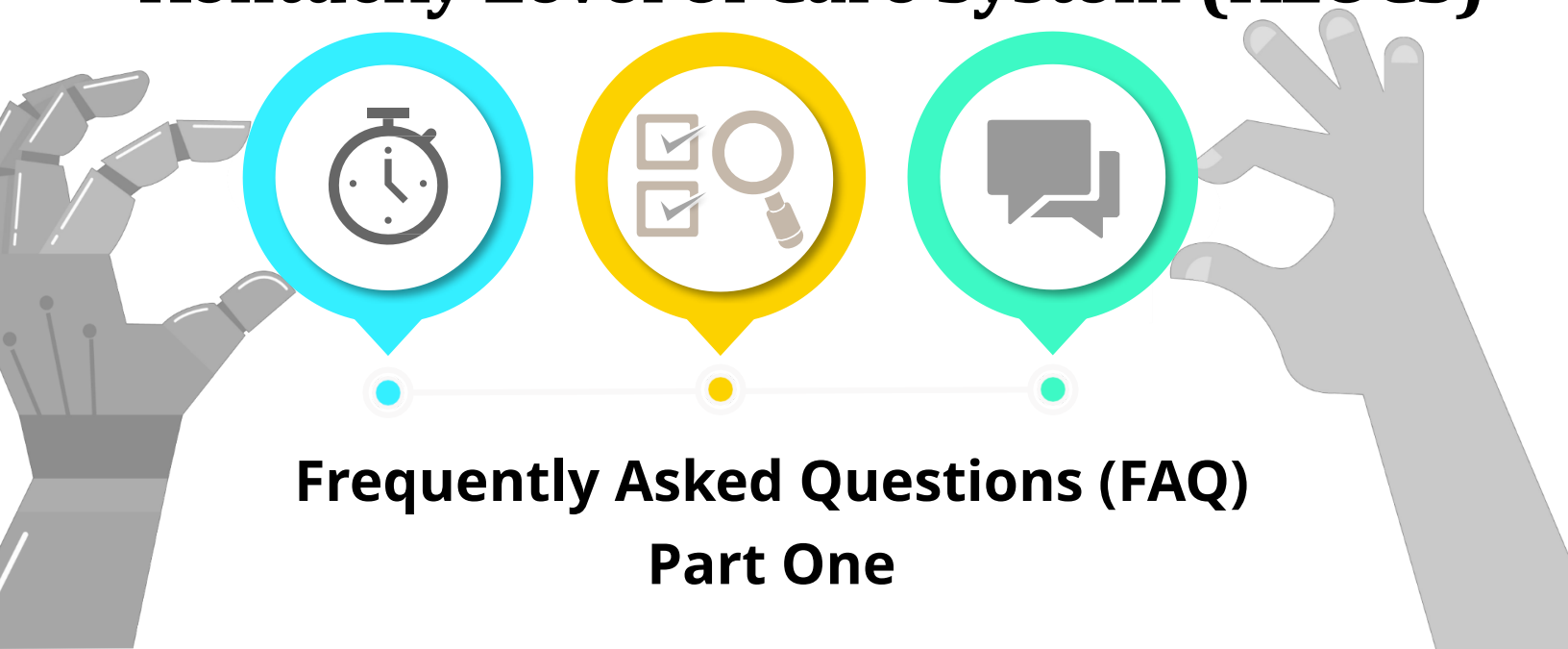


# Kentucky Level of Care System (KLOCS)



## Frequently Asked Questions (FAQ) Part One

# KLOCS Webinar FAQ – Part One

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# KLOCS Webinar FAQ – Part One

PLEASE NOTE: This document serves as Part One of the FAQ and is designed to answer questions submitted by Providers during the Kentucky Level of Care System (KLOCS) Webinars.

