Community and Facility Services

Nursing Homes, Optional State Supplementation, Home Health, Hospice and Home Again

An overview of programs and services

Community & Facility Services

- Home Health
- Hospice
- OSS or OSCAP Provider Termination
- OSCAP Resident Determination
- Nursing Facility Level of Care
- Home Again

What is Home Health?

- Home Health is a skilled short term service that must be ordered by a physician and rendered by a Home Health agency (RN, LPN, licensed PT, OT, ST)

- Home Health services include: Skilled nursing care, physical therapy, speech therapy, occupational therapy, home health aide and covers medical supplies

SOUTH CAROLINA Healthy Connections MEDICAID

What is Home Health?

- Home Health visits are limited 50 visits per year per beneficiary. If more are medically necessary, then prior approval must be obtained from KePRO

- Home Health PA requests must include the KePRO request form, executive summary describing the medical necessity and supporting medical documentation i.e. plan of care and clinical service notes

SOUTH CAROLINA Healthy Connections MEDICAID

What is Home Health?

- PA requests must be received by KePRO prior to the service being provided and can only be submitted by the Home Health agency
- PA requests are for a 60 day plan of care period. Requests for extended service beyond the initial authorization period must be submitted prior to the last authorized day in the certification period.
- Discharges from Home Health occurs when the treatment goals on the Plan of Care have been met

SOUTH CAROLINA Healthy Connections MEDICAID

What are Incontinence Supplies?

- Incontinence Supplies are covered under State Plan Home Health benefit for:
  - Medicaid beneficiary age 4 or above
  - Has inability to control bowel or bladder function
  - Physician certifies beneficiary is incontinent using Form 168IS
  - Incontinence assessment completed by SCDHHS nurse to determine frequency of incontinence and supplies needed

SOUTH CAROLINA Healthy Connections MEDICAID

What are Incontinence Supplies?

- Adults (age 21 and older) frequency of incontinence:
  - Occasionally incontinent – one case per quarter
  - Frequently incontinent – two cases per quarter
  - Total incontinent – one case per month
- State Plan maximum limit for adults:
  - One case of diapers or briefs
  - One case of incontinence pads/bed liners
  - One case of underpads
  - One box of wipes

SOUTH CAROLINA Healthy Connections MEDICAID

What are Incontinence Supplies?

- Children (age 4 to 20) can exceed the state plan limits per EPSDT if medically necessary
- Discharges from receiving Incontinence Supplies can occur if the physician certification has not been updated, voluntary termination or provider is unable to deliver supplies
- SCDHHS nurses review cases of supply increases and conduct a reassessment if necessary

SOUTH CAROLINA
Healthy Connections
MEDICAID

What is Hospice?

- Hospice services are for beneficiaries who are terminally ill with a life expectancy of 6 months or less as certified by a physician. Hospice services must be elected and a plan of care established
- Hospice services must be prior approved by KePRO for Medicaid only beneficiaries
- KePRO prior authorization is not required for Dually eligible beneficiaries upon election of hospice however the forms for election, revocation and/or discharge are still required

SOUTH CAROLINA
Healthy Connections
MEDICAID

What is Hospice?

- Hospice services include:
  - Nursing care
  - Medical social services
  - Physician services
  - Counseling services
  - Short term inpatient care
  - Medical appliances and supplies
  - Home Health aide services
  - Homemaker services
  - Physical therapy, occupational therapy, speech therapy

SOUTH CAROLINA Healthy Connections MEDICAID

What is Hospice?

- Hospice can discharge a beneficiary for the following reasons:
  - Beneficiary dies
  - Beneficiary is noncompliant
  - Prognosis is greater than six months
  - Beneficiary moves out of the hospice's geographically defined service area
  - Safety of the beneficiary or hospice staff is compromised

- Hospice must submit a Medicaid Hospice Discharge Statement (SCDHHS Form 154) within 5 working days of the discharge

SOUTH CAROLINA Healthy Connections MEDICAID

Home Health and Hospice Contact Information

Program Manager

- Tiffany Brown, MHA
  - 803-898-2724
- Brownt@scdhhs.gov

IS Nurse

- Murray Goode, RN
- 864-953-9957
- Murray.goode@scdhhs.gov

Hospice Coordinator

- Andrew Lowder, LMSW
  - 803-898-2691
- Andrew.lowder@scdhhs.gov

IS Coordinator

- Danita Goodman, MA
- 864-942-3307
- Goodmand@scdhhs.gov

What is Optional State Supplementation (OSS)?

