



Policy: GG.1809
Title: **Retroactive Authorization Request for Long Term Care Facility**
Department: Medical Management
Section: Long Term Services and Supports

CEO Approval: /s/ Michael Hunn 09/24/2024

Effective Date: 01/01/1996

Revised Date: 09/01/2024

Applicable to: ☒ Medi-Cal
☒ OneCare
☐ PACE
☐ Administrative

I. PURPOSE

This policy outlines the requirements for submitting a retroactive Authorization Request for Long Term Care (LTC) admission to or continued stay in a Skilled Nursing Facility (SNF) for Nursing Facility Level A (NF-A), Nursing Facility Level B (NF-B), Subacute Facility-Adult, Subacute Facility-Pediatric.

II. POLICY

- A. The CalOptima Health LTSS Department shall process all requests for LTC retroactive authorizations for admissions or continued stays for Members in a NF-A and NF-B, Subacute Facility-Adult or Subacute Facility-Pediatric pursuant to the California Department of Health Care Services (DHCS) standard clinical criteria for a skilled level of care.
- B. The LTC facility shall submit a completed LTC Authorization Request Form (ARF) with the request for LTC retroactive authorization within one hundred twenty (120) calendar days after the State of California's eligibility determination, regardless of when the facility identifies eligibility. Facilities are advised not to wait for a DHCS Notice of Action to identify retroactive eligibility.
- C. CalOptima Health's LTSS Department may grant retroactive approval for LTC ARFs under at least one of the following conditions:
 1. Certification of the Member's eligibility was delayed by the Orange County Social Services Agency (SSA);
 2. Other coverage (i.e., Medicare or other health insurance programs) denied NF-A and NF-B and Subacute Facility-Adult, Subacute Facility-Pediatric coverage;
 3. The LTC facility was unable to submit a timely request for authorization or reauthorization for one of the following reasons:
 - a. A natural disaster destroyed or damaged the facility's business office or records or substantially interfered with the facility agent's processing of the facility's LTC ARF.

- b. A delay due to other circumstances beyond the control of the facility, which was reported to the appropriate law enforcement or fire agency, when applicable.
- c. Circumstances not considered beyond the control of the facility include, but are not limited to:
 - i. Negligence of an employee;
 - ii. Misunderstanding of program requirements;
 - iii. Illness or absence of any employee trained to prepare LTC ARFs;
 - iv. Technology failure; or
 - v. Delays caused by the United States Postal Service or any private delivery service.

III. PROCEDURE

A. The facility shall submit the following to the CalOptima Health LTSS Department:

1. Completed LTC ARF (Sections I through V), including a physician signature, with the request for LTC retroactive authorization, within one hundred twenty (120) calendar days of the State of California's eligibility determination for Medi-Cal, regardless of when the facility identifies eligibility. Facilities are advised not to wait for a DHCS Notice of Action to identify retroactive eligibility;
2. Copy of denial letter or other document is required, as applicable:
 - a. Notice of Action (NOA); or
 - b. Integrated Denial Notice (IDN); or
 - c. Notice of Medicare Non-Coverage (NOMNC); or
 - d. Other Health Care (OHC) Explanation of Benefit.
3. Copy of the PASRR Level II Screening Document if the Preadmission Screening Resident Review (PASRR) Level I Screening is positive;
4. Most recent Minimum Data Set (MDS), either full assessment for admission or the latest quarterly assessment for continued stay;
5. Nurses' notes, Social Services Agency evaluations, or physician orders if the MDS Version 3.0 (asterisked sections) does not reflect the need for skilled care placement;
6. Completed 6200-A/6200 form, for subacute facilities.

B. Authorization requests that are submitted after the one hundred twenty (120) calendar day requirement shall be subject to a fifteen percent (15%) payment reduction. The rate of reduction is established by CalOptima Health and subject to change, based on the Long-Term Care Facilities Annual Financial Reporting data from the California Office of Statewide Health Planning and Development (OSHPD).

