


GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance



Transmittal # 17-18

Office of the Senior Deputy Director/Medicaid Director

TO: DC Medicaid Providers

FROM: Claudia Schlosberg, J.D. 
Senior Deputy Director and State Medicaid Director

DATE: July 28, 2017

SUBJECT: Level of Care Process Changes for Long Term Care Services and Supports

The Department of Health Care Finance (DHCF) is changing its procedures for approving a nursing facility level of care. The Centers for Medicare and Medicaid Services (CMS) requires State Medicaid Agencies to certify that a person meets a nursing facility level of care to reimburse Medicaid-funded nursing facilities and long term care services requiring a nursing facility level of care, such as the Elderly and Persons with Physical Disabilities (EPD) Waiver Program.

Effective July 1, 2017, DHCF is no longer accepting a signed Form 1728 to process admissions to a Medicaid-funded nursing facility or the EPD Waiver Program. A person's nursing facility level of care will be verified by a determination sheet reflecting a score of nine (9) or higher which represents eligibility for nursing facility services or the EPD Waiver program. DHCF's long term care services and supports contractor, the Delmarva Foundation, will issue the determination sheet reflecting a total numerical score by tallying three (3) unique scores obtained by Delmarva's administration of a comprehensive face-to-face assessment tool with the beneficiary seeking services. The three (3) unique scores reflect a person's functional, cognitive/behavioral, and skilled care needs.

A beneficiary or provider must submit a request for nursing facility services to Delmarva by completing a Prescription Order Form (POF) and Level 1 Pre-Admission Screening and Resident Review Form (PASRR). A request for participation in the EPD Waiver Program must be accompanied by a POF. Upon receipt of the required documents, an RN employed by Delmarva will conduct the face-to-face assessment with the beneficiary seeking services and issue the determination sheet approving or denying a nursing facility level of care. The face-to-face assessment will be conducted within five (5) calendar days for all pathways, except for hospital discharges where the timeframe is 48 hours.

For nursing facilities, the level of care determination will continue to remain valid unless: (1) there is a change in condition noted on the annual level of care attestation form which must be completed by the physician, or (2) following a reassessment from the Delmarva Foundation.

For the EPD Waiver Program, the level of care determination will continue to remain valid unless: (1) there is a change in condition noted on the annual level of care attestation form which must be completed by the case manager, or (2) if the person no longer meets a nursing facility level of care following a reassessment from the Delmarva Foundation.

The POF and PASRR can be obtained from DHCF's website. Go to <https://dhcf.dc.gov/page/provider-information-and-forms>.

If you have any questions regarding this transmittal, please contact Ieisha Gray, Director, Long Term Care Administration at 202-442-5818, or email Ieisha.Gray@dc.gov.

cc: Medical Society of the District of Columbia
DC Hospital Association
DC Primary Care Association
DC Health Care Association
DC Home Care Association
DC Behavioral Health Association
DC Coalition of Disability Service Providers