



Medica Service Authorization Process: Nursing Facility Services for Special Needs BasicCare (SNBC)

Check MN-Its to determine Medicaid/Medical Assistance (MA) eligibility and managed care enrollment. SNBC program plans may be responsible for up to 100 days of nursing facility days for enrollees. Contact the MCO to determine MCO liability for recipient.

SNBC recipients, aged 65 or over, intending to receive services in the community with an Elderly Waiver must disenroll from the SNBC program prior to the waiver effective date.

Note: Nursing Facility (NF) Services are not paid by MCOs under the Prepaid Medical Assistance Program (PMAP) Families and Children (F&C) Contract.

Service Authorization Process: (SNBC)			
Admission	In Community With or Without State Plan Home Care	In Community With CAC, CADI, BI	In Community With DD
Contact for PAS/Telephone Screening?	<i>DHS bulletin # 14-25-11</i> PAS referrals must be made online at www.mnaging.org Senior LinkAge Line will retrieve the referral information and forward to the MCO responsible for determination of need LOC and OBRA Level 1	<i>DHS bulletin # 14-25-11</i> All PAS referrals must be made online at www.mnaging.org Senior LinkAge Line will retrieve the referral information and forward to the MCO and the CFR responsible for determination of need LOC and OBRA Level 1	<i>DHS bulletin # 14-25-11</i> All PAS referrals must be made online at www.mnaging.org Senior LinkAge Line will retrieve the referral information and forward to the MCO and CFR. DHS approval required. The lead agency must obtain approval on the DD Screening Document Full Team Screening through MMIS.
Does the NF need to be in the MCO network?	No	No	No
Where to call to determine MCO liability?	Medica Provider Service Center 1-800-458-5512	Medica Provider Service Center 1-800-458-5512	Medica Provider Service Center 1-800-458-5512
Is Service Prior Authorization required for qualified SNF Medicare stay? Integrated product, see Appendix A	N/A	N/A	N/A



updated: 6/1/16

Service Authorization Process: (SNBC)			
Admission	In Community With or Without State Plan Home Care	In Community With CAC, CADI, BI	In Community With DD
Is Service Prior Authorization required for qualified SNF Medicare stay? Non-integrated product, see Appendix A	No prior authorization required, but notification upon nursing home admission is required. Nursing Facility Communication Form	No prior authorization required, but notification upon nursing home admission is required. Nursing Facility Communication Form	No prior authorization required, but notification upon nursing home admission is required. Nursing Facility Communication Form
Is Service Prior Authorization required for qualified Medicaid stay?	No prior authorization required, but notification upon nursing home admission is required. Nursing Facility Communication Form	No prior authorization required, but notification upon nursing home admission is required. Nursing Facility Communication Form	No prior authorization required, but notification upon nursing home admission is required. Nursing Facility Communication Form
Face to face screening timeline?	Call COL adult intake	Call COL adult intake	Call COL adult intake
Who does OBRA Level II for MI?	DHS bulletin # 13-53-01 COL	DHS bulletin # 13-53-01 COL	DHS bulletin # 13-53-01 COL
Who does OBRA Level II for DD?	CFR	CFR	CFR
Where to bill for Medicare covered days or appeal Medicare decision? Integrated product, see attached list.	N/A	N/A	N/A



Service Authorization Process: (SNBC)			
Admission	In Community With or Without State Plan Home Care	In Community With CAC, CADI, BI	In Community With DD
Where to bill for Original Medicare covered days or appeal Original Medicare decision? Non-integrated, see attached list.	Medicare	Medicare	Medicare
What is impact on waiver service agreement?	N/A	CFR case manager will close service line item agreement upon admission	CFR case manager will close service agreement upon admission
When does waiver program end?	N/A	CFR case manager will enter exit screening document after 30 days	CFR case manager will enter exit DD screening document upon admission?
Enrollee under 21 years	Admission must be approved by DHS by calling 651-431-2441	Admission must be approved by DHS by calling 651-431-2441	Admission must be approved by DHS by calling 651-431-2441
Uncompensated transfer penalty	LTC not covered by MCO, individual pays. MCO pays state plan services including HHA services. Call care coordinator for transition services.	N/A	N/A
Nursing Facility LOC not met	See below under discharge for state plan transition services or Essential Community Supports (ECS)	See below under discharge for state plan transition services or Essential Community Supports (ECS)	Person will return to DD waiver services if the person still meets DD waiver eligibility criteria.