IV. ATTACHMENT(S)

- A. CalOptima Health Long Term Care (LTC) Authorization Request Form (ARF)
- B. Minimum Data Set (MDS) 3.0 Comprehensive Assessment Form
- C. Minimum Data Set (MDS) 3.0 Quarterly Assessment Form
- D. Information for Authorization/ Reauthorization of Subacute Care Services – Adult Subacute Program (DHCS 6200-A)
- E. Information for Authorization/ Reauthorization of Subacute Care Services – Pediatric Subacute Program (DHCS 6200)

V. REFERENCE(S)

- A. CalOptima Health Contract with the Department of Health Care Services (DHCS)
- B. Title 22, California Code of Regulations (C.C.R), §§51121, 51215, 51215.5, 51215.8 and 76345
- C. Welfare and Institutions Code §§14087.55, 14087.6, 14087.95 and 14103.6

VI. REGULATORY AGENCY APPROVAL(S)

Date	Regulatory Agency	Response
05/26/2016	Department of Health Care Services (DHCS)	Approved as Submitted

VII. BOARD ACTION(S)

Date	Meeting
11/05/2002	Regular Meeting of the CalOptima Board of Directors

VIII. REVISION HISTORY

Action	Date	Policy	Policy Title	Program(s)
Effective	01/01/1996	GG.1809	Retroactive Authorization ARF for Long Term Care Facility Daily Rate	Medi-Cal
Revised	07/01/2007	GG.1809	Retroactive Authorization ARF for Long Term Care Facility Daily Rate	Medi-Cal
Revised	03/01/2008	GG.1809	Retroactive Authorization ARF for Long Term Care Facility Daily Rate	Medi-Cal
Revised	02/01/2016	GG.1809	Retroactive Authorization Request for Long Term Care Facility	Medi-Cal OneCare Connect
Revised	02/01/2017	GG.1809	Retroactive Authorization Request for Long Term Care Facility	Medi-Cal OneCare Connect
Revised	12/01/2020	GG.1809	Retroactive Authorization Request for Long Term Care Facility	Medi-Cal OneCare Connect
Revised	09/01/2021	GG.1809	Retroactive Authorization Request for Long Term Care Facility	Medi-Cal OneCare Connect
Revised	12/31/2022	GG.1809	Retroactive Authorization Request for Long Term Care Facility	Medi-Cal OneCare
Revised	12/01/2023	GG.1809	Retroactive Authorization Request for Long Term Care Facility	Medi-Cal OneCare
Revised	09/01/2024	GG.1809	Retroactive Authorization Request for Long Term Care Facility	Medi-Cal OneCare

IX. GLOSSARY

Term	Definition
Facility	Long-Term Care (LTC) Facility, including a Nursing Facility Level A (NF-A) [Intermediate Care Facility (ICF) or Subacute Facility] and Nursing Facility Level B (NF-B) [Skilled Nursing Facility (SNF)].
Member	A beneficiary enrolled in a CalOptima Health program.
Minimum Data Set (MDS)	A clinical screening system, mandatory by federal law for use in Long Term Care Nursing Facilities, that assess the key domains of function, health, and service use MDS assessment forms include MDS-HC for home care and the MDS 3.0 for LTC Nursing Facility Residents.
Nursing Facility	Refers to Nursing Facility Level A and Nursing Facility Level B.
Nursing Facility Level A (NF-A)	Known as the Immediate Care level. NF-A level of care is characterized by scheduled and predictable nursing needs with a need for protective and supportive care, but without the need for continuous, licensed nursing.
Nursing Facility Level B (NF-B)	Known as the Long-Term Care Nursing Facility level. NF-B level of care is characterized by an individual requiring the continuous availability of skilled nursing care provided by a licensed registered or vocational nurse yet does not require the full range of health care services provided in a hospital as hospital acute care or hospital extended care.
Skilled Nursing Facility (SNF)	Any facility, place, building, agency, skilled nursing home, convalescent hospital, nursing home, or nursing facility as defined in 22 CCR section 51121, which is licensed as a SNF by California Department of Public Health (CDPH) or is a distinct part or unit of a hospital, meets the standard specified in 22 CCR section 51215 of these regulations, except that the distinct part of a hospital does not need to be licensed as a SNF, and has been certified and enrolled for participation as a SNF in the Medi-Cal program.
Subacute Facility-Adult	A health facility that meets the standards set forth in Title 22, Section 51215.5, as an identifiable unit of a SNF accommodating beds including contiguous rooms, a wing, a floor, or a building that is approved by the DPH for such purpose and has been certified by the DHCS for participation in the Medi-Cal program.
Subacute Facility-Pediatric	A health facility that meets the standards set forth in Title 22, Section 51215.8, as an identifiable unit of a certified nursing facility licensed as a SNF meeting the standards for participation as a provider under the Medi-Cal program, accommodating beds including contiguous rooms, a wing, a floor, or a building that is approved by the DHCS for such purpose.