

Streamline Eligibility Implementation

A Case Management Policy and System Training

Presented by: CMQP Training and TA Unit
and AssureCare Training Team

February 5, 7, 8, 2024



Agenda

- Streamline Eligibility, What Is It?
- Benefits
- Initial Process
- CSR Process
- Case Manager Responsibilities
- FAQs
- Resources

Streamlined Eligibility - What is it?

Three primary components

1. System interfaces to communicate Level Of Care Certification information
2. Universal Aid Code will be the new plan for HCBS Waiver members in the Health Coverage card
3. PEAKPro Access to check Financial Eligibility and view the processing status



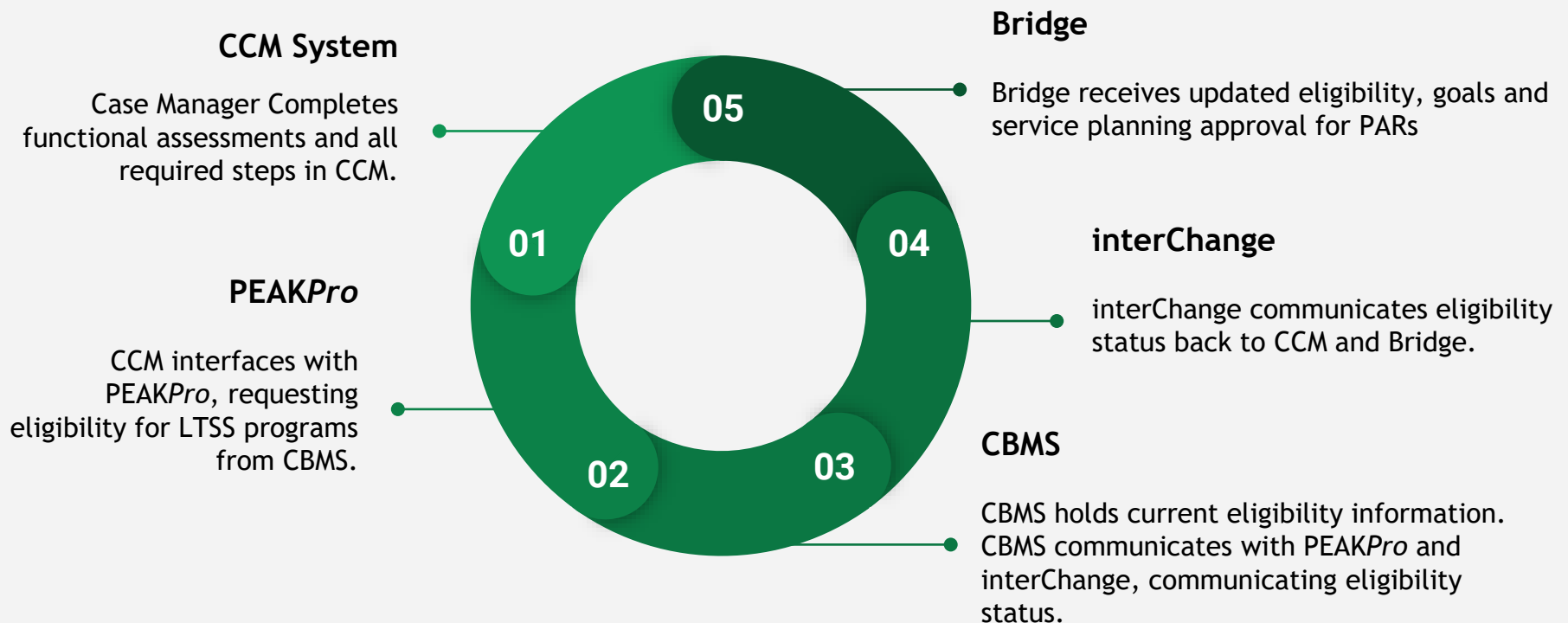
Streamline Benefits

- Reduces CM and County eligibility technician process steps and time
- Fewer lost/missed communications
- Overnight updates
- Time Saving



Systems Interfaces - Streamline

Eligibility status communicated electronically through systems automatically using a Universal Aid Code for all HCBS Waivers.



