

INTERIM HBU ADMISSION PROCESS

Referral (Client has not met clinical criteria)

- **Referral source consults with client (or client guardian/family member) regarding treatment and placement options during entire admission process**
- Referral source contacts Medicaid services/placement options (nursing facilities, home health, HBU units, hospice, or other) for placement consideration
- SURC pre-screens for program need by filling out the HCPF HBU Pre-Eligibility Screening Tool
- SURC establishes that the referral source has determined that **all Medicaid programs and services have been considered and would fail to meet client needs**
- If SURC determines that referring source has not established that all Medicaid programs and services have been considered and would fail to meet client needs, referral is sent back to referring source (referral source has 10 days to provide information to SURC)
- If referral source has considered all other Medicaid programs and services and contends that all fail to meet client needs except placement in a HBU unit, the referral source submits referral information (HBU contact form, assessment tools, H&P, and medical records) to SURC for review
 - Referral source contacts a HBU unit for placement and the HBU unit completes an on-site assessment to determine whether client can be appropriately treated in the facility
 - HBU unit submits a **HBU Care Plan/Cost Report** to the SURC for clinical review
 - HBU unit secures a transfer agreement with the discharging hospital in which the hospital agrees to readmit the client should problems develop

Intake (Clinical eligibility is being evaluated)

- The SURC reviews the referral information (ULTC-100.2, HBU contact form, assessment tools, H&P, medical records, consults, physician's progress notes, physician's statement of medical stability, labs, radiology reports, medication lists, dietary notes, clinical notes, **HBU Care Plan/Cost Report**, and other)
- SURC reviews referral information to make initial determination of whether client meets HBU clinical criteria and utilizes HBU Treatment/Placement Tool to determine most appropriate placement for client
- SURC forwards the referral information and initial determination to physician for review
- Physician approves or denies client for clinical HBU eligibility
- SURC advises/notifies client, HBU unit, hospital, SEP, and HCPF of clinical eligibility determination, placement and provides a confirmation number
- A client appeal rights waiver is sent to client and HCPF
- SURC advises client in writing if clinical eligibility for the program is denied
- If approved and a HBU unit is chosen as placement:
 - SURC submits Client Contact Form and HBU Worksheet with physician confirmation to HCPF
 - **SURC sends HBU Care Plan/Cost Report to HCPF for rate determination**
 - If rate is acceptable, HCPF confirms rate and sends rate letter to HBU unit

Admission (Eligibility)

- SURC will conduct an on-site review within 90 days of the initial determination
- An on-site review will determine whether:
 - Client continues to meet the HBU clinical eligibility requirements
 - Client's needs are being adequately met
 - HBU unit care plan is being implemented
 - Appropriate services are being provided
 - Care plan should be adjusted to meet the client's needs
- If care plan needs to be adjusted, the SURC will request that the HBU unit adjust the care plan to meet the needs of the client
- SURC will send a summary of the review with recommendations to HCPF
- HCPF will review the recommendations and determine whether the HBU unit should re-submit a cost report based on care plan adjustments
- **HBU units rates are cost-based and can be re-negotiated with significant changes in client's care plan or other relevant circumstances**
- If SURC determines that client continues to meet HBU clinical eligibility, the client is granted a continued stay equal to one year (including initial 90 days)
- A continued stay review is conducted by the SURC annually
- If the SURC determines that a client no longer meets clinical HBU eligibility, the SURC sends the HBU unit, client (or client's guardian), and HCPF a denial letter
- SURC sends client (or client's guardian) appeal rights information
- Following a denial, HCPF will notify the client (or client's guardian), the HBU unit, and the treating physician that the SURC and the physician reviewer have determined that the client no longer meets program eligibility and within 60 days the rate shall be reduced to a nursing facility's class I rate

Statewide Utilization Review Contractor (SURC)

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