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State of California—Health and Human Services Agency  
Department of Health Care Services



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GOVERNOR

CCT PL #15-002

Date: May 28, 2015

To: CCT Program Director

Subject: Transition Period for CCT Lead Organizations to Engage a Registered Nurse to Conduct Assessments and Review Care Plans with Transition Coordinators

**POLICY EFFECTIVE ON: 07/01/15**

## **PURPOSE**

This California Community Transitions (CCT) Policy Letter (PL) establishes a three month “Transition Period” for all CCT Lead Organizations (LOs) contracted with Department of Health Care Services (DHCS) to secure the services of a Registered Nurse (RN). DHCS expects CCT LOs to use this time to engage and train a RN to provide clinical expertise in the review of CCT transition and care plans. Engaging a RN in the CCT transition and care planning process is one of the ways DHCS is working to improve the quality and sustainability of CCT transitions. Care Plans that effectively meet consumers’ needs work to ensure post transition continuity of care and protect the health and safety of our beneficiaries.

## **BACKGROUND**

DHCS contracts with a variety of provider types with different fields of expertise. For this reason, DHCS understands that CCT LOs that do not currently have a RN on staff require time to hire, or contract/establish a working relationship with a RN to conduct the clinical assessment and participate in the development of both the initial and final CCT Transition and Care Plans. DHCS contracts with CCT LOs to identify eligible Medi-Cal beneficiaries to transition from long-term inpatient facilities to the community, conduct comprehensive assessments, and develop care plans that ensure safe and sustainable transitions.

## POLICY AND REQUIREMENTS

- All existing CCT LOs under contract with DHCS at date of this PL shall have three months from the date of this PL to secure the services of a RN. This three-month period shall be referred to as the “Transition Period”. All CCT LOs with contract start dates after July 1, 2015 shall have secured the services of a RN at contract start date.
- At the end of the Transition Period, CCT LOs must have hired, contracted or established a legal working relationship with a RN, which may include but not is limited to, the following arrangements:
  - Contracting or establishing a memorandum of understanding (MOU) with a Medi-Cal Managed Care Plan to leverage a RN;
  - Hiring a RN as an employee of the organization;
  - Contracting with a RN as an independent contractor; or
  - Contracting with a neighboring CCT LO, or non-CCT Lead Organization, for RN services.
- CCT LOs must submit the following information to DHCS for review and approval. All information must be submitted to the CCT email inbox<sup>1</sup> before the end of the Transition Period.
  - ✓ The RN’s Nursing Credentials – California Board of Registered Nursing License, including license number, name, expiration date, and ACTIVE status.<sup>2</sup>
  - ✓ Verification of Employment (VOE) or *Contractual/MOU Relationship Acknowledgement Letter* signed by the CCT LOs Chief Executive Officer and the RN.
- A licensed RN must be responsible for all medical, functional, and cognitive needs portions of the Consolidated ALW-CCT Assessment tool for a beneficiary, and must certify via signature that the assessment accurately identifies all medical, social, and psychosocial needs of the beneficiary.
  - Portions of the Assessment related to social need can be conducted by trained Transition Coordinators, but the RN must still review and approve the Assessment as a whole.

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<sup>1</sup> [California.CommunityTransitions@dhcs.ca.gov](mailto:California.CommunityTransitions@dhcs.ca.gov)

<sup>2</sup> Please note that DHCS will run all RNs through the Office of the Inspector General (OIG) Exclusion Database to verify they are not on the Medicare / Medi-Cal exclusion list.

- The purpose and role of the licensed RN is to help ensure that the Care Plans address a beneficiary's needs to help mitigate risk and facilitate sustainable transitions.

**Please Note:** DHCS clearly states that the LO is ultimately responsible for making the final decision to transition a beneficiary from an inpatient facility to the community, and that the RN is not solely responsible for the decision. The LO must consider ALL applicable factors (beneficiary preference, the Assessment, Initial / Final Transition and Care Plan, and housing arrangement) to determine if a transition is sustainable and all shall be submitted for DHCS review.

## **EXEMPTION CRITERIA**

DHCS recognizes that there may be other clinical and service experts familiar with the Medi-Cal nursing facility population. Therefore, DHCS is providing an exemption to non-RN staff within a LO's organization who are able to meet ALL of the criteria included in the Competency Matrix attached to this PL #15-002. Exemptions are made on an individual basis and do not exempt all persons staffed by an LO.

LOs seeking an exemption to use non-RN staff to conduct assessments must complete the last column in the matrix titled "Demonstration of Competency" to identify how the individual meets each requirement. The LO must submit one Competency Matrix with completed "Demonstration of Competency" column to the CCT email inbox for each individual for whom the LO is requesting an exemption.

In addition, LOs must submit the following documents with the Competency Matrix:

- Individual's Résumé, which must include:<sup>3</sup>
  - Highest level of education
  - Professional licenses/certifications
- Duty Statement
- Organizational Chart identifying the individual's position within the LO

Exemptions will need to be renewed for the next CCT LO Contract, which will have a start date of January 1, 2017. DHCS will not renew contracts with organizations that do not meet the RN, or RN-exemption, requirements.

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<sup>3</sup> Please note that DHCS will run all exemption requests through the Office of the Inspector General (OIG) Exclusion Database to verify they are not on the Medicare / Medi-Cal exclusion list.

## **GUIDANCE**

DHCS understands that requiring LOs to incorporate RN services into their existing CCT program may pose challenges for their organizations. Accordingly, DHCS is allowing three months of Transition Period for LOs to incorporate RN services into their practice. DHCS will assist CCT LOs in training new RNs and transition coordinators (TCs), and will provide a list of organizations with RNs on staff and Independent Practice Nurses who are familiar with the Medi-Cal population. DHCS envisions the RN and TC working together with the consumer to create a plan of care and transition that is person-centered, attainable and sustainable. It is essential for LOs to understand the medical and long-term services and supports needs of Medi-Cal beneficiaries who meet CCT eligibility criteria and who, without the effort of the CCT LO, would not have the opportunity to return to the community. CCT Medi-Cal beneficiaries are not individuals who would normally be discharged following a short-term rehabilitation stay. Successful transitions for this population require:

- Identification of beneficiaries who can be cared for in their own homes or community settings with appropriate services and supports in place;
- Comprehensive care planning that addresses their need for post transition medical services and long-term services and supports;
- Regular communication between LO staff, beneficiaries, physicians, and DHCS Nurse Evaluators (NEs);
- Professional oversight and assurance of post transition health, safety, and continuity of care of the beneficiary; and
- An understanding of the liability assumed by the LO facilitating the transition.

## **QUESTIONS**

For further questions about this PL, please contact Joseph Billingsley, interim DHCS CCT Project Director, at (916) 322-4766, or by e-mail at:

[Joseph.Billingsley@dhcs.ca.gov](mailto:Joseph.Billingsley@dhcs.ca.gov).

Sincerely,

*(Original signed by)*

Rebecca Schupp, Acting Division Chief  
Long-Term Care Division

Enc: RN Competency Matrix