

PROVIDER NOTICE

Notice #: PN 2014-04
Issued: May 2, 2014
To: CMAP Home Health Providers
Re: Updated Home Health Level of Care Guidelines

To Home Health Providers,

As you are aware, the implementation of Public Act No.12-1 allows for nurse delegation of medication administration. Revisions to the Guidelines were needed in order to incorporate the requirements for administration of medications by a home health aide/homemaker. This required revision provided an opportunity to review the existing guidelines and identify opportunities for clarification of service objectives and care criteria. Through collaboration between ValueOptions CT, DMHAS, DSS, home health providers, a community psychiatrist and the parent of a member receiving home care services, these draft Guidelines were developed. The intent is to provide more concrete guidance to providers, as well as a broader context of Recovery that includes client autonomy and integration with community based services. This draft also updates the Admission Criteria to reflect the DSM V.

The updated Level of Care Guidelines can be accessed via the ValueOptions CT website using the following hyperlink: http://www.ctbhp.com/providers/pdfs/Home_Health-Adult_Child-Level_of_Care_Guidelines.pdf

Please Note: *The new Home Health Level of Care Guidelines, which were approved on 2/19/2014, require that a current 485/Physician Plan of Care be included with all authorization requests sent to ValueOptions CT. The 485 should be uploaded as a document with each authorization request. If you are unable to generate a 485 that can be uploaded as a document, the 485 may be faxed to our dedicated home health fax line at 1-855-537-9455. Only one member's information can be included in each fax, as the fax will be received electronically and attached to the member's authorization request. We will not be able to accept faxes that contain more than one member's information, as they are received as a single PDF file and the pages cannot be separated.*

Please be sure to note in your authorization request that the 485 was faxed to ValueOptions CT. If we have this documentation and do not have your 485, we will notify you by phone to resend.

If you have any questions, please feel free to contact the CT BHP Call Center at 1-877-552-8247.

Provider Relations Department
Connecticut Behavioral Health Partnership

Encl: Home Health Level of Care Guidelines – Summary of Draft Changes

Home Health Level of Care Guidelines – Summary of Draft Changes

A. Home Care Nursing Services

Definition - Page 2-3:

- Addition of paragraph 2 regarding Recovery principles, paragraph 3 regarding nurse delegation.

Authorization Process and Time Frame for Service - Page 3-4:

- Updated authorization time frames for medication administration visits
- Adds requirement for Home Health Plan of Care (CMS 485)
- Addition of paragraphs 2 and 3 regarding physician orders

A.1.0 Admission Criteria - Page 4-5

- A.1.1 - updated for DSM V
- A.1.2 – all items updated with additions for greater specificity and time frames for eligibility criteria

A.2.0 Continued Care Criteria - Page 5-6

- Change of “family” to “support network”
- A.2.1.2 - Adds requirement for CMS 485 and every 60 day updates to care plan and goals, language updated to be Recovery focused
- A.2.1.3 – modified for Recovery focus and requirement for at least monthly assessment
- A.2.14 – changed to specify content of Home Health Plan of Care
- A.2.3 - addition of section A.2.3.3 regarding supporting documentation

B. Home Health Aide Services - Page 8-10

Definition

- Addition of Paragraph 2 regarding Recovery principles

Authorization and Time Frame for Service

- Updated authorization time frames for home health aide visits
- B.1.1 - updated for DSM V
- Addition of B.2.1.3 regarding duration of visit, previous B.2.1.3 and B.2.1.4 are not B.2.1.4 and B2.1.5