

Frequently Asked Questions

Medicaid, PAS, and Financial Eligibility

1. What is the difference between the LTC-2B and LTC-2E?

LTC-2B is a Request for Clinical Assessment to be completed by OCCO Field Assessors. LTC-2E is a NF Clinical Screen which is conducted by NF staff.

- SCNF providers, or billing agents will not have access to conduct a NF Clinical Screen

2. Is the EARC still valid for only one hospital admission?

Yes, the EARC continues to be valid for one hospital admission.

If a consumer is admitted to a NF with a valid EARC Authorization and transfers to another NF prior to the on-site assessment by OCCO, the EARC Authorization is no longer valid.

3. If Medicaid is approved on day 60 but the EARC hasn't been converted to a regular PAS, can the CWA treat it as valid?

If there is a valid EARC upon admission, OCCO will align the clinical eligibility date to the admission date once the consumer is assessed and found to meet NF Level of Care.

If the CWA submits a CP-2 to indicate the consumer has made a financial application, OCCO will conduct the assessment upon receipt of the CP-2.

4. What is the process if Medicaid is not approved financially for over a year from the initial PAS date? Do we need a new LTC-2E?

Yes, a new LTC-2E is required if the consumer is now within 180 days of Medicaid eligibility.

5. When we lose a PAS due to Medicaid renewal termination, should we use the LTC-2E to reinstate the PAS?

It is advised that the NF submit a LTC-2B with request type MCO or Pace Disenrollment in order to avoid a lapse in clinical eligibility. A copy of the prior authorization must be attached.

6. If a private pay patient exceeds 180 days, does the NF screen expire?

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Yes. A new LTC-2E should be submitted within 180 days of eligibility. If the CWA has submitted a CP-2 in the interim and OCCO has conducted an assessment, a new LTC-2E is not required.

Forms, Submissions, and Process Clarifications

11. Do we need to submit both the LTC-2B and LTC-2E for every PAS request?

No, both forms are not required. The need to submit LTC-2B or LTC-2E depends on the specific scenario. The LTC-2B is a Request for Clinical Assessment to be completed by OCCO Field Assessors. The LTC-2E is a NF Clinical Screen which is conducted by NF staff. All criteria and exclusions for each will be covered in the training.

12. Under the new process, are we replacing the LTC-2B with the LTC-2E, or are both required?

No, the LTC-2E will not replace the LTC-2B, both will be available however the LTC-2E will limit the use of the LTC-2B. The LTC-2E does not apply to SCNFs or resident's transferring into a SCNF or other exclusions.

13. Does the LTC-2E need to be completed by a nurse?

No. Any direct NF staff with user access may input the data into the LTC-2E, NF Clinical Screen. Required functional items (Cognition, ADLs) and other MDS items must be obtained directly from a previously completed MDS.

However, no billing agent is permitted to complete/submit the LTC-2E due to the need for options counseling.

14. Will SSNs still be required when submitting the LTC-2E?

The SSN is required to generate the LTC-2 record when submitting the LTC-2A to check for a valid EARC. The SSN detail populates into the LTC-2E from the resident's record to ensure accurate identification, data matching, and Medicaid eligibility tracking.

15. Do referrals from out-of-state hospitals follow the same process with the LTC-2E?

No. Resident's admitted with an authorized Out-of-state will continue to follow the current guidelines for out-of-state admissions; requiring submission of the LTC-2B for an onsite OCCO Assessment.

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16. When a hospital submits an EARC via the portal, how does the NF obtain or retrieve it?

The hospital should be sending the authorized EARC when transferring a resident to your facility. When creating the LTC-2A, the SSN is required to search for a valid EARC. If an EARC is present, the NF user must select the EARC to attach to the NF record. When an EARC is present, the data from the EARC will populate where applicable.

17. Does the CP-2 trigger an onsite evaluation, and

Yes, the CP-2 triggers OCCO to conduct an onsite clinical assessment. OCCO will submit an LTC-2B to inform of the CP-2 referral from the CSSA.

18. Does the EARC or Clinical Screening protect the eligibility date?

If resident admitted with valid EARC, the LTC-2E is not indicted until day 150 through 180, to extend for another 180 days. If no EARC, and LTC-2E submitted within 30-60 days of admission, payment may go back to admission date if all eligibility components are completed. Medicaid payment is contingent on both clinical and financial eligibility.

Portal Access and Training

20. If we're already registered on the existing portal, do we need to re-register for the new portal?

If you're already registered you do not have to re-register for the new portal.

21. If I have an active portal login, do I still need to submit the SF-2 form, or is that only for new users?

No, if you have an active portal login you do not need to submit the SF-2 form. The SF-2 form is for new users, reactivations, and user profile updates.

22. Will Business Office staff at NJ Nursing Centers receive training invites, or only Administrators?

All current or newly registered users will be provided an emailed invitation for the upcoming trainings as the time draws near.

23. Do SCNF facility staff need to attend the upcoming trainings?

Yes. All SCNF user will be required to attend the first LTC2 Portal training to understand changes since the portal has been upgraded and new features added.

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24. Will users be able to check the status of requests in the new portal?

Yes, one of the key features of the new portal is status tracking. Users will be able to monitor the progress of submissions, see if any documentation is missing, and receive updates on approvals or requests for follow-up.

Miscellaneous Questions

25. Are Business Office staff at nursing homes considered Billing Agents?

No. Billing agents are third party vendors who conduct the Medicaid billing for the facility and will not have access to complete the LTC-2E.

26. Are County Medicaid offices responsible for submitting CP-2s for all new applications, regardless of case issues?

Yes, County Medicaid offices are responsible for submitting the CP-2 form to OCCO for all new Medicaid long-term care applications. This form initiates the clinical assessment process required for establishing Medicaid clinical eligibility.

27. What happens if the 180-day period passes and OCCO has not conducted an onsite review? Can the PAS be backdated?

If a prior EARC or LTC-2E is set to expire, at day 150 through 180, the NF must submit the LTC-2E within that time period to extend the prior screening valid through date. Once the resident seeks Medicaid eligibility at the CSSA, a CP-2 will be forwarded to OCCO for an onsite assessment. OCCO will generate an LTC-2B to alert the NF of this occurrence.