Smart guide: Transfer guidance for MSHO/MSC+ care coordinators

Updated: 9/26/2024

Contents

Overview

This document will help care coordinators to make sure they enter the needed information in the MnCHOICES application.
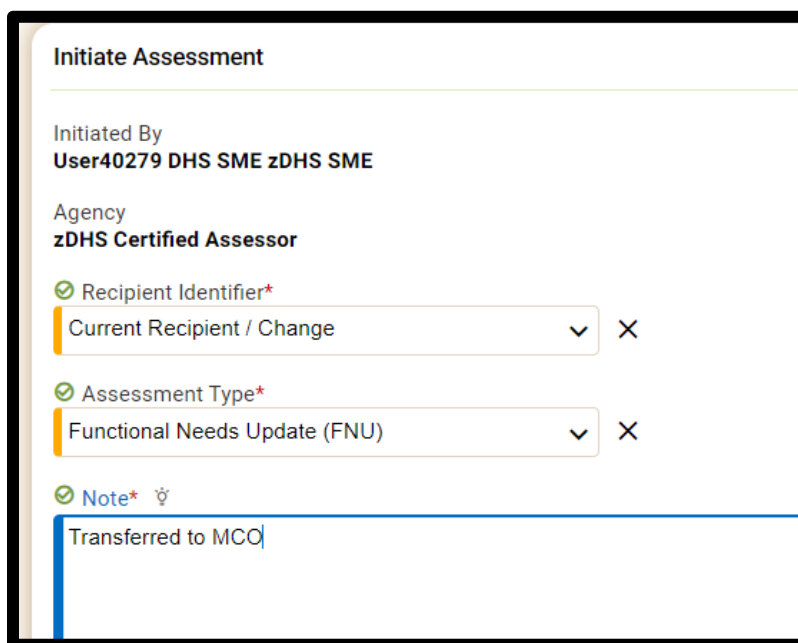
Key terms

- **Care coordinator MSHO/MSC+**: Minnesota Senior Health Options/Minnesota Senior Care Plus care coordinator.
- **Care coordinator SNBC**: Special Needs Basic Care care coordinator.
- **Case manager**: Staff member providing case management for a lead agency.
- **Certified assessor**: Lead agency staff member who completed the training to be a MnCHOICES certified assessor.
- **Disability Waiver Rate System (DWRS)**: Tool that determines individualized payment rates for certain Brain Injury (BI), Community Access for Disability Inclusion (CADI), Community Alternative Care (CAC) and Developmental Disabilities (DD) waiver services.
- **Elderly Waiver Residential Services (EWRS)**: Tool that determines individualized rates for customized living services and adult foster care services for people using an Elderly Waiver (EW).
- **Lead agency**: County, managed care organization (MCO) or tribal nation working in MnCHOICES.
- **Fee-for-service (FFS)**: A county or tribal nation that provides services to a person who is not enrolled in a managed care program.
- **Managed care organization (MCO)**: An organization in the community that DHS contracts with to serve people enrolled in Minnesota Health Care Programs (MHCP).
- **MCO delegate agency**: Organization contracted with an MCO to coordinate care.
- **MICP list**: MnCHOICES interagency contact point list.
- **Rate staff**: Staff members who oversee rates information.
- **Support staff**: Staff members who support the assessment and support plan workflow.
- **Tribal nation**: For purposes of MnCHOICES access, a tribal nation is a sovereign nation that has a contract with the state to provide assessment and/or support planning services.

Scenario 1: FFS EW to MCO EW, support plan created by FFS

A county or tribal nation completed a MnCHOICES assessment without the staying healthy section and a Support plan – MnCHOICES assessment (SP – MnA), and the person was using the EW program. Then they were transferred to an MCO. The MCO must:
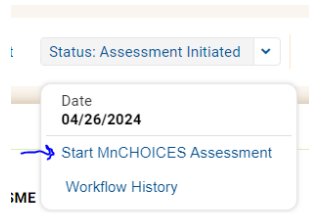
1. Make sure the previous agency has unassigned staff from the person's record.
2. Assign the care coordinator as the certified assessor and MSHO/MSC+ care coordinator.
3. Create a new form. (Assessment should already be in "Plan approved" status. If it is not, contact the previous lead agency.)
   a) **Form category**: Assessment
   b) **Form**: MnCHOICES assessment
   c) **Recipient identifier**: "Current Recipient/Change" (Initiate assessment screen)
   d) **Assessment type**: "Functional needs update (FNU)" (Initiate assessment screen)
   e) **Note**: "Transferred to MCO." (Initiate assessment screen)
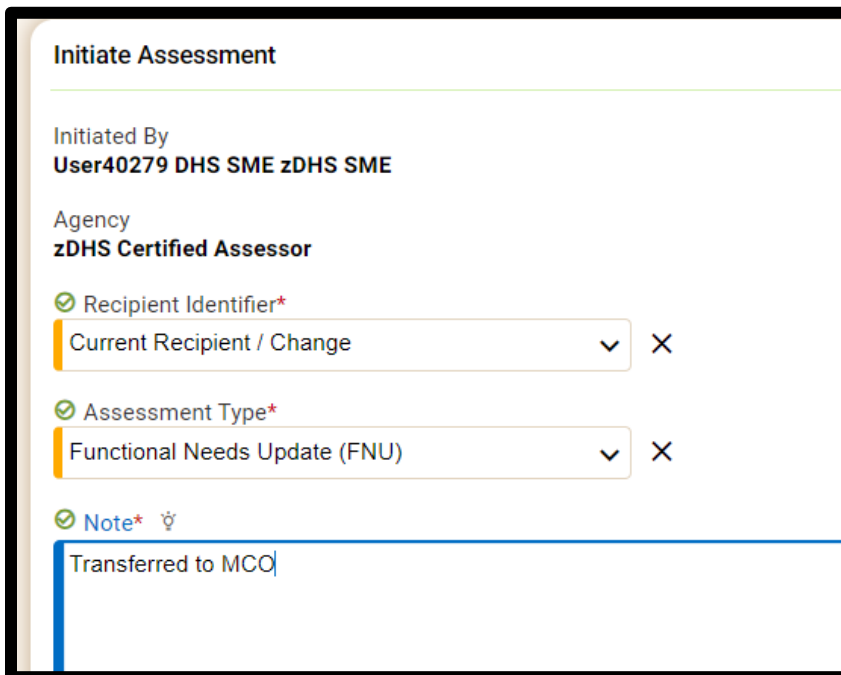
4. Start MnCHOICES Assessment

a) Make sure the Prepaid Medical Assistance Program (PMAP) type is correct.
b) Activity and effective dates are the same date the FNU assessment was conducted. Choose the result date, which is when eligibility-based rules apply. This can be the same as — or within 60 days of — the activity date.
c) Enter the mode by which the interview with the person was conducted. (e.g., in person, virtually, etc.)
d) Assessment interview time includes how long it took to complete the staying healthy section and review the assessment for any changes.
e) **"I am the care coordinator and need the staying healthy section"**: Yes – Staying Healthy only.
f) Review each section of the functional assessment to make sure it is correct.
g) Complete "Staying Healthy."
h) Go to "Assessment Results" and select get results.
i) Complete assessment summary.
j) Enter the LTC Screening Document – AC, BI, CAC, CADI, ECS, EW, MHM, MSC+, MSHO, DHS-3427 (PDF), and enter "05" (Document change only) for activity type and "98" (Other) for assessment results. Exit reasons to update care coordinator information.
k) Create the screening document in the MnCHOICES Assessment application and enter it in MMIS.
(**Note**: "10" is the default for activity type on the LTC Screening Document.)

5. Create a new support plan form with "EW" for program type and "MCO MnCHOICES Assessment" for support plan type.
a) Complete the support plan.
(**Note**: Use the split view toggle to review the previous support plan at the same time.)
b) Collect required signatures.
c) Move plan to "Plan approved" status when done.

