

ANNOUNCEMENT

Please read the entire document

Background

During the last several years, the Division of Medical Assistance (DMA) has been working on designing, developing, and implementing Internet-based uniform screening and assessment tools to manage its long-term care programs. Providing these automated tools is expected to:

- Provide more appropriate program placements;
- Improve efficiency and expedite decisions on program placements;
- Provide Medicaid recipients a choice of programs for which they qualify;
- Assure that screening and assessment is accurate and consistent;
- Avoid submitting the same documentation to multiple providers and agencies;
- Provide a searchable database that can sort and report on program data;
- Provide data for program monitoring, quality assurance, and utilization review;
- Develop profiles of program participants; and
- Facilitate transferring participants between programs.

Implementation of the Uniform Screening Tool

The Division's first automation project was the development of a uniform screening tool referred to as the MUST (Medicaid Uniform Screening Tool). During the development and testing process for MUST, DMA received feedback and input from a variety of local agencies, provider associations, provider practices, and other "stakeholders." This feedback, for the most part, centered on four major implementation issues:

- The time it takes to administer the MUST versus the current FL-2 process;
- The probability that using the MUST would require an agency or organization to hire additional staff to conduct Medicaid referrals and screenings;
- That current staff might not have the background and experience necessary to use the MUST; and
- The fact the DMA does not pay for screening.

According to stakeholders, the MUST would disrupt the referring organization's business process and increase costs significantly.

In response to these issues, problems, and concerns, DMA will delay implementation and state-wide rollout of the full Medicaid Uniform Screening Tool and develop options to address these concerns.

PASARR Only

A screening of all individuals admitted to a nursing facility is required by federal regulations. This Pre-Admission Screening and Annual Resident Review (PASARR) Level I Screen is part of the MUST, but can be used as a stand alone automated screen. In the fall, the PASARR only part of the MUST will be introduced. The Division will work with ProviderLink[®] and other electronic clearinghouses to affect an electronic interface. This process will take no longer than the PASARR process currently in place.

Referrals for Medicaid Long-Term Care Programs and Services

Over the next six to nine months, The Division of Medical Assistance and Electronic Data Systems will make changes to the MUST and the process for making referrals to Medicaid long-term care programs and services. These changes will address stakeholder concerns and be tested in a pilot project that will include volunteer county agencies and provider organizations. During this process, DMA will continue to provide opportunity for stakeholders to participate in the planning and testing process. Every effort will be made to address stakeholder concerns and provide opportunities for stakeholder participation and input into this process.

Agencies should continue to use the current FL-2 process until further notice.

Training Programs

The 14 MUST training programs scheduled for this summer are **cancelled**. We will re-schedule six regional training programs that will address use of the MUST for PASARR screening only. Following the pilot project, training on the full MUST and the revised procedures for making Medicaid referrals will be provided throughout the state.

In summary:

- Full implementation and statewide rollout of the full MUST uniform screening tool **WILL NOT** be initiated in September, as previously planned;
- The PASARR only screen **WILL BE** implemented in September 2008, as previously scheduled;
- The Medicaid referral process for long-term care programs and services will be restructured to address stakeholder concerns and a pilot project will be conducted; and
- The MUST training programs for this summer are **cancelled**.

Additional information will be made available throughout this process in Medicaid Bulletins and the MUST web-site.

You can also contact us by email at uspquestions@eds.com.