

Referrals for Clinical Assessments

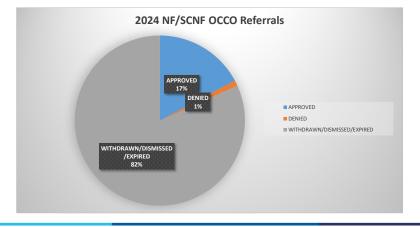
- OCCO receives referrals for clinical assessments from the community and from nursing facilities
- The majority of referrals come from NFs (62,239) vs community (11,677)
- The majority of referrals from NFs are deemed inappropriate
 - · Already have valid assessment on file
 - Already enrolled in MCO or PACE
 - Other (duplicate, expired, discharged, no consent/interested)
 - Denied
- In 2024 alone, out of 62,239 NF referrals only 8,943 were approved

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2024 Completed NF/SCNF OCCO Referral Categories



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Actions Taken to Manage Referrals

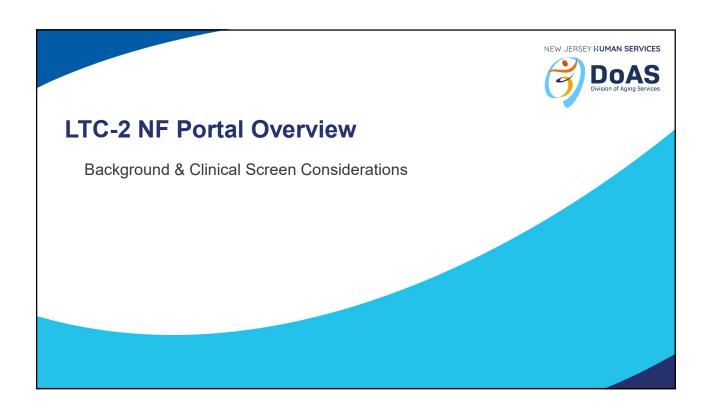
- Automated Medicaid Status upon submission
- Increased state budget to hire additional RNs ✓
- Creation of new NF screening process

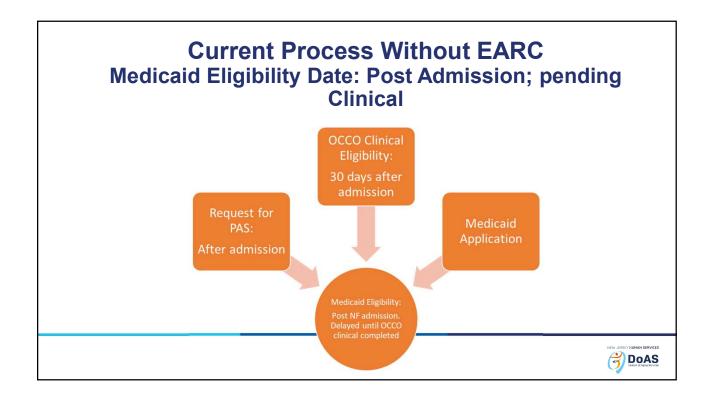
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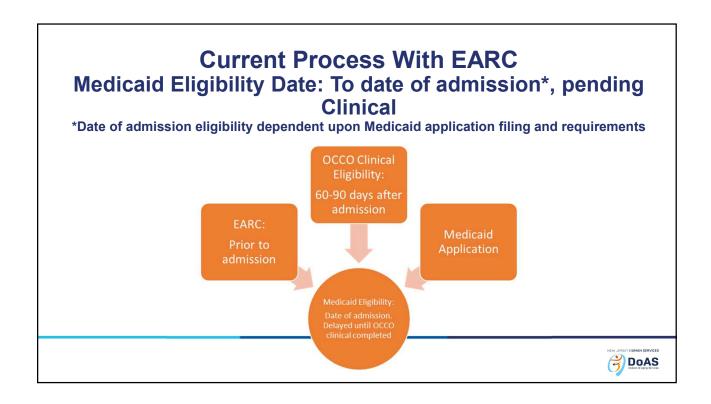
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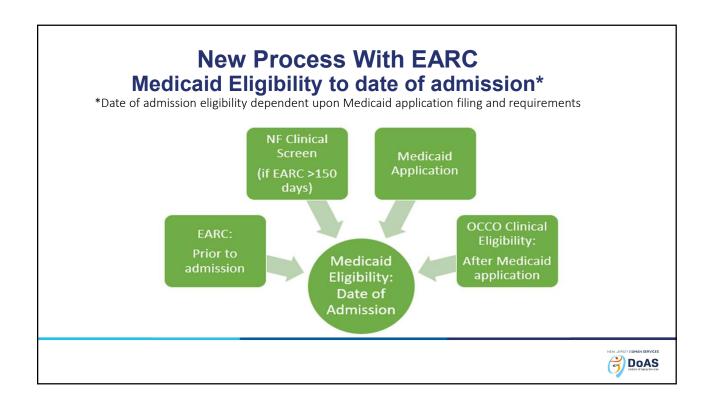
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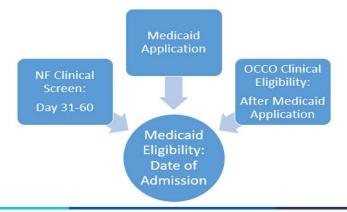






