



OPERATIONAL MEMO

Title: Professional Medical Information Page Signature Date in Care and Case Management	Topic: Case Management
Audience: Community Centered Board, Single Entry Point, Case Management Agencies	Sub-Topic: HCBS
Supersedes Number: N/A	Division: Case Management and Quality Performance Division
Effective Date: Jan. 16, 2024	Office: Office of Community Living
Expiration Date: Jan. 16, 2026	Program Area: N/A
Key Words: Home and Community-Based Services, HCBS, PMIP; Professional Medical Information Page; CCM, Care and Case Management; Program Record, Program Card, Long Term Care Assessment Information, Member Record, LOC Assessment, Level of Care, ULTC 100.2	
Legal Authority: 10 CCR 2505-10 Section 8	
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Operational Memo Number: HCPF OM 24-012	
Issue Date: April 9, 2024	
Approved By: Colin Laughlin	

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Purpose and Audience:

The purpose of this Operational Memo is to inform Case Management Agencies (CMAs) of expectations for completing the Level of Care Assessment Information on the Member Program Summary of the Care and Case Management (CCM) system for HCBS Continued Stay Reviews (CSRs) when the most recent Professional Medical Information Page (PMIP) was originally documented in the BUS.

Information:

The Department of Health Care Policy and Financing (HCPF) launched the CCM in July 2023. In launching the CCM, HCPF decommissioned the Benefits Utilization System (BUS) and migrated data that was originally entered into the BUS into the CCM.

Although the ULTC 100.2 data was migrated into the CCM, the CCM system requires information from the PMIP in addition to the ULTC 100.2 information, that that did not migrate into the CCM, therefore is required to be entered manually into the Program Summary.

Action To Be Taken:

Case Managers are to follow the guidance below for CSRs when the most recent PMIP was originally documented in the BUS. When entering the Level of Care Assessment Information:

PMIP on file

For all Long-Term Care programs the initial PMIP should always be on file, so “Yes” should always be selected. If a new PMIP is not required for a CSR, as long as the PMIP from the initial or more recent assessment is in the record, “Yes” is the appropriate response. This includes records maintained by the CMA prior to the CCM.

Date PMIP signed

For HCBS CSRs, which do not require an annual PMIP form, when the most recent PMIP was documented in the BUS prior to July 1, 2023, case managers do not have to refer to the migrated CCM ULTC 100.2 or BUS records for the date the PMIP was signed. Case Managers may enter 6/30/2023 into the “Date PMIP signed” field of the Program Summary to indicate that it is a ULTC 100.2 record prior to the migration, in the event of an audit.

Level of Care Assessment Information

PMIP on file	Date PMIP signed	Date Finalized
Yes	06 / 30 / 2023	mm / dd / yyyy

Prior to January 16, 2024, some Case Managers used 11/11/1111 (or other variation of all ones) to complete this field. HCPF **does not require** these dates to be adjusted to the 6/30/2023 date.

Level of Care Assessment Information

PMIP on file	Date PMIP signed	Date Finalized
Yes	11 / 11 / 1111	mm / dd / yyyy

Definition(s):

The Professional Medical Information Page (PMIP) is the medical information form signed by a licensed medical professional used to verify the individual's medical necessity for Long-Term Care Services (10 CCR 2505-10 Section 8.390.1).

Attachment(s):

None.

HCPF Contact:

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