CMA and Eligibility Info Sharing Form (DSS1) & Cert Pages

- Case managers will no longer need to manually fill out and send certification pages with the Information Sharing Form to County DHS offices
- Case managers will continue to complete the certification information in the assessment in the CCM
- There will be a new merge and send document in the Legacy 100.2 Page Resources called the “Long-Term Care Certification” that can be used as a back up way to communicate with DHS if:
 - You need to communicate about cases completed prior to 2/19/24
 - If the system is not working properly
 - Other communication with County offices

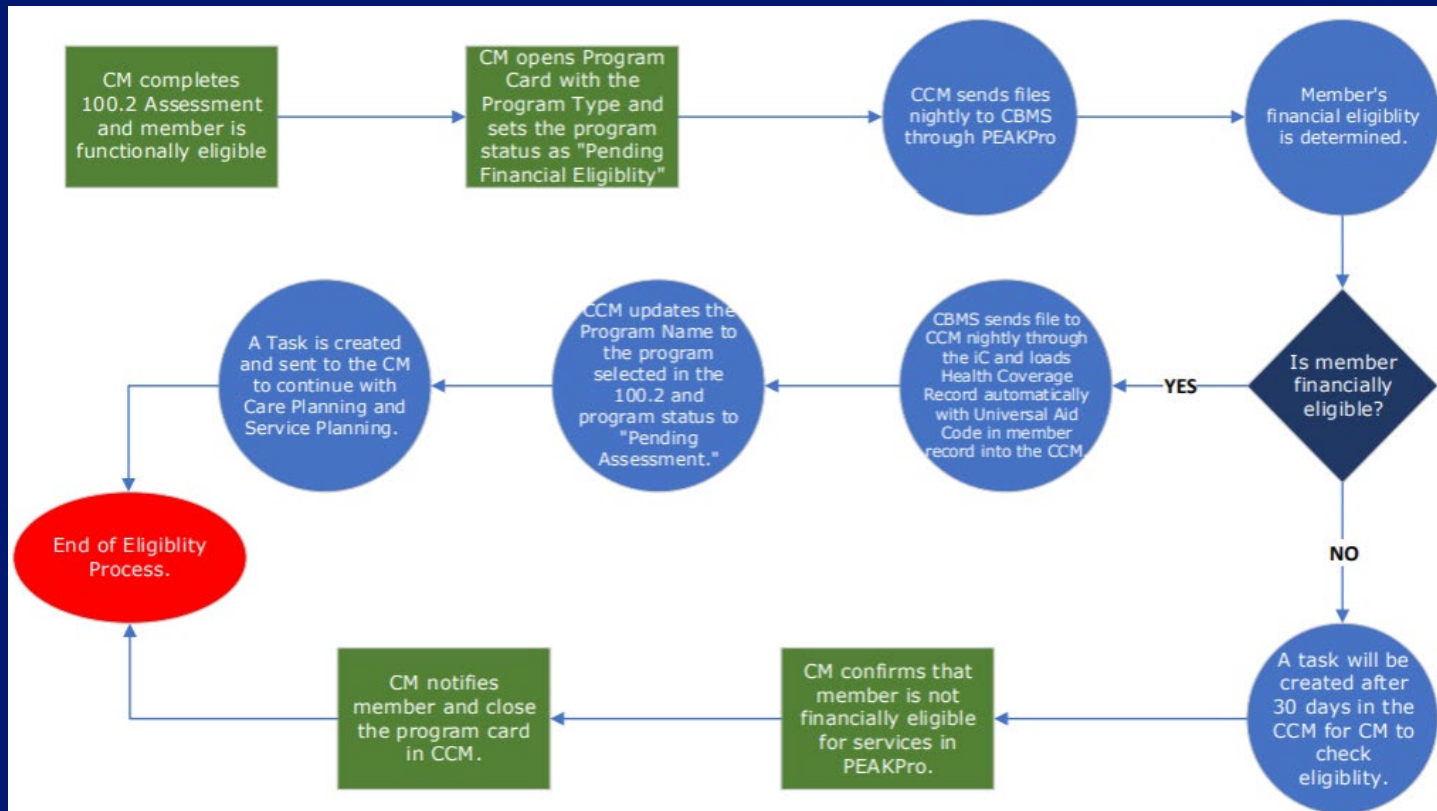


Universal Aid Code

- Currently, 10 separate aid codes for waivers
- The county will no longer have to manage aid codes for member movement between waivers.
- With Streamline Eligibility ALL financially approved members who meet the required level of care and choose any of the HCBS waivers will get ONE Program Aid Code the “Universal Waiver” Aid Code shown on a Health Coverage card.
- The Case Manager will then complete the Service Planning and PAR processes. The InterChange will create an additional Health Coverage Card noting the member’s specific waiver and certification period.



