



Making an Impact.

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**Masspro MASSHEALTH 2007-3
August 2007**

TO: President/Chief Executive Officer/Administrator
Director, Case Management/Quality Management

FROM: Beth Lanigan, RN, Director of MassHealth Operations

SUBJECT: **Change in MassHealth Conversion review process**

PROVIDERS PERTINENT TO THIS LETTER: MassHealth Chronic and Rehabilitation Hospitals

Background

The conversion screening process for patients that do not have MassHealth in place is a two-tiered process. First, upon conversion, all Chronic and Rehabilitation facilities initiate the screening by requesting a "one day" screening number for all patients who were admitted to their facilities with a status of MassHealth pending. Second, when the patient becomes eligible for MassHealth the facility must submit the entire medical record to Masspro for a review of the episode of care from the true conversion date through the current date.

Masspro acknowledges this process is administratively burdensome to the facilities and has worked with MassHealth to develop a new, more efficient process for conversion reviews.

What does this mean?

Effective September 1, 2007 the conversion screening review will be a one step process. The one-day screening number has been eliminated. The Chronic/Rehab facilities will submit the entire medical record to Masspro for review after MassHealth eligibility is confirmed. Masspro has developed a form (attached), which enumerates **ALL** the documentation that must be submitted to initiate the conversion review process. This form **MUST** be attached to the medical record submitted to Masspro for review. The absence of this form will /could negatively impact the review process.

In an effort to ensure a smooth transition, Masspro would like to invite all participating facilities to a provider education forum on September 13, 2007 from 10am to 12pm at Masspro's corporate offices, 245 Winter Street, Waltham, MA 02451.

If you have any questions regarding this change or to RSVP to the provider education forum please contact either:

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OR

Paula DePalma, Manager
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Masspro MassHealth
Chronic /Rehab Conversion Review Request

Telephone 1-800-554-5127

Fax 1-800-752-6334

All medical records submitted for conversion review MUST include this completed form.

Date of request: _____

Facility Name: _____

Facility provider number: _____

MassHealth Member Name: _____

Legal Guardian: _____

Relationship: _____

Address if different from member: _____

RID#: _____

Admission Date: _____

Conversion date if different from Admission Date: _____

Discharge Date: _____ OR Still Inpatient? _____

Date of MH eligibility: _____

Primary Payor if other than Mass Health: _____

Requested Level of Care:

Level of Care (HLOC/AD)	FROM	THROUGH

If AD LOC requested please submit SNF search efforts:

Additional Comments:

Facility Contact Name and Telephone Number: _____

Physician Contact Name and Telephone number: _____