6. Send the assessment summary and support plan to the person.

Scenario 2: FFS EW to MCO EW, no support plan created by FFS

A county or tribal nation completed a MnCHOICES assessment without the staying healthy section, but a support plan was not created. The person was using the EW program. Then they were transferred to an MCO. The MCO must:
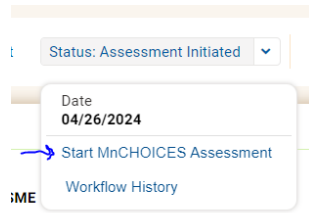
1. Make sure the previous agency has unassigned staff from the person's record.
2. Assign the care coordinator as the certified assessor and MSHO/MSC+ care coordinator.
3. Create a new form. (Assessment should already be in "Approved by MMIS" status. If it is not, contact the previous lead agency.)
   a) **Form category**: Assessment
   b) **Form**: MnCHOICES assessment
   c) **Recipient identifier**: "Current Recipient/change" (Initiate assessment screen)
   d) **Assessment type**: "Functional needs update (FNU)" (Initiate assessment screen)
   e) **Note**: "Transferred to MCO." (Initiate assessment screen)

4. Start a MnCHOICES assessment

   a) Make sure PMAP type is correct.
   b) Activity and effective dates are the same date the FNU assessment was conducted. Choose the result date, which is when eligibility-based rules apply. This can be the same as — or within 60 days of — the activity date.
   c) Enter the mode by which the interview with the person was conducted. (e.g., in person, virtually, etc.)
   d) Assessment interview time includes how long it took to complete the staying healthy section and review the assessment for any changes. (Subject to change)
   e) **"I am the care coordinator and need the staying healthy section"**: Yes – Staying Healthy only.
   f) Review each section of the functional assessment to make sure it is correct.
   g) Complete the staying healthy section.
   h) Go to "Assessment Results" and select get results.
   i) Complete the assessment summary.
   j) Enter the [LTC Screening Document – AC, BI, CAC, CADI, ECS, EW, MHM, MSC+, MSHO, DHS-3427 (PDF)](), and enter "05" (Document change only) for activity type and "98" (Other) for assessment results. Exit reasons to update care coordinator information.
   k) Create a screening document and enter it in MMIS. (Activity type = 10 is preprogrammed on the LTC SD.)
5. Create new support plan form with "EW" for program type and "MCO MnCHOICES Assessment" for support plan type.
   a) Complete the support plan.
   b) Collect signatures.
   c) Submit plan to "Plan approved" status when done.
6. Send the assessment summary and support plan to the person.

Scenario 3: FFS no program to MCO no program, no support plan created by FFS

A county or tribal nation completed a MnCHOICES assessment without the staying healthy section, but a support plan was not created and the person did not use any long-term services or supports. Then, they were transferred to an MCO. The MCO must:

1. Make sure the previous agency has unassigned staff from the person's record.
2. Assign staff as the MSHO/MSC+ care coordinator.
3. Complete a health risk assessment (HRA).
4. Create new support plan form with HRA program type.
    a) Complete the support plan.
    b) Collect signatures.
    c) Submit plan to "Plan Approved" status when done.
5. Send the support plan to the person.

Scenario 4: FFS state plan to MCO state plan, support plan created by FFS

A county or tribal nation completed a MnCHOICES assessment without the staying healthy section and a support plan, and the person chose state plan services and was transferred to an MCO. The MCO must:

1. Make sure the previous agency has unassigned staff from the person's record.
2. Assign staff as the certified assessor and MSHO/MSC+ care coordinator.
3. Create a new form. (Assessment should already be in "Plan approved" status. If it is not, contact the previous lead agency.)
    a) **Form Category**: Assessment
    b) **Form**: MnCHOICES assessment
    c) **Recipient identifier**: Current recipient/change (initiate assessment screen)
    d) **Assessment type**: Functional Needs Update (FNU) (Initiate assessment screen)
    e) **Note**: "Transferred to MCO." (Initiate assessment screen)

Initiate Assessment

Initiated By
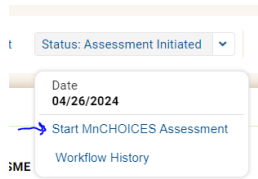User40279 DHS SME zDHS SME

Agency
zDHS Certified Assessor

Recipient Identifier*
Current Recipient / Change

Assessment Type*
Functional Needs Update (FNU)

