

Annual Level of Care Reviews

A primer for CCC Plus Health Plans

January 16, 2018

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DMAS

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Chapter One

- Who needs an LOC and why “a reflection”
- Overview of submission process

A New View

- Health plans historical focus short term Medical conditions.

- Acute care
- PCP visits
- Diagnostic testing
- Rehabilitation

- New view Long Term Services and Supports

- Chronic life long focus
- On going supports for basic life activities
- Social as well as medical needs

How many of you are nurses ?

*“ We do not learn from experience
We learn from reflecting on
Experience.”* John Dewey



Questions to
ask yourself
to help shift
your thinking

Who do you know that is experiencing frail health?
Reflect on how they do basic activities (eating, walking, going to the store, bathing dressing?
Ask for a drink and watch how they get it. Do they rely on anything to support them in these activities? Any mechanical device, a chair to get across a room, do they sit when preparing dinner?
Do they rely on some one to take them for groceries?
How do they remember to take their medications?
Do they purchase Depends? Incontinent supplies?
How do they spend most of their day? Watching TV/ Why?
How do they get their laundry done?
How often do they communicate with others?
Do they get dates & times correctly?
How many rooms of their home do they spend time in?

What is Annual Level Of Care

A snapshot of an individual's needs at a given point in time

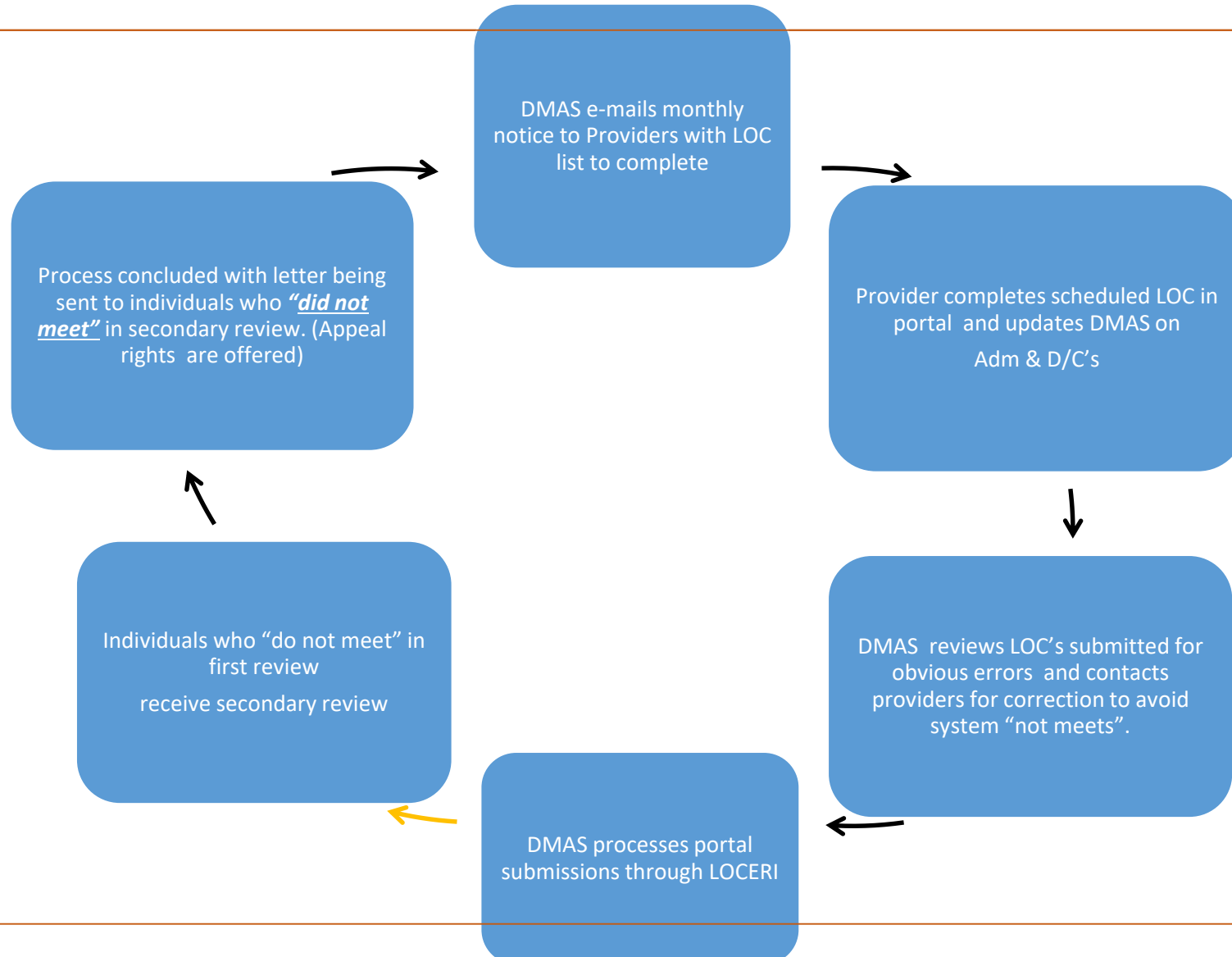


Level of Care Process a Requirement

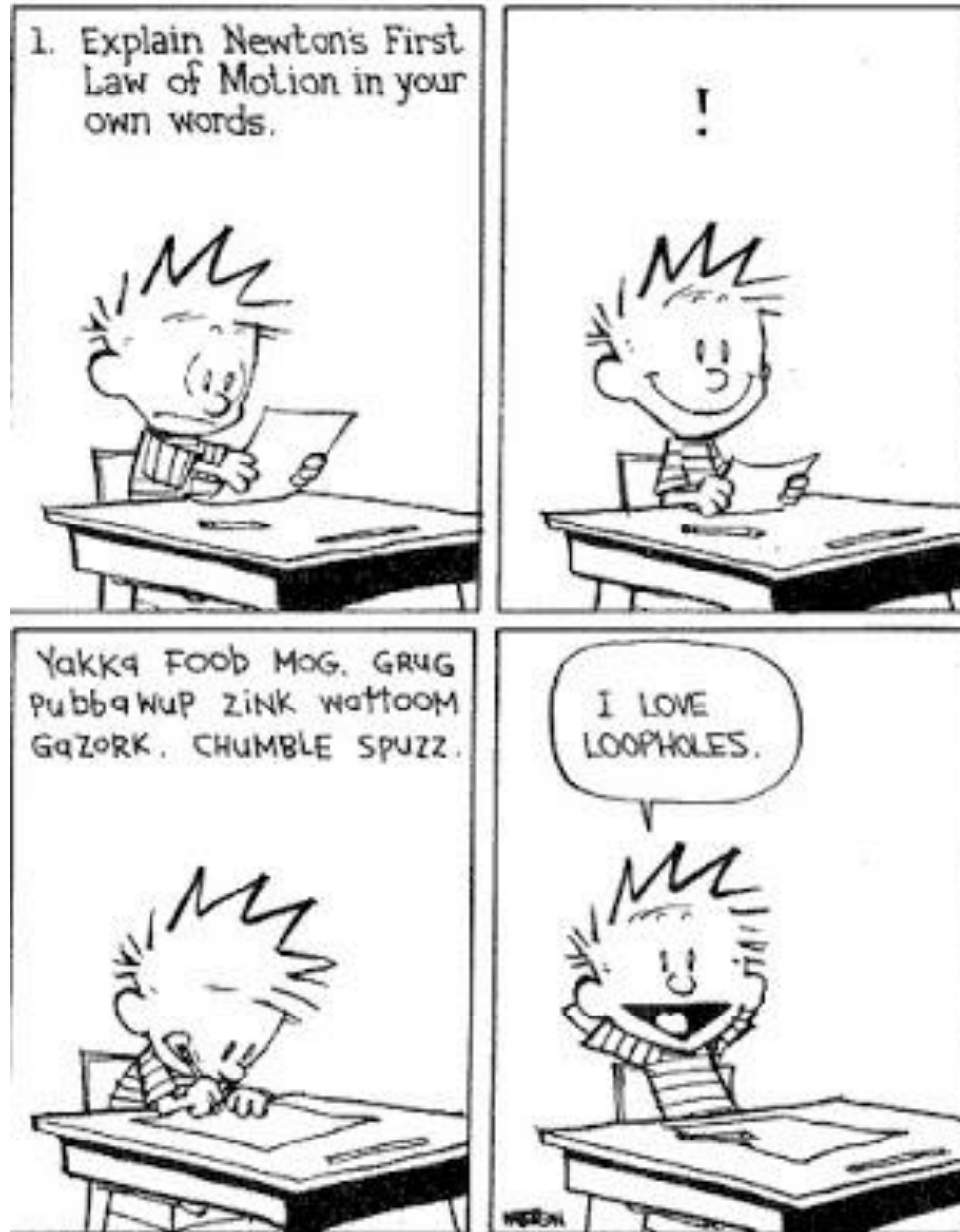
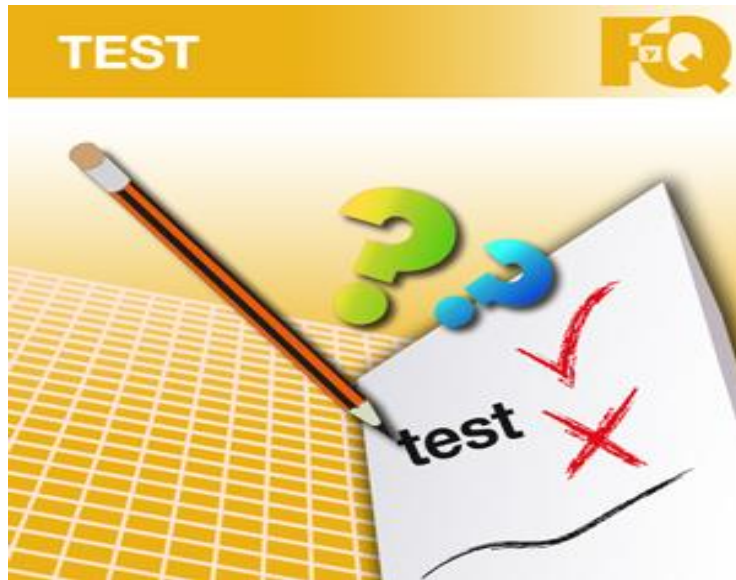
- Annual Level of Care review(LOC) is a federal mandate- 42 §441.302 (c) (2)
- A CCCPlus Contractual requirement sections (in 2018 version)
 - *4.7.2.3 Level of Care,*
 - 4.7.2.3.1 Level of Care (LOC)Reviews

Goal of assessment is to determine if the individual continues to need the level of care provided and would, but for the provision of waiver services, otherwise be institutionalized.

Overview LOCERI Process



- Quiz Time



Question #1

- How are LOC review's different from Health Risk assessments?
 - They focus on the immediate medical needs only
 - They are a holistic view of the individuals ability to perform “normal” activities safely
 - They rely on diagnosis to determine services needs

Question #2

- The role of the health plans trainer is?

- To complete annual LOC reviews
- To be the communications channel with DMAS on all LOC communications
- To be the Subject Matter Expert for the Health Plan and provide education to all of the Care Coordinator's.
- Distribute the LOC lists to the appropriate Care Coordinators
- Update LOC team of any changes within your plan that would impact Annual LOC process
- All of the Above



Question #3 and #4

- Is the Annual LOC a waiver requirement?

Yes

No

- Which one of these is not the legal basis for conducting an Annual LOC?

CCC Plus contract

CFR

SAA 2 way agreements