- OSS is an entitlement program that is a state supplement to a person's Security Income (SSI/SSA). SCDHHS pays the difference between the OSS rate and the Social Security payment.

- The purpose of this program is to provide reimbursement to enrolled Community Residential Care Facilities (CRCFs; also known as Assisted Living Facilities) who provide room and board and a degree of personal care for eligible consumers. OSS is NOT a Medicaid program; it is funded at 100% state funding.

SOUTH CAROLINA
Healthy Connections
MEDICAID

Who is OSS Eligible?

- Be 65 years or older; or 18 years of age or older and blind or disabled
- Be a U.S. citizen or qualified noncitizen
- Have a Social Security number or file for one
- File for any other benefits to which they may be entitled
- Meet net income limit of $1,416
- Can't exceed resource limit of $2,000 for an individual

QUICK FACTS

Number of Consumers 3,362 (OSS & OSCAP)

54% Female & 46% Male

CRCF Medicaid enrolled facilities: 303

Consumer Payment Source :

SSA: 43%

SSI: 59% ($733)

Average yearly cost = $16,992 annual (single occupancy)

What is Optional Supplemental Care for Assisted Living Participants (OSCAP)?

The OSCAP service provides additional reimbursement to facilities to provide assistance with personal care for OSS residents who meet the medical criteria required for participation.

OSCAP gives additional reimbursement of $207 per month for each qualified resident.

SOUTH CAROLINA Healthy Connections MEDICAID

Medical Necessity Criteria

- Two functional dependencies
- A resident receives at least limited assistance with two or more ADLs.

- A cognitive and a functional dependency
- A resident requires at least limited assistance with one or more ADL in additions to a cognitive impairment.

OSCAP Termination or Medically Ineligible

- A SCDHHS nurse will visits CRCF facilities to assess referred OSS participants for OSCAP.
- SCDHHS nurse reviews and enters information in Phoenix for the level of care determination:
  - Copy MAR/Physicians Orders
  - Individual Care Plan
  - Resident's chart
  - Recent height, weight, and vital signs
  - Interview with direct care staff
  - Interview resident
- Termination occurs when the resident doesn't meet medical necessity criteria.

OSS Contact Information

Program Manager

- Alexis Martin, MBA, CPM
- 803-898-1060
- martina@scdhhs.gov

Program Coordinator II

- Terrell McMorris, MSW
- 803-898-1810
- Terrell.McMorris@scdhhs.gov

Quality Assurance Manager

- Candice L. Smith-Byrd
- 803-898-1060
- **smithbc@scdhhs.gov**

What is Nursing Facility?

- A nursing facility is a health-related facility which provides 24 hour care by licensed/certified staff.
  - Staff can include: social services, RNs, LPNs, CNAs, Physical and Occupational Therapist, medical directors
- NFs must be licensed by the SC Department of Health and Environmental Control (SCDHEC).
- NFs must also meet survey and certification requirements for participation in Medicare and Medicaid; SCDHEC is the State Survey Agency.

SOUTH CAROLINA Healthy Connections MEDICAID

What is Nursing Facility?

