

Information Memorandum Transmittal Aging and People with Disabilities



Sandee Yoro

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Number: APD-IM-20-108

Issue date: 9/29/2020

Topic: Long Term Care

Due date:

Subject: Long Term Care Community Nursing Services Program

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 checked="" type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input checked="" type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input checked="" 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 | |

Message:

The Long-Term Care Community Nursing (LTCCN) program Prior Authorization (PA) Form 4102 has been updated. The updated 4102, replaces the Reassessment procedure code which is now T1001 (previously 96151).

The revised form 4102 is currently available on the forms server and distributed to all LTCCN contractors to begin using immediately.

If you have any questions about this information, contact:

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