



Colorado Choice Transitions Updates to the Benefits Utilization System (BUS)

- Assessment 100.2

➤ Info Page:

- **Event Type** now includes CCT Certification Extension

Assessment - 100.2

- Info
- ADL
- Medical
- Assessment Demographic
- PASRR
- LOC Certification
- Print
- Verify
- Finalize
- Client Information
- Assessment - HCA
- Case Management
- Case Status
- Critical Incidents - Before 06/04/2009

system.

Event Number 1

Assessment Date 04/06/2011 (mm/dd/yyyy)

Event Type

- 6 Month Review
- Appeal - Decision Overturned
- CCT Certification Extension
- Continued Stay Review
- DI
- Initial Review
- Nursing Facility Transfer
- Reverse DI
- Unscheduled Review
- Waitlist

Assessing Agency JEFFERSON COUNTY SOCIAL SERVICES

CCT Certification Extension
Used for CCT clients who are institutionalized during their CCT certification period and require additional days beyond one year added to their certification span.

- **Potential Programs** now includes each of the CCT program populations as options

Benefits Utilization System - Session ti...

- Transition Assessment & Planning
- Referral
- Service Plan
- Service Plan DD Section
- Administration
- Logout

- HCBS-Supported Living Services
- HCBS-Childrens Waiver
- HCBS-Children with Autism
- HCBS-Children with Life Limiting Illness
- HCBS-Childrens Extensive Support
- HCBS-Children's Habilitation Residential Program
- Colorado Choice Transitions - HCBS-BI
- Colorado Choice Transitions - HCBS-CMHS
- Colorado Choice Transitions - HCBS-DD
- Colorado Choice Transitions - HCBS-EBD/18-64
- Colorado Choice Transitions - HCBS-EBD/65+
- Colorado Choice Transitions - HCBS-SLS

➤ Medical Page:

- If the **Other Source** box is checked, information about the diagnosis **must** be entered in the **Diagnosis Description Other Source** field.

Main Menu	Edit Diagnosis
Advisement Letter	ICD9 Code: 311
Assessment - 100.2	Onset Date: 12/12/2012  ex. mm/dd/yyyy
- Info	Diagnosis Description:
- ADL	Depression
- Medical	<input type="checkbox"/> PMIP
~ Diagnosis/ ICD-9	<input checked="" type="checkbox"/> Other Source
~ Target Group Diagnoses	Diagnosis Description Other Source:
~ Medications	mental health therapist
~ Diet	<input type="button" value="Save"/>
~ Allergies	
~ Prognosis	
~ Medical Supports	
~ Medical Providers	
~ Institutionalization	
~ Print Medical Menu	
- Assessment	

Main Menu	Edit Target Group Diagnoses
Advisement Letter	Is there a Developmental Disability Diagnosis? * <input type="radio"/> Yes <input checked="" type="radio"/> No
Assessment - 100.2	Is there a Traumatic Brain Injury Diagnosis? * <input checked="" type="radio"/> Yes <input type="radio"/> No
- Info	Is there a Mental Health Diagnosis? * <input type="radio"/> Yes <input checked="" type="radio"/> No
- ADL	<i>A diagnosis of dementia must be validated by a neurological exam with documentation by the attending physician.</i>
- Medical	Neurological Exam Date
~ Diagnosis/ ICD-9	01/18/2013 <input type="text"/> (mm/dd/yyyy)
~ Target Group Diagnoses	<input type="button" value="Save"/>
~ Medications	
~ Diet	
~ Allergies	
~ Prognosis	
~ Medical Supports	
~ Medical Providers	

➤ Target Group Diagnosis Page:

- **Target Group Diagnoses** is a new page under Medical which includes three questions:
 - Is there a Developmental Disability Diagnosis?
 - To enroll a client in the CCT-DD or CCT-SLS population you must answer **Yes** to this question
 - Is there a Traumatic Brain Injury Diagnosis?
 - To enroll a client in the CCT-BI population you must answer **Yes** to this question
 - Is there a Mental Health Diagnosis?
 - To enroll in the CCT-CMHS population you must answer **Yes** to this question

- Institutionalizations Page: (previously hospitalizations)
 - Anytime an Institutionalization becomes known to a case manager, it should be added to this page.
 - Page now includes a Colorado Choice Transitions client indicator
 - **Yes** must be selected in order to use the CCT extension option in the assessment page
 - For CCT clients, the **Institutionalization Admit Date** and **Institutionalization Discharge Date** must be used
 - Estimated dates cannot be used for CCT clients
 - Dates must be past or present, dates cannot be in the future
 - If **Other** is selected in the Reason for Institutionalization field, data **must** be entered in the Other Reason for Institutionalization field – **it cannot be blank**
 - If a critical incident was entered in the BUS as a result of an institutionalization, then a Critical Incident Report (CIR) has to be filed.