New Process Without EARC Medicaid Eligibility to date of admission*

*Date of admission eligibility dependent upon Medicaid application filing and requirements





LTC-2E, NF Clinical Screen **CRITERIA**

The NF Clinical Screen process is indicated for a NF resident who is residing in a Medicaid Certified Nursing Facility, admitted within the last 30 to 60 days, or had a prior NF Clinical Screen or EARC completed which is set to expire within 30 days, and:

- 1. Has an expectation of billing Medicaid for all or part of their stay, and
- 2. Is not currently enrolled in a Medicaid MCO or PACE program, and
- 3. The provider has submitted the LTC-2A, Notice of Admission via the NF Portal.

NOTE: A resident admitted to the NF who was eligible for MCO enrollment during a hospitalization will be enrolled with a MCO the 1st of the month following hospital discharge and is not eligible for the NF Clinical Screen.

LTC-2E, NF Clinical Screen **OVERVIEW**

- · Required for individuals residing in a Medicaid Certified Nursing Facility (NF) with an expectation of billing NJ Medicaid for all or part of their stay who meets the identified target criteria, and who was not admitted with a valid EARC.
 - · Most recent MDS assessment utilized for Functional Abilities items.
- · Once authorized, serves as a 180-day authorization for continued NF placement from date of admission; contingent upon full clinical and financial eligibility.
- If no EARC upon admission, the LTC-2E must be submitted after 30 days of admission and up through day 60 of admission.
 - Any LTC-2E submitted after day 60 of admission will be valid from the date of submission through 180 davs.
- If valid EARC upon admission, the LTC-2E may be submitted within 30 days of the EARC valid through date (180 days) if Medicaid eligibility not yet established.
 - The NF is encouraged to request an EARC for any new admission from an acute care hospital.
 - NOTE: The LTC-2E is not to be confused with an approved clinical eligibility assessment



LTC-2E, Nursing Facility Clinical Screen **SECTIONS**

1. Request Type	7. Communication/Cognitive Patterns
2. Verification	8. Functional Abilities*
3. Nursing Facility Admission Detail	9. Potential Nursing Facility Level of Care
4. MDS History	10. Participation in (MDS)*
5. Financial Eligibility	11. Assessment and Goal Setting*
6. Medical	12. Attestation

· Refer to BLANK LTC-2E, Nursing Facility Clinical Screen for specific items.

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LTC-2E, NF Clinical Screen **General Considerations**

- Billing Agents are not permitted to complete/submit the LTC-2E due to need for direct access to MDS data and communication with resident/legal representative for purposes of determining financial status for potential Medicaid application and providing counseling on next steps.
- Verification of resident information is required.
- Many items in the NF Clinical Screen are from the MDS 3.0 assessment that is conducted by the NF as required by CMS.
 - · NF users must review the MDS 3.0 and input the values in the NF Clinical Screen where applicable.
 - · For any MDS item in the LTC-2E, the coding values are the same.
- All items are required unless a skip pattern is identified.