Initial Process



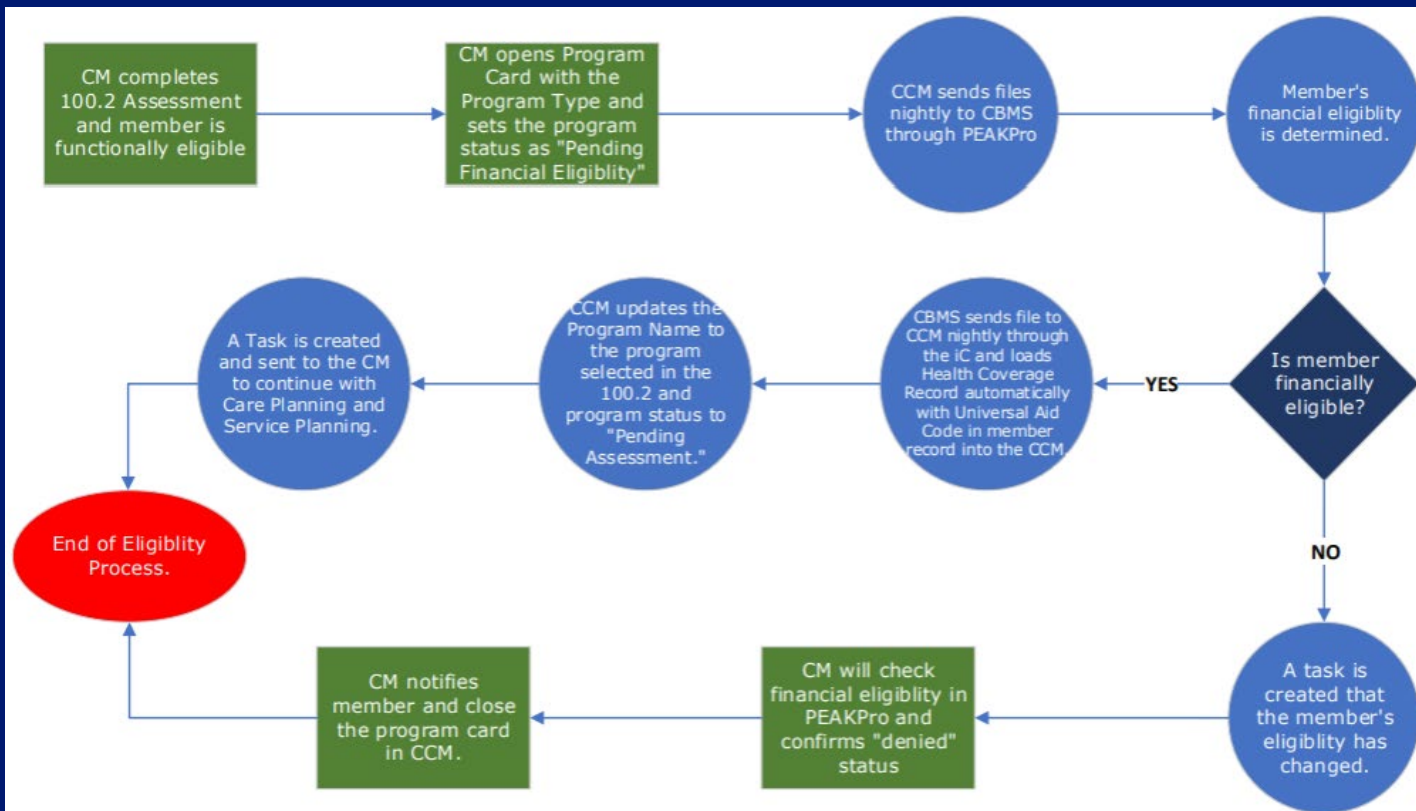
LTSS Streamline Eligibility Process Flow for Initials - February 2024

Green Boxes: Indicates an action the Case Manager (CM) must complete.

Blue Circles: Indicates an action that is executed by the Care and Case Management (CCM) system.

Dark Blue Diamonds: Indicate a decision point.

CSR Process



LTSS Streamline Eligibility Process Flow for CSRs - February 2024

Green Boxes: Indicates an action the Case Manager (CM) must complete.