Main Menu	[Add Institutionalizations] [Edit Institutionalizations] [Delete Institutionalizations]
Advisement Letter	
Assessment - 100.2	
- Info	Edit Institutionalizations
- ADL	Event Number: 1
- Medical	Report Entry Date: 02/14/2013
~ Diagnosis/ ICD-9	Colorado Choice Transitions (CCT) * <input checked="" type="radio"/> Yes <input type="radio"/> No
~ Target Group Diagnoses	Institutionalization Admit Date: (mm/dd/yyyy)
~ Medications	01/03/2013 <input type="text"/>
~ Diet	Institutionalization Estimated Admit Date: (mm/dd/yyyy)
~ Allergies	<input type="text"/>
~ Prognosis	Institutionalization Discharge Date: (mm/dd/yyyy)
~ Medical Supports	01/09/2013 <input type="text"/>
~ Medical Providers	Institutionalization Estimated Discharge Date: (mm/dd/yyyy)
~ Institutionalization	<input type="text"/>
~ Print Medical Menu	Type of Facility: *
- Assessment Demographic	Psychiatric Hospital <input type="text"/>
- PASRR	Number of Institutionalized Days: 7
- LOC Certification	CIRS report * <input type="radio"/> Yes <input checked="" type="radio"/> No
- Print	Reason for Institutionalization: *
- Verify	Other <input type="text"/>
- Finalize	Other Reason for Institutionalization:
	<input type="text"/>

If yes is selected, you may NOT use ESTIMATED Admit and Discharge Date

- **Deleting Institutionalizations**

- When selecting **Other** in the Reason for Deleting Record field, you **can now enter more information** explaining why you are deleting the record in the **new Other Reason for Deleting Record field**

Delete Institutionalization										
	Event Number	Deletion Date	Admit Date	Discharge Date	Facility Type	CIRS Report	Reason for Deleting Record*	Other Reason for Deleting Record	Number of Institutionalized days	
<input type="button" value="Delete"/>	5	02/19/2013	12/15/2012	01/08/2013	Inpatient Hospital	No	Other	additional explanation		
<input type="button" value="Delete"/>	3	02/19/2013	12/07/2012	12/16/2012	Inpatient Hospital	Yes			10	
<input type="button" value="Delete"/>	2	02/19/2013	01/13/2013	02/01/2013	Inpatient Hospital	Yes			20	
<input type="button" value="Delete"/>	1	02/19/2013	01/08/2013	01/13/2013	Inpatient Hospital	No			6	

- **Program Area**

- CCT program populations added to Program Area drop-down menu



Please note that a Program Area can only be added with an Approved certification.

Program Area

Long Term Home Health:
 Adult Foster Care:
 Home Care Allowance:
 Consumer Directed Attendant Support Services:

Agency

Open Date (mm/dd/yyyy)

- Service Plan

- **Service Plan Information** includes CCT certification extension
 - If CCT certification extension was selected on the assessment information page, it should also be selected here
- **Medicaid Long Term Care Disclosures** now includes the CCT program populations for selection under program area
 - The CCT population checked here will determine the list of services that are displayed and can be added to the service plan

Case Status
Critical Incidents - Before 06/04/2009
Critical Incident Reports
IADL
Log Notes
LTC 803
Program Area
Transition Assessment & Planning
Referral
Service Plan
- Service Plan Information
- Medicaid Long Term Care Disclosures
- Roles and Responsibilities
- Complaint Process
- Service and Provider Choice
- Statement of Agreement
- Service Plan Participants
- Natural Supports
- Third Party Resources

Program Area

Client has been offered/chosen enrollment for the following Home and Community Based Service (HCBS) waiver programs:

***At least one program must be selected from the options in the Program Area section.**

- Brain Injury (BI)
- Community Mental Health Supports (CMHS)
- Developmental Disabilities (DD)
- Elderly, Blind, and Disabled (EBD)
- Persons Living With AIDS (PLWA)
- Spinal Cord Injury (SCI) LTCO and JEFFCO Only
- Supported Living Services (SLS)
- Children's Home and Community Based Services Waiver (CHCBS)
- Children With Autism (CWA)
- Children with Life Limiting Illness (CLLI)
- Children's Extensive Supports (CES)
- Children's Habilitation Residential Program (CHRP)
- Colorado Choice Transitions - HCBS-BI
- Colorado Choice Transitions - HCBS-CMHS
- Colorado Choice Transitions - HCBS-DD
- Colorado Choice Transitions - HCBS-EBD/18-64
- Colorado Choice Transitions - HCBS-EBD/65+
- Colorado Choice Transitions - HCBS-SLS



- **HCBS Services** page includes all of the CCT population services lists
 - The UC modifier is the first indication that the services are CCT services
 - The service lists differ by CCT population
 - The CCT program checked under program area on the Medicaid Disclosures page will determine which service list is available