## Training Material Questions

1. Where can I find the recorded webinars for Part 1 & Part 2, system demonstration videos, KOG guides and the Training User Guide?	<a href="https://chfs.ky.gov/agencies/dms/provider/Pages/KLOCS.aspx">https://chfs.ky.gov/agencies/dms/provider/Pages/KLOCS.aspx</a>
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## General Kentucky Online Gateway (KOG) Questions

1. How do we obtain access to KLOCS?	Send your name, provider name and email address to KLOCSOrgAdmin@ky.gov
2. Where can I find the process to download the Token for logging into KLOCS?	<a href="https://chfs.ky.gov/agencies/dms/provider/Pages/KLOCS.aspx">https://chfs.ky.gov/agencies/dms/provider/Pages/KLOCS.aspx</a>
3. Does each employee need a KOG account or just one KOG account per facility?	Everyone needs their own KOG account in order to access KLOCS.
4. How long until we can access KOG & KLOCS?	Once you have submitted the request to DMS, it will be two to three business days until your Organization Administrator receives their invitation for KOG.
5. Can there be more than two Organization Administrators for KOG?	No, there are only two Organization Administrators per facility. If one leaves then another name may be requested. Only DMS can grant Organization Administrators access.
6. Who is typically the Organization Administrator at the nursing facilities? Is that typically BOM?	That would be the Nursing Facility's decision.
7. If you have two Organization Administrators, are we able to remove a name and add a new Organization Administrator?	Only DMS can add and grant an Organization Administrator access. If one is gone then another name may be requested by sending an email to DMS (KLOCSOrgAdmin@ky.gov).
8. If I work at more than one Nursing Facility (NF), am I able to use the same email ID to access all of my facilities?	As long as the NFs do not already have two Organization Administrators.
9. How many user accounts may we have per facility?	DMS is not aware of a user account limitation. However, there is a limit of two Organization Administrators per facility. DMS onboards the two Organization Administrators, once

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	they have been granted access, they may invite who they need to.
10. We have two different ICFs under one agency, that has 2 different people responsible for LOCs/admissions/discharges. We requested for both to be our Organization Administrators. Will both people get notifications to set up a KOG account?	Yes, each requestor will receive a DMS/KOG response.
11. The Organization Management Tile will also NOT appear on the KOG until August 3 <sup>rd</sup> ?	The tile will be KLOCS. The Organization Administrator should receive an email stating they have access and may invite other users before go-live. However, you will not be able to access the KLOCS application until August 3 <sup>rd</sup> .
12. How do Organization Administrators grant access to employees who will need to fill out KOG forms?	The KLOCS Organization Administrator's email invitation will include instructions on how to invite other facility users.

# KLOCS Webinar FAQ – Part One

## General KLOCS Questions

1. Who should be entered in KLOCS?	<p>If you are admitting a member into your facility, and by your calculation the member is currently Medicaid eligible and/or will be Medicaid eligible within the next 12 months, enter the member into KLOCS. If the member is not eligible at the date of application, their application will be held as a 'pending eligible' status. KLOCS will retain members in this status for up to 365 days from the date the application is entered.</p> <p>If you are admitting a member into your facility, and by your calculation the member will <u>not be Medicaid eligible within 12 months, please do not enter the member into KLOCS</u>. As stated above, KLOCS will only retain a 'pending eligible' application for 365 days from the date the application is entered. If the member applies and receives Medicaid following the 'pending eligible' timeframe, (365 days from admission) the facility will be required to re-enter the member into the KLOCS system.</p>
2. Does the online LOC application process start for new admissions on or after August 3 <sup>rd</sup> ?	On August 3 <sup>rd</sup> . After August 3 <sup>rd</sup> , all LOC applications must be completed within KLOCS.
3. Are there email alerts? Or does someone need to log into KLOCS every day to view tasks?	There are no email alerts as all alerts display within KLOCS. All facility tasks are displayed on the Dashboard screen. All facility alerts and correspondence are found in the Message Center on the KLOCS Dashboard screen which is not viewable unless users log into KLOCS.
4. How long before admission can I submit a LOC application?	As a rule, a LOC is only valid for one year. It's best practice to not submit it any longer than a year prior to admission. Additionally, all individuals requiring a PASRR Level II are required to have the determination prior to admission.
5. What does partial match mean?	A partial match means someone similar with the same information has been found, DMS will have to determine if it is the correct person.
6. Is there going to be a help desk specifically for KLOCS?	Yes, starting on August 3 <sup>rd</sup> .
7. How will Medicaid Pending cases be handled with respect to LOC applications in KLOCS?	There is no connection between Medicaid cases and LOC applications, these two are separate. The Medicaid will not approve without the LOC.