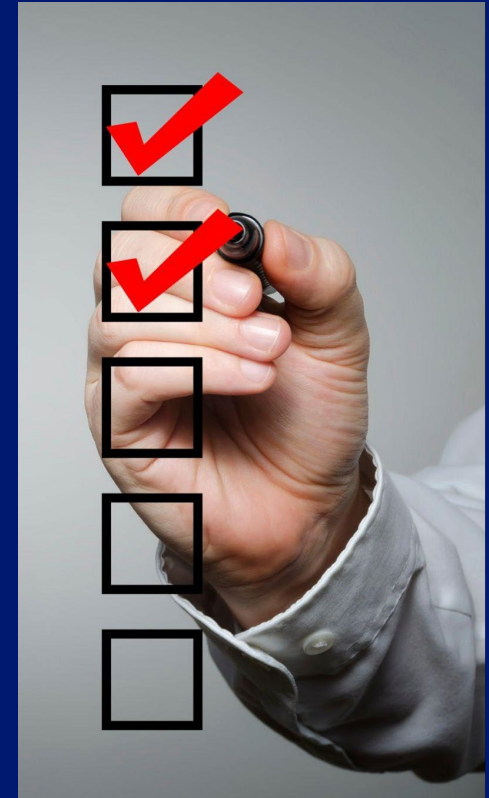
Blue Circles: Indicates an action that is executed by the Care and Case Management (CCM) system.

Dark Blue Diamonds: Indicate a decision point.

CMA Responsibilities

Complete with existing guidelines:

1. 100.2 Assessment Key Fields
2. Program Card Key Fields
3. Service Plan Key Fields
4. Complete Eligibility Tasks
5. Check Health Coverage when needed



CMA Responsibilities - 100.2 Assessment

1. 100.2 Assessment Key Fields

- a. Fill in the “Blue Pencil” field section
- b. Accurate certification dates and updated waiver selection
- c. A “Complete” 100.2

100.2 Assessment Key Fields - Blue Pencil

The required Blue Pencil Fields on the 100.2

Assessment/Support Plans: LTC Level of Care Eligibility Assessment (Legacy ULTC 100.2)
Version 2.3

← Back Sign View History Close Complete Save

Progress	Version	Level of Care Type	Created	Held Date	Verified Date	Date Completed/Verified	Assessor Name	Needs Assessment Type	Person Centered SP Type
9/84	2.3	N/A	Sep 14, 2023	N/A	N/A	N/A	N/A	N/A	N/A



1 2 3 4

ASSESSMENT INFORMATION DETAILS ACTIVITIES OF DAILY LIVING & LEVEL OF CARE DETERMINATION MEDICAL ASSESSMENT DEMOGRAPHICS

Assessment/Support Plans: LTC Level of Care Eligibility Assessment (Legacy ULTC 100.2)
Version 2.3

← Back Sign View History Close Complete Save

Progress	Version	Created	Date Completed/Verified	Assessor Name
9/84	2.3	Sep 14, 2023	N/A	N/A

Level of Care Type
- Select -

Held Date
mm / dd / yyyy

Verified Date
mm / dd / yyyy

100.2 Assessment Key Fields - Certification Information

Certification decision, dates, and updated waiver selection

LONG TERM CARE CERTIFICATION INFORMATION

* Program Eligibility Decision
☒ Approved ☐ Denied ☐ Withdrawn ☐ Waitlist Only ☐ Closed

* Agency
- Select -

* Authorizing Decision (Agency Administrator)
Case Manager's Name

* County
Member's County of residency

* Start Date
02 / 12 / 2024

* End Date (A valid date is 1 year from start date or 1/1/2099.)
01 / 31 / 2025

PROGRAMS INFORMATION

* Target Group
Physically Disabled (18-64)

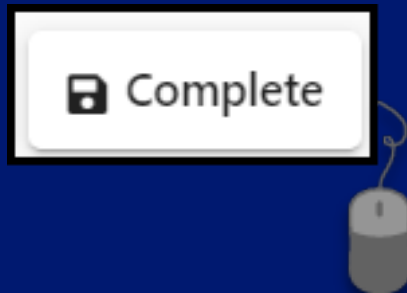
* Program Approval
HCBS

* HCBS
☒ HCBS-BI
☐ HCBS-CMHS
☐ HCBS-DD
☐ HCBS-EBD
☐ HCBS-CIH
☐ HCBS-SLS
☐ HCBS-CHCBS
☐ HCBS-CWA
☐ HCBS-CLLI
☐ HCBS-CES
☐ HCBS-CHRP

*These fields will be carried through the system for Streamline Eligibility approvals or denials. Members will now receive a HCBS “Universal Waiver Aid Code” once approved.