Main Menu	Service Selection	Provider	Service Frequency	Scope	Duration
Advisement Letter	Service				
Assessment - 100.2	Service: 1				
Client Information	Services:*	Caregiver Education - S5110, , UC			
Assessment - HCA	Service Go:	- Select One -			
Case Management	HCBS servi	Adult Day Services - S5102, , UC			
Case Status	Service Go:	Assistive Technology - T2029, , UC			
Critical Incidents - Before 06/04/2009		Behavioral Programming - H0025, , UC			
Critical Incident Reports		Caregiver Education - S5110, , UC			
IADL		Community Transition Services (CTS) Coordinator - T2038, , UC			
Log Notes		Community Transition Services (CTS) Items Purchased - A9900, , UC			
LTC 803		Day Treatment - H2018, , UC			
Program Area		Dental - D2999, , UC			
Transition Assessment & Planning		Enhanced Nursing Services (RN) - T1002, , UC			
Referral		Home Delivered Meals - S5170, , UC			
Service Plan		Home Modifications - S5165, , UC			
- Service Plan Information		Home Modifications-Extended - S5165, , UC,KG			
- Medicaid Long Term Care Disclosures		Independent Living Skills Training (ILST) - T2013, , UC			
- Roles and Responsibilities		Intensive Case Management - T1016, , UC			
		Mental Health Counseling Family - H0004, , UC,HR			
		Mental Health Counseling Group - H0004, , UC,HQ			
		Mental Health Counseling Individual - H0004, , UC			
		Mobility Van Mileage Band 1 (0-10 miles) - A0120, , UC			
		Mobility Van Mileage Band 2 (11-20 miles) - A0120, , UC,TT			
		Mobility Van Mileage Band 3 (over 20 miles) - A0120, , UC,TN			
		Mobility Van To and From Adult Day Mileage Band 1 (0-10 miles) - A0120, , UC,HB			
		Mobility Van To and From Adult Day Mileage Band 2 (11-20 miles) - A0120, , UC,TT,HB			
		Mobility Van To and From Adult Day Mileage Band 3 (over 20 miles) - A0120, , UC,TN,HB			
		Non-Medical Transportation - Taxi - A0100, , UC			
		Non-Medical Transportation Taxi - To and From Adult Day - A0100, , UC,HB			

- BUS and PAR inconsistencies
 - There are some services that will have inconsistent unit limitations or designations between the BUS, the PAR, the Rate Schedules and the Billing Manual.
 - For all services that are associated with a maximum dollar amount, one unit will equal =\$1 dollar in the BUS
 - This is the only way the BUS can ensure the limits are held
 - These services will remain the same as they have always been on the PAR
 - For example, Home Modifications will have a unit amount equal to dollar amount in the BUS
 - The PAR will have the number of Modifications in the units column and the amount in the total cost column
 - CCT services that will have inconsistencies include:
 - Assistive Technology
 - Community Transition Services-Coordinator
 - Community Transition Services-Items Purchased
 - Dental
 - Home Modifications
 - Home Modifications Extended
 - Vision
 - Independent Living Skills Training has a limit of 6 hours, or 24 units per day. For this service, 1 unit = 15 minutes.
 - The BUS **cannot** implement a limit on the number of hours per day.
 - Case Managers will have to be aware of this limit.

- Emergency Back-up planning for CCT clients
 - Case Managers should input emergency back-up plan under the Contingency Plan/Personal Goal Section of the Service Plan
 - SEPs will include risk management plan here as well
 - CCBs will continue to input the risk management plan in the Service Plan DD Section

Main Menu
Advisement Letter
Assessment - 100.2
Client Information
Assessment - HCA
Case Management
Case Status
Critical Incidents - Before 06/04/2009
Critical Incident Reports
IADL
Log Notes
LTC 803
Program Area
Transition Assessment & Planning
Referral
Service Plan

Service Plan View/Print Menu

<input checked="" type="checkbox"/> Identifying Information/Areas of Concern/State Benefits
<input checked="" type="checkbox"/> Non-Medicaid Supportive Services
<input checked="" type="checkbox"/> Home Health Benefits & Other State Programs
<input checked="" type="checkbox"/> Long Term Care Services Home and Community Based Services (HCBS)
<input checked="" type="checkbox"/> Contingency/Personal Goal 
<input checked="" type="checkbox"/> Client Roles and Responsibilities
<input checked="" type="checkbox"/> Print Agreement
<input type="button" value="Print Selected Items"/>

Note: When printing multiple pages the last/first line on the printed page may be difficult to read. It is your responsibility to verify that all lines are visible at the bottom/top of printed pages. If all lines are not clearly printed then you may choose to print each page individually.

- Service Planning
 - Reflects personal goals and values, not just functional needs
 - Includes independent and community living goals

CONTINGENCY PLAN
Identify a back-up plan to address contingencies such as "emergencies" that put a participant's health and welfare at risk.
<i>Emergencies include the failure of a family member, support worker, or caregiver to appear when scheduled to provide necessary services when the absence of the services presents a risk to the participant.</i>
s
PERSONAL GOAL
My personal goal(s) for this Service Plan year is:
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- CIRS
 - All CCT Programs will add their critical incidents into the BUS. Case managers will now enter their critical incidents for CCT-DD and CCT-SLS clients in both the BUS CIRS and the Division for Developmental Disabilities CIRS. At a later date, emergency back-up related fields will also be added to CIRS.