

Level of care required for long-term care payment

Summary of change: Effective June 1, 2017, reimbursement for long-term care (LTC) services (institutional, home- and community-based services, Money Follows the Person, and Programs of All-inclusive Care for the Elderly) will be limited to members with a valid level of care (LOC). Members with an LOC on file have been determined to meet all requirements for LTC reimbursement. LTC services provided for members who have not been authorized through an LOC will not be reimbursed.

For nursing facilities: To review the *Pre-Admission Screening and Resident Review (PASRR)/Client Assessment, Referral and Evaluation (CARE) Level I Procedure for Nursing Facilities*, reference the CARE information page on the Kansas Department for Aging and Disability Services (KDADS) website. The procedure addresses:

- Less than 30-day admissions.
- Emergency admissions.
- Out-of-state admissions.
- Terminal diagnosis admissions.

If the appropriate procedure is not followed by the nursing facility, a lack of proper coding of the PASRR/CARE Level I will result in the delay of reimbursement, denial of reimbursement or recoupment of previous reimbursement.

Nursing facilities can verify that a member is coded properly through Kansas Medical Assistance Program (KMAP) by ensuring the LOC description is coded as **nursing facility** in KMAP. Members will be coded **nursing facility** after either of the following has occurred:

- A nursing facility has followed the PASRR/CARE Level I Procedure (see above). The Aging and Disability Resource Center has entered the completed CARE Level I information.
- The hospital assessor has submitted CARE Level I information to KDADS for data entry. The nursing facility has notified the Kansas Department of Health and Environment (KDHE) via *Form 2126* of admission into the nursing facility. KDHE has requested/received CARE information from KDADS.

If nursing facilities have questions regarding the status of an LOC description within KMAP, they may contact KMAP Customer Service at 1-800-933-6593. If there are questions specific to the CARE Level I Procedure, they may email KDADS.CARE@ks.gov.

Further information regarding access to resident information on KMAP is available on the KMAP website. Further information and training on the PASRR/CARE process is available on the CARE information page of the KDADS website.

What is the impact of this change?

Reimbursement for LTC services will be limited to members with a valid LOC for that service. System configuration is tentatively scheduled for completion in August 2017. Once complete, claims will process according to this policy at first pass. In the interim, claims may continue to pay outside of this policy, and Amerigroup Kansas, Inc. will follow the recovery process.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.