LTC-2E, NF Clinical Screen **DETERMINATION**

- Algorithm generated OCCO Determination
 - · Following input of required MDS items, a statement will display to indicate whether resident appears to meet Nursing Facility Level of Care. NF user must continue to complete all remaining fields to ensure submission.
 - · If indicated as "No. Criteria for 3 ADLs is not coded", no onsite OCCO clinical assessment will be conducted until receipt of the CP-2 from the CSSA.
 - OCCO Determination will be identified as "Referral Dismissed" and request is closed.
 - If closed, the NF must conduct discharge planning and provide options counseling.
 - If any change in condition, a new LTC-2E submission is required.
- OCCO SS will review eligibility for NFCS and if appropriate, will input clinical determination into clinical eligibility system.
 - If the referral cannot be processed, the determination will be updated to reflect a dismissal.

LTC-2E, NF Clinical Screen **Processing Considerations**

- Automated algorithm provides immediate outcome to indicate if NF Level of Care appears to be met.
 - This is not a final OCCO Determination, which only occurs following OCCO Support Staff processing.
 - Regardless of determination, no onsite OCCO Clinical Assessment will be scheduled.
- Onsite OCCO assessment will only occur following receipt of CSSA (aka CWA) CP-2 referral.

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NF Provider Considerations

Direct NF Staff Portal Access Hospital EARC Encouraged

Direct NF Staff Portal Access

- NF providers must determine who will be responsible for completing the LTC-2E, NF Clinical Screening.
 - No billing agent is permitted to complete and submit the LTC-2E, NF Clinical Screening.
 - Expected NF user(s) responsible for this submission must be onsite and have access to NF Portal, as well as the CMS MDS assessment system to fully complete the LTC-2E, NF Clinical Screening.
 - An options counseling discussion with the resident, and/or representative contact is expected to determine interest in accessing Medicaid
 - If no current, direct NF staff are registered for portal access, the NF providers are expected to complete the registration process for these users prior to Phase II implementation.
 - Following implementation, the ability for the NF to submit the LTC-2B, Request for Clinical Assessment will be limited.



Requesting Hospital EARC

- Ensure the NF is requesting and receives EARC Screenings completed by any discharging hospital to minimize the need for the NFCS early in the admission process.
 - The EARC serves as 180-day authorization from date of admission if both Medicaid financial and clinical eligibility are fully completed.
 - · The NFCS would therefore only be indicated in these instances if the original EARC is set to expire within 30 days.



Next Steps

- Portal registration for new users
- Schedule training for NF users
- · Finalize go-live date for submissions

Tentative Training Schedule

- Monday, July 28, 2025: Recorded NF Portal Demonstration
 - All new and existing users must view recorded training prior to user training sessions
 - Duration: 1.5 hours
- Wednesday, August 13, 2025 (10:00 AM): NF Portal Phase II Training
 - · Live training session for all new and existing portal users
 - Duration: 1.5 hours
- Wednesday, August 20, 2025 (10:00 AM): LTC-2E, NF Clinical Screen Training
 - Live training session for any new or existing user who will be responsible for conducting the screening process
 - Duration: 1.5 hours

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9

Tentative: Current Portal Shutdown and GO LIVE Date (Phase II)

- Existing Portal Shutdown, *Tuesday, August 26, 2025 (5:00 PM)*
- Phase II Implementation anticipated for September 2, 2025.
 - All new and current users must have attended or viewed recorded trainings and related documents.
 - New portal login detail to be provided to each registered user on the day of implementation.
 - New users must be registered. Submission of SF-2, Portal User Access form required.
 - NOTE: Access link only valid for 24 hours.
 - NF guidance will be provided as the time draws near to discuss any considerations for existing requests due to implementation of the LTC-2E, NF Clinical Screen.

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21



