



NF: Level of Care Checklist and Submission Tips

Council on Aging (COA) authorizes Level of Care (LOC) requests for individuals enrolled in traditional Medicaid in Butler, Clermont, Clinton, Hamilton and Warren counties. To process your request as quickly as possible, the following is required:

- ☐ Resident information, including: 1) full legal name, 2) date of birth and 3) Social Security number. (via either the Form 3697 or the COA LOC Request Cover Sheet and relevant MDS sections-see below)
- ☐ LOC effective date ("Assessment Date" on the Form 3697)
 - Print the date clearly and include day, month and year. For example: 1/1/2017.
 - **We cannot authorize future transfer dates. Use today's date or a past date.**
- ☐ LOC request (skilled or intermediate) and rationale
 - **Provide rationale for a skilled LOC request. Include information about the type and frequency of any skilled services or therapies the resident receives, and specifics as to why the resident is unstable.**
- ☐ Minimum Data Set (MDS)
 - Send sections A,G and I of (MDS) - if not submitting a Form 3697.
- ☐ Physician signature and date
 - Cover sheet signed and dated by an MD, DO, CNP or PA.
 - Please note: signer must also date their signature. (Must be signed on or after the LOC effective date.)
- ☐ Date(s) of admission to prior nursing facility(s) (if individual transferred from another NF)
- ☐ Date of admission to current NF
- ☐ Medications, treatments and required medical services as of the requested LOC effective date
- ☐ All relevant PASRR documentation, including hospital exemption and any Level II determinations, if applicable

Tips for successful submission

Find additional tips and information on our website: www.help4seniors.org. Use the Nursing Home Pre-Admission Review link in the Quick Links box on our homepage.

- **Choose the right admission date**

We need to know where the resident was admitted from and the original admission date. The readmission date is not the original admission date. If the resident was admitted from a hospital, indicate if they had resided at another nursing facility prior to the hospital stay.
- **Understand who needs an LOC**

LOC requests are required for Medicaid fee-for-service residents. LOCs are not required for: 1) those enrolled in a Medicaid managed care plan; 2) those enrolled in Hospice; or 3) for bed-hold or co-pay days. In these cases, submit a Form 9401 via Provider Gateway for an LOC exemption.
- **Send the right information at the right time**

Send only what is on the checklist above. We will contact you if additional information is needed.
- **Make sure COA knows how to reach you**

We may need to contact you about your LOC request. Please remember to include your contact information, including phone number, fax and email address.
- **Fax completed request to 513.810.3360.**

Preserving Independence, Enhancing Quality of Life

Council on Aging is designated by the state of Ohio to serve older adults and people with disabilities within a multi-county region. We are experts at helping people with complex medical and long-term care needs, offering a variety of services via publicly-funded programs. Our mission: Enhance lives by assisting people to remain independent through a range of quality services.