Respite / Over-Income to Home Care / Over-Income Transferring Guideline

Background:

The Respite / Over Income and Home Care / Over-Income program will be re-branded and named Home Care Percent-Based program. Support for the completion of this work requires:

- Deactivation of the Respite / Over-Income program in Aging & Disability (A & D) on April 18, 2024
 - o No new Respite / Over-Income care enrollments or co-pays can be created
- Home Care / Over-Income program will be re-branded to the Home Care / Percent-Based program in the beginning of July 2024. Exact date to be determined and conveyed closer to July
 - New Consumers, who are in a percent-based income bracket, will enroll in the Home Care / Over-Income care enrollment from April 18, 2024 to July 2024
 - New Consumers after the re-branding is implemented will then enroll in the Home Care / Percent-Based program care enrollment

This guidance should be implemented specifically in the following use cases:

- Respite / Over-Income Consumers re-assessed and identified as Percent Based after the program deactivation on April 18, 2024
- Proactive transferring from Respite / Over-Income to Home Care / Over-Income ahead of the July 2024 re-branding of Home Care / Over-Income to Home Care / Percent Based

NOTE: This guidance is specifically for the transferring from **Respite / Over-Income to Home Care / Over-Income**. If a consumer is transferring from Respite / Over-Income to another Home Care Program during a reassessment, continue to follow the routine methods for transferring to these programs and ensure the old co-pay is ended and the new co-pay with accurate care program and cost sharing amount is created.

Process:

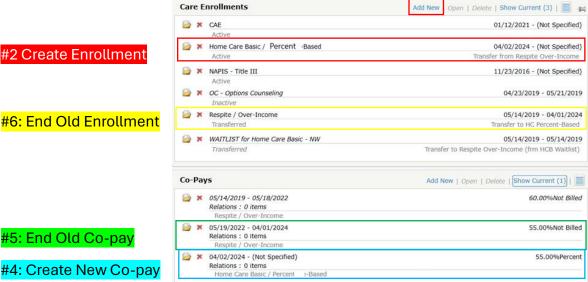
Two methods of transferring from Respite / Over-Income (ROI) to Home Care / Over-Income (HCOI)

- Manual Transfer (preferred method)
 - Additional user effort to complete steps
 - Ongoing Quality checks to make sure data entered is accurate
- Status Wizard Transfer Enrollment
 - Automated method to support transfers
 - Requires confirmation and double-checking work at the end to ensure accuracy

CAUTION: If your agency utilizes the care program within Activity and Referral (A&R) for reporting purposes, you will need to update the care program here manually. Status wizard will not update the A&R Care Programs.

Method 1: Manual Transfer

- **NOTE: Screenshots show Home Care / Percent-Based as part of Sandbox Testing. For this guidance you will enroll in Home Care / Over-Income. Steps color coded to match screenshots below **
- 1. Open Respite / Over-Income (ROI) consumer record
- 2. Add new Home Care / Over-Income (HCOI) enrollment
 - All dates effective second day of month transfer occurring
- Copy Care Plan from ROI to HCOI
 - Old care plan ends first day of month transfer occurring
 - New Care plan starts second day of month transfer occurring
- 4. Start new HCPB co-pay second day of month transfer occurring
- End ROI co-pay first day of month transfer occurring
- 6. End ROI enrollment as of first day of month(transfer to HCPB)
 - a. Status: Transferred
 - b. Reason: Transferred to Home Care / Percent Based
 - c. End Date: First day of month transfer occurring



#3: Copy Care Plan

ly Care Han							
iource Care	Plan						OK.
Start Date	6/28/2023						Cancel
End Date	4/1/2024						
Status Date	7/19/2023						
Status	Inactive						
Reason				*			
lew Care Pl	en						
Start Date	4/2/2024						
Find Date	10/1/2024						
Enrollment	Home Care Basic / Percent Based 4/2/2024 - (Unspecified)				24-	×	
Status Date	4/2/2024						
Status	Active			-			
Reason				•			
Service Mans			Coal Statements Diagnosis Enden				Select All
Worksheet Entries Primary Care Manager			3ournal Entries				Denelect Al

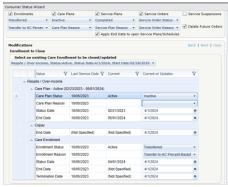
Method 2: Status Wizard Transfer

- **NOTE: Screenshots show Home Care / Percent-Based as part of Sandbox Testing.
 For this guidance you will enroll in Home Care / Over-Income**
- 1. Open ROI consumer
- 2. Start the transfer enrollment through status wizard
- 3. Identify information to impact enrollment that is closing
 - Default End Date and Default Status Date: First day of month transfer occurring

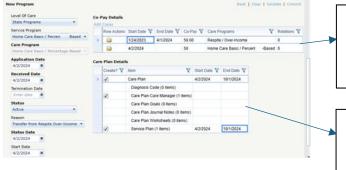


Note: Best practice to manually update service suspensions to ensure start date, reason, and program are accurate.

4. Identify Enrollment that is closing and confirm information is correct



5. Select the new enrollment, end old co-pay, add new co-pay, and confirm care plan dates



Note: Use folder on left to open old care plan and add end date. Do not change care program. Then click Add Copay to create new co-pay and match co-pay amount.

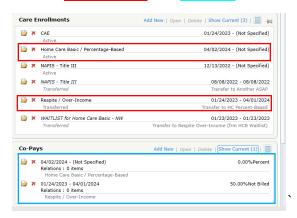
Note: Based on dates of current active care plan, if completing a transfer with a future date care plan may not show. If so, may need to complete care plan transfer manually.

6. Confirm Validation and commit changes



Note: Sometimes Validation pops up a notice rather than an error when transferring care plans. It may just be a notice on a service ending in the old care plan. Be sure to check the message if applicable before committing changes.

7. Review enrollments and co-pays to confirm accuracy



- 8. Review and update New Care plan accordingly.
 - a. Confirm all appropriate services carried over to new care plan
 - Ensure End Dates of Care plan align with when Annual Re-determination is due