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Program Instruction

PI-09-02

TO: Aging Service Access Points (ASAPs)

FR: Ann L.Hartstein, Secretary

DA: December 2, 2009

RE: Retrospective and conversions requests exceeding 90 days and Out of State requests for clinical authorization of MassHealth payment for nursing facility services.

Purpose:

The purpose of this Program Instruction (PI) is to issue procedures for ASAPs when conducting retrospective clinical eligibility assessments for authorization of MassHealth payment for nursing facility services. Any previously issued instructions, regardless of the format, are hereby rendered obsolete and replaced by the requirements in this PI.

Background:

As a temporary measure to gather information, ASAPs were previously instructed to forward conversion assessment requests exceeding 90 days to the Executive Office of Elder Affairs (EOEA) for review and processing. This will no longer be the case.

Actions:

The ASAPs will process these assessments for authorization of MassHealth payment for nursing facility services and open these cases under the Comprehensive Service and Screening Model (CSSM) when appropriate.

The ASAPs will review and process the following retrospective assessment referrals.

1. A Retrospective Screen is an assessment that is completed post-admission for clinical authorization of nursing facility services when the expected payer source is MassHealth from date of admission. It is primarily completed when the required pre-admission clinical assessment for a MassHealth admission was not completed.
2. A Conversion Screen exceeding 90 days is an assessment that is completed post admission to a nursing facility for clinical authorization of nursing facility services when the MassHealth member/applicant is converting to MassHealth from another payer source, and the length of time between the date of conversion and the date of referral to the ASAP exceeds 90 days.
3. A Short Term Review (STR) exceeding 90 days is an assessment that is completed post admission to a nursing facility for clinical authorization of nursing facility services when the MassHealth member has received one or more previous short term approvals and the length of time exceeds 90 days from the expiration of the short term approval.

MassHealth conversion applicants are excluded from this process. Any assessment that takes place for a MassHealth applicant during the MassHealth application process should be treated as a conversion screen and coded as such in SIMS.

Process

The nursing facility should refer the MassHealth member/applicant to their local ASAP prior the conversion or the STR date. The nursing facility must indicate the date or dates of services the facility is seeking MassHealth payment. The clinical assessment must be conducted during the nurse's visit to the nursing facility and coincide with an onsite face to face visit and review of the clinical record. The ASAP must validate and verify the MassHealth application date.

The ASAP RN must complete the CDS-2-NF and Nursing Module. For those cases where the member continues to reside in the nursing facility, a case must be opened to CSSM unless the member meets the criteria necessary for an initial nursing facility approval (formerly long-term approval) per PI-07-18.

The ASAP RN reviews all clinical documentation for which the nursing facility is seeking payment. In those instances where there is a change of status within that timeframe, the ASAP must issue two determinations. For example, the member may have been clinically eligible for the first 30 days of the NF stay, but was no longer clinically eligible. The ASAP RN would issue a STA for the first 30 days, and a denial beginning on day 31. Appeal rights must accompany each determination.

In those cases where the MassHealth member/applicant no longer resides in the nursing facility the clinical record is reviewed at the nursing facility and must be done in conjunction with the routine CSSM weekly visit.

The CDS-2-NF and Nursing Module Sections 6,7,8,9, a Narrative and a Journal entry are required. The narrative/journal entry must state that the individual was discharge or deceased at the time of the assessment.

Out of State Referrals

In cases where a MassHealth applicant resides outside of Massachusetts but is seeking to reside permanently in Massachusetts, a pre-admission onsite review is not possible. Applicants residing out-of-state are not exempt from the required pre-admission clinical authorization for MassHealth payment of nursing facility services. The ASAP must provide the applicant/family with an Request For Services (RFS) form, Physician's Summary Form (PSF), and an MDS-HC to be completed by a registered nurse (RN). The ASAP may accept a nursing facility MDS 2.0 and the current MDS Quarterly completed by an RN in a nursing facility as long as it is not more than 90 days old and reflects the current status of the consumer. The nursing facility must submit the current physician orders, nurses daily notes, nurses monthly summary, medication sheets, ADL flowsheets, treatment sheets and any other documentation that the ASAP may request. The ASAP, based on the documentation submitted and in the absence of a face to face assessment of the applicant, must issue a 30-day short term approval when clinical eligibility criteria is met. If the applicant is unable to provide the ASAP with the necessary documents, arrangements must be made for the consumer to be assessed in the community prior to admission to a nursing facility. All data must be entered into the CDS-2-RN assessment and Nursing Module..

For subsequent short-term reviews, the ASAP must complete the CDS-2-NF and Nursing Module. The member must be enrolled in CSSM when a community setting is appropriate..

Effective Date

The PI is effective December 15, 2009

Contact:

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