100.2 Assessment Key Fields - Complete

C. Case Managers will select “Complete” when all the required Legacy 100.2 fields have been input.



Don't forget to “Complete”
legacy 100.2, prior to creating
the program card.

CMA Responsibilities - Program Card

2. Program Card Key Points

- a. Use Program Card Job Aid
- b. Ensure no duplicate program cards
 - i. (1 Certification Period = 1 Card)
- c. Program Card Key Fields



Program Card Key Fields - Name, Sequence, and Status

In the screenshot below we see an example of an “HCBS Waiver” Program Card

- Program Name - Waiver or Program for certification period
- Program Sequence - Current or Future
- Program Status - Pending Financial Eligibility

Program Summary Cancel Save

Program Name HCBS Waiver	Program Sequence Future Program	Nursing Facility Documented in Care Team? N/A	Program Status Pending Financial Eligibility	Case Manager/CM Supervisor Lydia Beals
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Program Information

* Program Name HCBS Waiver	* Program Sequence Future Program - Select - Current Program Future Program	* Program Status Pending Financial Eligibility	Program Number 230721054430	Program Open Date 07 / 17 / 2023
Enrollment Counted N/A	Program Closure Date mm / dd / yyyy	Reason for Program Closure - Select -	Other Closure Reason	
Declined Reason - Select -	Reopen Date mm / dd / yyyy	Reopen Reason - Select -	Other Reopen Reason	

Program Card Key Fields - Pending TC Review

- In the screenshot below we see an example of an “HCBS Waiver” Program Card with a status of “Pending TC Review”. This status is only used for member’s who require a Targeting Criteria review prior to an eligibility determination.
- Case managers would wait for a Review approval before completing the Legacy 100.2 and updating the Program Status to “Pending Financial Eligibility”.

Program Information				
* Program Name HCBS Waiver	* Program Sequence Future Program	* Program Status Pending TC Review	Program Number 240118090072	Program Open Date mm / dd / yyyy
Enrollment Counted N/A	CM Assigned Yes	Program Closure Date mm / dd / yyyy	Reason for Program Closure - Select -	Other Closure Reason
Declined Reason - Select -	Reopen Date mm / dd / yyyy	Reopen Reason - Select -	Other Reopen Reason	



Program Card Key Fields - Case Manager Name

- Case manager name must be added to the Program Card
- The case manager listed will be the person receiving tasks as Financial Eligibility and Program Card automated updates occur.

Case Management Information

Intake Case Manager <input type="text"/>	Case Manager/CM Supervisor <input type="text" value="Lydia Beals"/> <input type="button" value="Clear"/>	* Staff Role <input type="text" value="Case Manager"/>
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Required when Assigned To field is filled out

*Case Managers on the program card will also see the member added to their Caseload in CCM.

Service Plan Key Fields

Ensure that your Staffing Date is documented as the Certification Start Date.

INFORMATION

* Service Plan Type:

☐ Continued Stay Review ☐ Deinstitutionalization (DI) ☐ Initial Review ☐ Reverse Deinstitutionalization ☒ Unscheduled Review






* Staffing Date:

07 / 28 / 2022

Service Plan Key Fields Continued

After the Service Plan assessment is “completed” the Case Managers will need to go to the top of their screen and adjust this date to the Certification State Date.

Service Plan Cancel Save ⋮

* Description Initial/Enrollment	* Service Start Date 12 / 05 / 2023 	Service End Date 12 / 04 / 2024 	* Funding Source Supported Living Services Waiver	* Program Sequence - Select -
Care Plan Goal 	Status of Services Open	Total Cost of Services \$0.00	Budget \$0.00	Service Auth # 
Service Line 				

