

## HOME AND COMMUNITY BASED SERVICES POLICY MANUAL

### **DIVISION OF SENIOR AND DISABILITY SERVICES**

7.00 APPENDIX 7

# **OMBUDSMAN SMH/MFP REFERRAL INSTRUCTIONS**

The Missouri Long-Term Care Ombudsman Program (LTCOP) recruits and trains volunteers that visit residents in all types of long-term care facilities. These volunteers may interact with residents in Skilled Nursing Facilities (SNF) that express a desire to return to the community. When that happens, the volunteer contacts the Regional Ombudsman Coordinator (ROC) and a Show-Me Home (SMH)/Money Follows the Person Demonstration (MFP) referral is made on the resident's behalf.

### **INSTRUCTIONS:**

<u>Fax To Section</u> is completed by the ROC to include their name, telephone and fax numbers, and the date completed.

<u>Referral Section</u> is completed by the ROC:

- Enter facility name, address, and telephone number.
- Enter resident's name, date of birth, SSN, and DCN.
- Enter date resident entered the facility.
- Enter resident's health conditions and other information that could impact the ability to return to a community setting. Additional pages may be attached, if necessary.

<u>Disposition Section</u> is completed by the SMH Regional Coordinator (SMH/RC) **within 30 days** of the date of referral:

- Indicate if resident is eligible and date of enrollment for SMH services.
- Indicate if resident is not enrolled in SMH and check all applicable reasons.
- Indicate if participant is approved for MFP **but does not meet** level of care (LOC) to receive Home and Community Based Services (HCBS).
- Enter the SMH/RC's name and telephone number.

<u>Comments</u> may be entered by the ROC and/or the SMH/RC as necessary. Information could include details on the resident's community support network, resources needed, potential challenges to transition, etc. Additional pages may be attached, if necessary.

#### **DISTRIBUTION:**

Upon completion by the ROC, the referral is faxed to SMH oversight staff in Central Office to be forwarded to the appropriate SMH/RC.

At disposition, the SMH/RC shall fax a copy back to SMH oversight staff, and ensure a copy is uploaded to the participant's case record in the HCBS Web Tool, when applicable.

SMH oversight staff in Central Office shall provide a copy of the completed form to State LTCOP staff.

State LTCOP staff shall provide a copy of the completed form to the ROC.