



Promise Health Plan

POLICY & PROCEDURE

Medical Services

Policy Title: Referral Process for Managed Long Term Services and Supports (MLTSS)

Policy No: 10.2.42

Original Date: 3/14

Effective Date: 12/18

Revision Date: 12/18

Revision No: 1

Department Head:

Date:

Medical Services/P&T Committee:

Date:

P&P Committee:

Date:

Department(s):

UM

PURPOSE:

To establish the referral process for contracted Primary Care Physicians (PCPs), Specialists and Participating Provider Groups (PPGs) or other health care professionals, following identification of a Medi-Cal eligible Member who may benefit from Managed Long Term Services and Supports (MLTSS).

POLICY:

Blue Shield Promise providers may refer a Member to the health plan for consideration to receive MLTSS. Each of these programs is subject to its own eligibility criteria, and a submitted request does not necessarily guarantee approval of service. MLTSS programs include:

1. Community Based Adult Services (CBAS)
 - a. Outpatient, facility-based program that delivers skilled nursing care, social services, therapies, personal care, family/caregiver training and support, nutritional services, transportation, and other services/
2. In-Home Supportive Services (IHSS)
 - a. A program that allows the enrollee to select their provider for in-home care if they cannot safely remain in their home without care giving assistance. To qualify for IHSS, the enrollee must be aged, blind, or disabled and, in most cases, have income equal to or below the current Supplemental Security Income/State Supplementary Program levels.
3. Multipurpose Senior Service Program (MSSP)
 - a. A California-specific case management program that provides Home and Community Based Services (HCBS) to eligible Medi-Cal beneficiaries who are 65 years or older with disabilities as an alternative to nursing facility placement.
4. Long Term Custodial Care in a Skilled Nursing Facility (SNF) or Subacute Facility
 - a. Facilities that provide long term custodial care for people who cannot live safely at home but do not need to be in a hospital.

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PROCEDURE:

1. The PCP, specialist, case manager, social worker or other health care professional identifies the need for MLTSS services and completes the MLTSS form (Attachment A).
2. The completed form is faxed to Blue Shield Promise.
3. The Blue Shield Promise Medical Services Department will review the form and determine if additional assessments are needed to further evaluate the member's eligibility for MLTSS.
4. Blue Shield Promise will work collaboratively with the appropriate agency as set forth in the following policies and procedures
 - a. Community Based Adult Services Policy No. 10.2.92
 - i. Blue Shield Promise will follow established policy and procedure
 - b. Access to In-Home Supportive Services refer to Policy No. 70.27.1.4: Social Services Coordination of MLTSS
 - i. All attempts will be made to encourage beneficiaries to directly access the program
 - c. Multipurpose Senior Services Program refer to Policy No. 70.27.1.4: Social Services Coordination of MLTSS
 - i. Beneficiaries and providers will be encouraged to directly access the program
 - d. Long Term Care Policy No. 10.2.100.17
 - i. Blue Shield Promise will follow established policy and procedure
5. The UM coordinator will communicate the outcome of the request for MLTSS to the Member, and the referring party, if appropriate.

REFERENCES/AUTHORITIES: