

# Action Request Transmittal Aging and People with Disabilities



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**Number:** APD-AR-21-056

**Issue date:** 9/24/2021

**Topic:** Long Term Care

**Due date:**

**Subject:** Statewide LTSS/SPPC Transfer Process

**Applies to (check all that apply):**

- |  |   |
|--|---|
| <input type="checkbox"/> All DHS employees                             | <input type="checkbox"/> County Mental Health Directors                       |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B     | <input type="checkbox"/> Health Services                                      |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs                     | <input type="checkbox"/> ODDS Children's Intensive In Home Services           |
| <input type="checkbox"/> County DD program managers                    | <input type="checkbox"/> Stabilization and Crisis Unit (SACU)                 |
| <input type="checkbox"/> Support Service Brokerage Directors           | <input type="checkbox"/> Other ( <i>please specify</i> ):                     |
| <input type="checkbox"/> ODDS Children's Residential Services          |   |
| <input type="checkbox"/> Child Welfare Programs                        |   |

**Action required:**

**Effective October 1, 2021 all APD and Type B AAA offices will follow the attached Statewide Case Transfer process.** The document will be available on CM Staff Tools.

**Reason for action:**

A consistent and efficient case transfer process is essential to avoid delays in benefits and services to the consumer and avoid unnecessary workload issues for the receiving branch office.

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:** APD transmittal review group, DM/PMs

*If you have any questions about this action request, contact:*

Contact(s): APD.MedicaidPolicy@dhsosha.state.or.us

Phone:

Fax:

# Statewide Process for Transfers of APD/AAA Service Consumers

The process is to be followed by all APD/AAA offices within the state.

The process was developed and reviewed by local managers to define a uniform, efficient approach for transferring an Oregonian's Long-Term Services and Supports (LTSS) and State Plan Personal Care (SPPC) cases between APD/AAA offices.

## **FOUNDATIONAL AGREEMENTS**

- 1) **Timing** Before the 15<sup>th</sup> of the month no case transfers should be made if there is an assessment due in the current month. After the 15<sup>th</sup> of the month, no transfers should be made if the assessment is due the following month. If the Oregonian has already moved, a request for courtesy assessment should be done as soon as possible.
- 2) **Pending** No transfers should be made with any pending case management tasks.
- 3) **Diversion/Transition** Any case being transferred that has D/T involved must be staffed between the sending and receiving branch prior to transfer.
- 4) **Required Contacts** All contacts, including risk, should be completed for the month, prior to transfer.
- 5) **New Plan** The new service plan for the new setting or new Home Care Worker(s)/Agency should be set up prior to transferring. 512s for facilities should be set up.
- 6) **Temporary Placements** Transfers will not be made for any temporary placements when the person's intent is to return to the county holding the case. (e.g. Oregonian placed in Nursing Home out of area temporarily will be kept by the county holding the case when they *intend* to return to that county.)
- 7) **Documentation** All applicable Case Management related documents have been uploaded to EDMS prior to transfer.
- 8) **Internal Check** Sending branch will review case utilizing their internal process prior to transferring.

## **GENERAL CONSIDERATIONS**

- 1) The template provided is to be used in case narration and transfer email.
- 2) A secure email to the receiving branch's transfer email box is required. SUBJECT LINE: **LTSS TRANSFER** or **SPPC TRANSFER**
- 3) If two-consumer household, **both** cases should be transferred in one email.
- 4) Sending Case Manager will assure that the eligibility workers in their local office have updated the new address and Living Arrangement in ONE.
- 5) Sending Case Manager will assure that medical payments in ONE are set up correctly, if applicable.
- 6) In-Home cases, the sending Case Manager will follow the **PTC 1.3.3** *Process for Staff: Consumer Transfers to a New Branch.*

**The following template should be used for transfer email and also be narrated in Oregon Access.**

## **OUTGOING CASE**

Name:

Prime:

Sending Case Manager:

Sending Branch:

Receiving Branch:

Additional Case Info: (relevant to the specific consumer's situation)

Language preference:

Service setting: In-Home, CBF, NFC

Facility Name:

Direct/Indirect contact made:

All relative docs in EDMS or ONE: (e.g. Exceptions, SPAN, ICP)

CA/PS due date:

Extended Waiver Eligibility:

Modified Service Plan:

Service Liability Calculation:

Special Needs Payment:

Home Delivered Meals:

Emergency Response System:

Adult Day Services:

K-Plan Ancillary Services:

LTCCRN:

BSS:

**Information to be included in EMAIL only:**

**Important information for the Receiving CM, which may include APS, Serious Incident, Exceptions, Exception monitoring, ongoing Special Needs Payments, risk identified (please note if immediate mitigation is needed).**