Note*
Transferred to MCO

4. Start MnCHOICES assessment

a) Make sure PMAP type is correct.
b) Activity date and effective date is when the FNU assessment was done. Result date is the is when eligibility-based rules are applied. This can be the same as — or within 60 days of — the activity date.
c) Enter the mode by which the interview with the person was conducted. (e.g. in person, virtually, etc.) Assessment interview time includes how long it took to complete the staying healthy section and review the assessment for any changes. (Subject to change)
d) **"I am the care coordinator and need the staying healthy section"**: Yes – Staying Healthy only
e) Review each functional assessment section to make sure it is correct, but do not change the assessment.
    (**Important**: A new assessment (not an FNU) must be completed if the person's needs changed a lot. The MCO will establish a new date span.)
f) Complete the staying healthy section.
g) Go to "Assessment Results" and select get results.
h) Complete the "Assessment Summary."
i) Complete the screening document to meet the requirements of the MnCHOICES application and close the assessment. Do not enter the screening document into MMIS or upload to attachments.
5. Create a new support plan form with "CFSS" as the program type and "MCO MnCHOICES Assessment" as the support plan type.
    (**Note**: Use split screen toggle to review a previous CFSS support plan or assessment, if needed.)
    a) Complete the support plan.
    b) Collect signatures.
    c) Move to "Plan approved" status when done.
6. Send the assessment summary and support plan to the person.

Scenario 5: MCO EW to MCO EW

An MCO completed a MnCHOICES assessment with the staying healthy section and an "MCO/MnA" support plan type and "EW" program type. Then the person was transferred to a new MCO. The new MCO must:

1. Make sure the previous agency has unassigned staff from the person's record.
2. Assign staff as the certified assessor and MSHO/MSC+ care coordinator.
3. Review the MnCHOICES assessment and follow MCO instructions.
   (**Note**: This may include using an FNU. Follow steps in Scenario 1 or 2 if an FNU is MCO policy.)
4. Review the support plan and follow MCO instructions.
5. Enter a screening document using LTC Screening Document, DHS-3427 with "05" for activity type and "98" for results to update the care coordinator name in MMIS.
6. Send assessment summary and support plan to the person, if applicable.

Scenario 6: MCO EW but person chooses no program

An MCO completed a MnCHOICES assessment with the staying healthy section, but the person chose not to use the "EW" program. Also, the MCO started a support plan with "EW" as the program type. The MCO must:

1. Not complete a new HRA, because the full assessment will be used for this.
   a) Enter the LTC Screening Document into MMIS to show the assessment was completed.
2. Discard EW support plan.
3. Create a new support plan with HRA as the program type.
   (**Note**: Use the split view toggle to review a previous support plan at the same time.)
   a) You will not have access to the care coordinator indicator report when an SP — HRA is created from a MnCHOICES assessment. The split view toggle is also helpful in this scenario to look at the assessment.
   b) Complete the support plan.
   c) Collect signatures.
   d) Move to "Plan approved" status when done.
4. Send the assessment summary and support plan to the person.

Scenario 7: FFS EW legacy to MCO EW and FFS CSP support plan

A county or tribal nation created a legacy assessment and support plan with EW as the program type for a person. Then, they were transferred to an MCO. The MCO must:

1. Enter a screening document using the LTC Screening Document, DHS-3427, with "05" as the activity type and "98" as the results to update the care coordinator's name in MMIS.
2. Review the assessment and follow MCO instructions.
3. Create a new support plan if the legacy support plan or rate tool needs a significant change like, but not limited to:
   a) Additional or updated goals
   b) New providers
   c) Updated service units
   d) Change in EWRS rates.
4. Create the new support plan with "Transition plan" as the reason, "EW" as the program type and "MCO MnCHOICES Assessment (SP — MCO/MnA" for support plan type.
   a) Complete the support plan.
   b) Collect signatures.
   c) Submit plan to "Plan Approved" status once completed.
5. Send the support plan to the person.