- Nursing Facility Services include:
  - Basic services and items furnished in a nursing facility that are inclusive in the Medicaid nursing facility per diem rate
    - Nursing Services
    - Special Services
    - Personal Services
    - Room and Board
    - Safety and treatment equipment
    - Medications
    - Medical supplies and oxygen

SOUTH CAROLINA Healthy Connections MEDICAID

Eligibility for Medicaid Nursing Facility Care

- Must meet skilled or intermediate level of care
- Must meet financial eligibility criteria
- Must have a PASRR (Preadmission Screening and Resident Review)

SOUTH CAROLINA Healthy Connections MEDICAID

Nursing Facility Resident Profile in SC

- Widowed/divorced, female
- Most recently hospitalized
- Has memory loss (dementia), cognitive impairment and/or mental disorder
- Requires assistance with at least 3.75 ADLs
- Takes about 6.7 prescribed medications; and
- Has 3 to 5 medical diagnoses

Recurring Income

- If the resident meets the Medicaid eligibility requirements, then the second step will determine the amount of available income the resident must contribute toward the cost of care.
- The resident's monthly recurring income amount is determined by SCDHHS
- Each facility has a different rate
  - Current average daily rate is $169.01
  - Current average recurring income per resident is $30.26

Complex Care

- The Complex Care Program is a patient assessment system that targets Medicaid eligible hospital patients who no longer require hospitalization , but meet the nursing facility level of care.
- The goal of the program was to assist hospitals find nursing facility placement for individuals who required more care due to their complex medical needs.

SOUTH CAROLINA Healthy Connections MEDICAID

Complex Care

- The nursing facility receives an enhanced daily rate for the Complex care individual
- The Complex Care daily rate is $450
- The Complex care rate helps to pay for :
    - Staff time (both skilled professionals and nurse aides
    - Supplies and specialized equipment
    - Staff education

SOUTH CAROLINA Healthy Connections MEDICAID

Complex Care Medical Needs

- Wound/decubitus care- (must be Stage IV)
- Tracheostomy Tube/Cannula
- Oral Suctioning
- Extended duration of parenteral fluids
- Disruptive behavior(s)

  (at least 60% of time)
- Diagnosis of HIV (RX costs and IV meds)
- Medicaid only who require goal directed therapies (OT, PT, ST)
- Dialysis
- Ventilator dependent (on life sustaining ventilator, six or more hours a day)
- Total care as defined by skilled long term care criteria
- Morbid Obesity

Nursing Facility Contact Information

Program Manager

- Ronica Tolliver, MA, CPM
  - 803-898-7216
  - mccrayr@scdhhs.gov

Program Coordinator II

- Rhondalyn Pelzer, MA
  - 803-898-2715
  - pelzer@scdhhs.gov

What is Home Again?

- National program is “Money Follows the Person”
- The Home Again program is designed to transition people who have been in a skilled nursing facility for at least 90 days and wish to return to the community.
- Our goals are to optimize the participant’s life choices and rights, to minimize threats to the participant’s safety and health, and to provide a mechanism for managing access to home- and community based alternatives to institutional care.

SOUTH CAROLINA Healthy Connections MEDICAID

What is Home Again?

Home Again Services include:

- Transition Coordination Service
- Expanded Goods and Services
  - Furniture
  - Appliances
  - Initial Groceries
  - Security Deposits
  - Utility Deposits
  - Household items
  - Other non-covered items
- CLTC waiver service cost up to 365 days

SOUTH CAROLINA Healthy Connections MEDICAID

Program Eligibility

To be eligible for the program, a person must:

- ❑ Currently reside in a skilled nursing facility
- ❑ Have been in the skilled nursing facility for at least ***90 consecutive days****
- ❑ Be on South Carolina Medicaid payment for at least one day before transitioning
- ❑ Meet skilled nursing facility Level of Care

* A person ***cannot*** count Skilled Rehabilitation Services via their Medicare Part A benefit as part of the 90 day requirement. The person ***can*** count hospital stays as part of the 90 days but the person needs to be admitted into the nursing facility at the time of transition (for at least one day).

SOUTH CAROLINA Healthy Connections MEDICAID

Referral Process

1. Complete a Referral Form at https://phoenix.scdhhs.gov/cltc_referrals/new
2. Home Again staff will contact the nursing facility to get more information and send Eligibility Package
3. The Nursing Facility will complete the package and fax it to Home Again at 803-255-8209
4. A nurse consultant from the nearest area office will come out to conduct Level of Care

SOUTH CAROLINA Healthy Connections MEDICAID

Home Again Contact Information

Homeagain@scdhhs.gov

Questions

Healthy Connections