that their point of contact from November 1, 2007, forward, is the LTCC. Until such time all beneficiaries or applicants on MI Choice Program waiting lists as of November 1, 2007, are enrolled or eliminated, MI Choice Program Waiver agencies will work in collaboration with the LTCC on enrollment or placement of the beneficiaries or applicants on the waiting lists as of November 1, 2007. The MI Choice Program agencies must continue to submit Waiting List Quarterly Summary Reports (form MSA-0812) to MDCH. The LTCC must forward to MDCH a copy of their waiting list in the format requested.

- Beginning November 1, 2007, LTCCs will maintain and be responsible for official waiting lists for all beneficiaries or applicants residing in an area served by the LTCC who are seeking long term care services. LTCCs will prioritize by category (Children's Special Health Care Services, Nursing Facility Transition, Adult Protective Services and Other) beneficiaries and applicants on their official waiting lists according to current LOCD policy on the MDCH website noted above.
- Beginning November 1, 2007, beneficiaries or applicants on MI Choice Program waiting lists that are listed under the category of "Other" will be prioritized for placement over beneficiaries or applicants on LTCC waiting lists that are listed under the category of "Other".
- Beginning November 1, 2007, beneficiaries or applicants on MI Choice Program waiting lists that are listed under the categories of Children's Special Health Care Services (CSHCS), Nursing Facility Transition and Adult Protective Services, and beneficiaries or applicants on LTCC waiting lists that are listed under the categories of CSHCS, Nursing Facility Transition and Adult Protective Services, will be placed by priority chronologically (by the date of request for services).
- When MI Choice Program waiting lists no longer contain names of beneficiaries or applicants awaiting placement, all official waiting lists will fall under the responsibility and maintenance of the LTCCs.

Freedom of Choice Form

- The LTCCs are responsible for obtaining all signatures required on the Freedom of Choice form only for LOCDs that are conducted by the LTCC. Freedom of Choice form signatures that the LTCC is unable to obtain remain the responsibility of the provider. The LTCCs and the providers must maintain a copy of the Freedom of Choice form on file, or in the beneficiary's medical record, for at least three years, even if the beneficiary was determined ineligible via the LOCD.

Continued Policy Requirements

- Providers who are not located within an area served by the LTCC (not within the demonstration project counties or cities) must continue to adhere to MSA policy requirements.
- All Medicaid providers remain responsible for assuring that the resident or participant continue to meet LOCD criteria on an ongoing basis.
- All Medicaid providers remain responsible for continuing to conduct federally required resident assessments (PASARR, MDS, MDS-HC, etc.).

Please direct any comments or questions regarding the **Single Point of Entry/Long Term Care Connection Demonstration Project** to:

Nora Barkey, Project Coordinator
Office of Long Term Care Supports and Services
Phone: (517) 335-9842
Email: MI-LTCC@Michigan.gov

Manual Maintenance

Retain this bulletin until further notice.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved

A handwritten signature in black ink that reads "Paul Reinhart". The signature is written in a cursive style with a large initial "P" and a long, sweeping underline.

Paul Reinhart, Director
Medical Services Administration

Michigan Department of Community Health
Michigan's Long Term Care Connections
Long Term Care Connection (Single Point of Entry) Demonstration Projects
Contact Information

Service and Customer Calls: 1-866 642-4582

Detroit/Wayne Long Term Care Connection 313-567-5822

Serves the Cities of Detroit, Grosse Pointe (GP), GP Farms, GP Park, GP Shores, GP Woods, Hamtramck, Harper Woods, and Highland Park

Address

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1333 Brewery Park Blvd. Suite 160
Detroit, Michigan 48207

Director

Earlene Traylor Neal

Southwest Michigan Long Term Care Connection 269-982-7732

Serves Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren counties

Address

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2900 Lakeview Avenue
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West Michigan Long Term Care Connection 616-956-6627

Serves Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, Osceola and Ottawa counties

Address

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Upper Peninsula Long Term Care Connection 906-786-4701

Serves Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, and Schoolcraft counties

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