Save

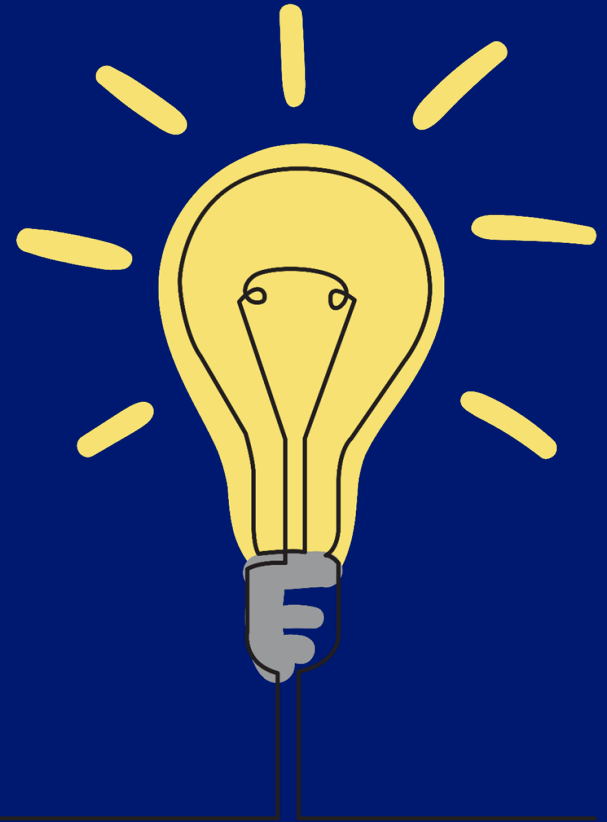
Program Card Key Fields

When a case manager completed the Service Plan Assessment the Program Card Open Date will also be updated to the date the assessment was “completed”. Case managers will need to return to the member’s Program card and adjust this date to the Certification State Date also.

The screenshot shows the 'Program Summary' form. At the top right, there are 'Cancel' and 'Save' buttons, with the 'Save' button highlighted by a red box. Below this is a summary row with fields for Eligibility Determination (N/A), Program Name (N/A), Nursing Facility Documented in Care Team? (N/A), Program Status (N/A), and Case Manager/CM Supervisor (N/A). The main section is 'Program Information'. It contains several fields: Eligibility Determination (mm / dd / yyyy), Program Name (Developmental Disabilities Waive), Program Status (Open), Program Number (N/A), Program Open Date (08 / 30 / 2023), Program Closure Date (mm / dd / yyyy), Enrollment Counted (N/A), Reason for Program Closure (- Select -), and Reopen Date (mm / dd / yyyy). The 'Program Open Date' field is highlighted with a red box, and a red arrow points to it from a red callout box at the bottom that says 'Update to Certification Start Date!'. A lightbulb icon is also present next to the Program Name field.

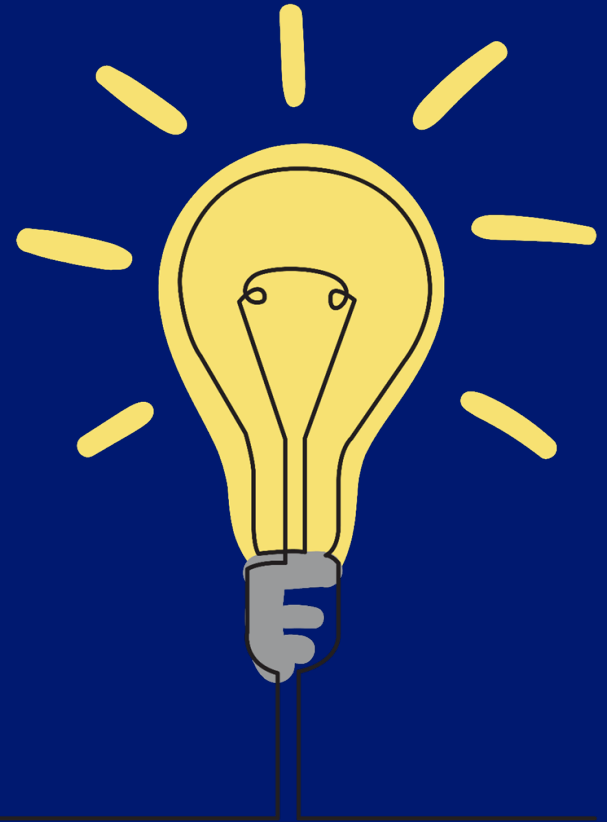
CMA Responsibilities - Eligibility Tasks for Initial Members ONLY

- Monitor For Eligibility Tasks
 - Every 30 days while waiting for financial eligibility
 - Check PeakPro for approvals and denials
 - See PEAKPro training



