

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance (DHCF)



MEMORANDUM

TO: Home Health Agency, Adult Day Health State Plan Providers and EPD Waiver Providers

FROM: Ieisha Gray, Director, Long Term Care Administration,
Department of Health Care Finance

DATE: September 23, 2016

SUBJECT: Transfer Requests for State Plan Providers and EPD Waiver Providers

DHCF is clarifying the transfer process by notifying State Plan Home Health Agencies, Adult Day Health providers and all EPD Waiver providers (case management providers and EPD Waiver direct care agency providers) about their responsibility when a beneficiary elects to be discharged from and transferred to a new provider agency. The transfer process is also applicable when a beneficiary chooses a new provider from the Freedom of Choice Attestation during the annual re-assessment.

For purposes of the transfer process, the discharging provider is the agency from which the beneficiary is transferring, and the receiving provider is the agency which is receiving the beneficiary, or will be selected by the beneficiary on the “Attestation” form upon reassessment.

Effective October 1, 2016, **all discharging providers** must take the following steps to assist beneficiaries in transferring to a new provider for receipt of services.

In accordance with the new transfer process, **State Plan Home Health Agencies and State Plan Adult Day Health Providers** that are discharging must:

- (1) *Fill out the applicable transfer form, available at <http://dhcf.dc.gov/page/provider-information-and-forms> under “Transfer Request Forms and Defective PA Forms;”*
- (2) *Ensure that all sections of the transfer form are complete;*

- (3) *Ensure that the transfer form is signed by the discharging provider agency, the receiving provider agency, the beneficiary, and where applicable, the Authorized Representative;*
- (4) *Discharging providers must ensure that a Prior Authorization (PA) is in place for the receiving provider agency by attaching the transfer form to DHCFLTCAProvider@dc.gov and identifying the name of the discharging provider and type of request in the email subject line (e.g. Advance Health Care Request for Transfer); and*
- (5) *Discharging providers must document the discharge plan on the transfer form in the “Notes” section and provide a copy to the beneficiary and DHCF at DHCFLTCAProvider@dc.gov when the transfer request notification is submitted.*

When a person chooses to be transferred from a **case management** agency to a new case management agency, all **EPD Waiver discharging case management providers** must:

- (1) *Fill out the applicable transfer form, available at <http://dhcf.dc.gov/page/provider-information-and-forms>; under “Transfer Request Forms and Defective PA Forms;”*
- (2) *Ensure that all sections of the transfer form are complete;*
- (3) *Ensure that the transfer form is signed by the discharging provider agency’s case manager, the receiving provider agency, and the beneficiary, and where applicable, the Authorized Representative;*
- (4) *Case manager from the discharging provider agency must import the completed transfer form and related documents into Casenet and ensure that a PA is in place for the receiving provider agency by attaching a PA request notification to DHCFLTCAProvider@dc.gov and identifying the discharging provider’s name and type of request in the email subject line (e.g. United Health Care Request for Transfer); and*
- (5) *Case manager from the discharging provider agency must update the PCP with the plan for the beneficiary, provide a copy of the transfer form and revised PCP to the beneficiary and/or Authorized Representative as appropriate, and import the transfer form and related documents into Casenet.*

When a person chooses to be transferred from **an EPD Waiver Direct Care Agency provider to another EPD Waiver Direct Care Agency provider**, all EPD Waiver Discharging Direct Care providers must:

- (1) *Fill out the applicable transfer form, available at <http://dhcf.dc.gov/page/provider-information-and-forms>; under “Transfer Request Forms and Defective PA Forms;”*
- (2) *Ensure that all sections of the transfer form are complete;*
- (3) *Ensure that the transfer form is signed by the discharging provider, the receiving provider, the beneficiary, where applicable the Authorized Representative, and the case manager;*
- (4) *Discharging provider must coordinate with the beneficiary’s case manager to ensure that a Prior Authorization (PA) is in place for the receiving provider agency; the transfer document must be submitted to the receiving provider agency for completion of the receiving provider agency information and signature;*
- (5) *The discharging case manager must import the completed transfer form, revised PCP and related documents into Casenet and ensure that a PA is in place for the receiving provider agency by attaching a PA request notification to DHCFLTCAProvider@dc.gov and identifying the discharging direct care agency provider’s name and type of request in the email subject line (e.g. United Health Care Request for Transfer); and*
- (6) *The discharging case manager must document the discharge plan on the transfer form in the “Notes” section and provide a copy to the beneficiary, update the PCP and submit all documents in Casenet to DHCF/LTCA at the time of the transfer request.*

Please Note - A transfer form without all required signatures and fields filled in will be considered incomplete. DHCF will issue a PA for the receiving provider agency within seventy two (72) business hours or three (3) business days of receipt of a complete transfer request form.

Providers must document a discharge plan in the “Notes” section of the discharging provider section of the transfer form during transfers. A discharge plan is a summary that includes steps that will be taken to ensure continuity of care during transfers, and to mitigate the chance of a lapse in services.

It is imperative that providers comply with the aforementioned procedures to ensure access to services and prevent any gaps in receiving needed Long Term Care services.

If you have any questions about this transmittal, please contact Ieisha Gray, Director, Long Term Care Administration (DHCF), 202-442-5818, Ieisha.Gray@dc.gov