Service Authorization Process: (SNBC)			
Admission	In Community With or Without State Plan Home Care	In Community With CAC, CADI, BI	In Community With DD
Discharge	In Community With or without state plan home care	In community With CAC, CADI, BI	In community With DD
Where to get Relocation Services?	CFR	CFR	CFR
Who does waiver assessment?	COR prior to MnChoices COL after MnChoices CFR determines who gets waiver slot and does case management.	COR prior to MnChoices COL after MnChoices CFR determines who gets waiver slot and does case management.	CFR does waiver assessment, determines who gets waiver slot and does case management.
Who does PCA assessment?	COR	COR	COR
Who does Home Health service, such as SNV, HHA?	MCO in network providers. MCO/Care Coordinator must approve	MCO in network providers. MCO/Care Coordinator must approve	MCO in network providers. MCO/Care Coordinator must approve
Who does HCN assessment?	DHS contracted entity approves and FFS pays	DHS contracted entity approves and FFS pays	DHS contracted entity approves and FFS pays
Moving HomeMN Available after 90 days	DHS determines program eligibility CFR processes	DHS determines program eligibility CFR processes	DHS determines program eligibility CFR processes



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Appendix A

	Medicaid Only Coverage	Medicaid and Medicare Integrated
Medica Health Plan	AccessAbility Solutions	
Metropolitan Health Plan	CornerStone Solutions Medicaid	CornerStone Solutions Medicare
PrimeWest Health Care	Special Needs BasisCare	Prime Health Complete
South Country Health Alliance	Single Care Shared Care – person is receiving Original Medicare benefits	AbilityCare
UCare Minnesota	UCare Connect	

Appendix B

Defintions

BI	Brain Injury Waiver – a Medical Assistance program for people with a traumatic, acquired or degenerative brain injury who require the level of care provided in a nursing facility that provides specialized services for persons with brain injury, or who require the level of care provided in a neurobehavioral hospital.
CAC	Community Alternative Care Waiver – a Medical Assistance program for chronically ill and medically fragile people who require the level of care provided in a hospital.
CADI	Community Alternatives for Disabled Individuals Waiver – a Medical Assistance program for people with disabilities who require the level of care provided in a nursing facility.
CFR	County of Financial Responsibility: The county responsible for payment of a person’s social services
COL	County of Location: The county where the person served is located
COR	County of Residence: The county where the person served is currently living
DD	Developmental Disability Waiver – a Medical Assistance program for persons with developmental disabilities or a related condition who require the level of care provided in an Intermediate Care Facility for Persons with Developmental Disabilities (ICF/DD).
DHS	Minnesota Department of Human Services
ECS	Essential Community Supports
EW	Elderly Waiver for people over the age of 65 years who require the level of care provided in a nursing facility and choose to reside in the community
HCN	Home Care Nursing, formerly know as Private Duty Nursing (PDN)
HHA Services	Home Health Agency Services include the following home care services: skilled nurse visit (SNV), home health aide (HHA), physical therapy (PT), speech therapy (SP), occupational therapy (OT), respiratory therapy (RT).
Home Care Services	Includes all home health agency services plus Home Care Nursing (HCN) and Personal Care Assistance (PCA) services.
LOC	Level of Care: Care and services associated with a particular facility type.
LTC	Long Term Care
MCO	Managed Care Organization
MHM	Moving Home Minnesota
NF	Nursing Facility



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OBRA

Omnibus Budget Reconciliation Act (OBRA) 1987: Federal law that mandates the screening and review of all persons with a diagnosis or suspected diagnosis of developmental disability who seek admission to a nursing facility regardless of the source of payment for the NF services

PAS

Preadmission Screening

PASRR

Preadmission Screening for person with mental illness

PCA

Personal Care Assistance: services to help a person with day-to-day activities in their home and community.

PDN

Private Duty Nursing, currently known as Home Care Nursing (HCN)

SNBC

Special Needs BasicCare