CMA Responsibilities - Eligibility Tasks for CSR Members ONLY

- Monitor For Eligibility Tasks
 - Case manager will receive a task informing them of eligibility status change
 - Check PeakPro for approvals and denials
 - See PEAKPro training



Tasks can be accessed via your task list and also within the Activities menu of the Member Record

The screenshot displays the Health 360 interface. On the left is a sidebar menu with the following items: Health 360, Activities (highlighted with a red box), Alerts, Tasks/Appointments, Case Notes, Documents, Activity Log, and Demographics. The main content area is titled 'Calendar' and includes tabs for 'All', 'Appointments', and 'Tasks/Reviews'. Below these are navigation buttons for 'Previous', 'Open', and 'Next', and a 'Filter' input field. A table lists tasks with columns for 'Type', 'Activity Type', 'Assigned To/Organizer', and 'Description'. The first row is highlighted with a red box.

Type	Activity Type	Assigned To/Organizer	Description
Eligibility - Financial	Task	Michelle Winey	Check member financial eligibility and notify as needed

Health Coverage - Universal

This is an example of the “Universal Waiver” Aid Code in the Health Coverage section after Financial Eligibility has been approved.

The screenshot displays a web application interface for managing health coverage. On the left is a sidebar menu with options: Health 360, Activities, Demographics, Health Coverage (selected), Private Insurance, Carriers/Organizations, Care Opportunities, Utilization Management, and Case Management. The main content area is titled 'Health Coverage Type' and features a filter bar with tabs for 'All', 'Active' (1), 'Future' (0), and 'Closed' (0), along with a 'By: Effective' dropdown. Below the filter bar, a card titled 'Medicaid' is shown with an 'Active' status. Inside the card, the 'Plan:' field is highlighted with a red box and contains the text 'Universal Aid Code'. Other fields visible are 'Eligibility Status: Active' and 'Effective Date: 12/2/23'. A 'Copy' button is located at the bottom left of the card.

Health Coverage - Waiver

This is an example of the Waiver Coverage and the Universal Aid Code in the Health Coverage section after the Service Plan Assessments have been completed.

The screenshot displays the 'Health Coverage Type' interface. At the top, there are filters for 'All', 'Active' (2), 'Future' (0), and 'Closed' (0). A 'By:' dropdown is set to 'Effective Date (Newest to Oldest)'. Below the filters, two active Medicaid plans are listed. The first plan is 'Medicaid Primary Coverage' with details: Plan: HCBS DD, Primary Coverage, Eligibility Status: Active, Effective Date: 1/17/24, End Date: 12/31/24. The second plan is 'Medicaid' with details: Plan: Universal Waiver, Eligibility Status: Active, Effective Date: 12/20/23, End Date: 12/31/99. Both plans have a blue edit icon.

Health Coverage Type
Medicaid Primary Coverage
Plan: HCBS DD
Primary Coverage:
Eligibility Status: Active
Effective Date: 1/17/24
End Date: 12/31/24

Health Coverage Type
Medicaid
Plan: Universal Waiver
Eligibility Status: Active
Effective Date: 12/20/23
End Date: 12/31/99

FAQs

What do I do to correct a keying error in the Assessment, Program Card, or Service Plan?

- Make any changes needed to the Program Card or Assessment.
- Reopening the 100.2 Assessment and clicking on Complete will retrigger the transaction.



FAQs Continued

How can I verify that my LOC Certification information was transmitted to PEAKPro/CBMS?

- Review Member record for eligibility tasks
- Check Health Coverage Card
- Double check all key fields are accurate
- Review Program Card Page Resources>Page History
- Check PEAKPro
- Reach out to Eligibility technician
- Contact CCM Call Center
- [County and Eligibility Site Member Complaint and Escalation Webform](#)

Contact Info

Submit your questions to the
CCM Stakeholder Inbox

hcpf_ccm_stakeholder@state.co.us

CCM Call Center

(888) 235-6944 or complete and send a [CCM Support Request Form](#) attached to an encrypted email to ccmsupport@assurecare.com



Post Training Resources

PEAKPro & Streamline Eligibility Office Hours

- Super User session Thursday 2/15/24 from 10:30 a.m. to 12 p.m.
- Thursday 2/22/24 from 1 to 2:30 p.m.
- Wednesday 2/28/24 from 10 to 11:30 a.m.

CCM Streamlined Eligibility Training Survey



COLORADO

Department of Health Care
Policy & Financing

Thank you!