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8. Will I be able to print off a blank LOC application to enter information to submit?	No, starting August 3 <sup>rd</sup> , all LOC applications must be completed in KLOCS. Providers are only able to print submitted LOC applications after being completed.
9. Will this apply to Waiver providers and participants?	Waiver LOC assessments are completed in the Waiver Portal NOT KLOCS.
10. Are Medicaid applications completed by the family related to KLOCS in any way?	No, an application for Medicaid eligibility is different from an application for an LOC.
11. How is it going to work when a patient gets Medicaid retro-active?	A Medicaid application is different from KLOCS and the Level of Care.
12. Are MAGI residents entered in KLOCS?	It depends on whether they need an LOC or not.
13. Will I be able to start the LOC application process and go back in and edit it daily before it's due?	Yes, you can save and exit the application up until you hit the submit button.
14. Since I will no longer receive paper approvals, what do I provide for Medicaid eligibility when a worker states there is no LOC on file?	You will have the application number from KLOCS that may be used to confirm the LOC to the eligibility worker.
15. How long does DMS have to complete the Partial Match Review task?	24 business hours. Please note, Providers are able to continue with LOC applications even with a partial match.
16. Will tasks appear on the general dashboard message center or do I have to look on the individual's message center for tasks?	Task display on the Dashboard screen. You may also view task specific to the Individual by navigating to their Individual Summary screen & clicking "View Task".
17. On the paper LOC, I was required to have signatures by an LPN/RN. Is this requirement the same in KLOCS?	The LPN/RN signature is no longer required.
18. To confirm, this is not used for Aetna, Anthem, Humana, Passport or WellCare Medicaid Contract Organizations only traditional Kentucky Medicaid patients?	Correct
19. Please confirm, is all this information and work completed within KLOCS is for traditional KY Medicaid only not the MCOs, correct?	Correct

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20. There's a dead period after 6pm on 7/28 so if we had an admission on 7/28 or after do, we need to fax the LOC & submit it online on 8/3 to prove we sent it timely for it to backdate to the admission date? Otherwise if we only have 3 calendar days & submit it online on 8/3 it would only go back to 7/30?	For each admission requiring a date during the blackout period: Please use KLOCS to submit the applications. Put in the date you can and complete the submission. Then please send an email to KLOCSorgadmin@ky.gov containing the application number, and the admission date during the blackout period. The email subject line should read "Blackout Admission Date"
21. Can you provide more clarification to the Dead Period and what facilities should be doing currently?	For each admission requiring a date during the blackout period: Please use KLOCS to submit the applications. Put in the date you can and complete the submission. Then please send an email to KLOCSorgadmin@ky.gov containing the application number, and the admission date during the blackout period. The email subject line should read "Blackout Admission Date"

### LOC Application Intake Process in KLOCS Questions

1. Can LOC still be started on payer change and not admission date?	It should be admission date.
2. Prior to KLOCS I kept my fax confirmation, once I submit the LOC application in KLOCS, will I be able to print out a copy of proof?	Yes, if your system allows.
3. Are multiple users able to work on the same LOC Application?	If all the users are associated to the same facility, yes.
4. When do we start a LOC on payer change and not admission date due to high volume of planed short-term rehab to return home or not being in a Medicaid certified bed?	The date you submit the LOC application, plus or minus 3 days, will be the admission date for purposes of Medicaid regulations.
5. To submit a LOC application, do we go to the DMS website?	No, the DMS webpage holds all training material & is different from KLOCS which does not go live until 8/3. KLOCS is where you submit LOC applications once you have access to KOG.
6. Someone will have to be responsible for these on Saturday and Sundays?	Yes, KLOCS will be available 24/7.

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7. If I start the LOC application, save and exit, and someone else from my organization logs in, can they complete the remaining sections I started?	Yes
8. Admissions completes our PASRRs now and our DON completes our LOC. If one person starts can the other finish?	Yes, but PASRR tasks won't be triggered until the LOC application is submitted.
9. Is the Legal Representative their POA, Guardian?	Legal representative would be something like Parent, POA or Guardian - not an Authorized Representative.
10. How many days do I have to complete the LOC application from the date of admission?	No more than 3 <u>calendar</u> days. Please remember that all PASRR determinations are required PRIOR to admission. This task is not triggered until you submit the LOC application. The CMHC determines PASRR and LOC. LOC start date cannot be prior to the date the CMHC makes the determination.
11. Will the requirement still be 7 business days to submit?	No, 3 <u>calendar</u> days. Day 1 of the 3 starts the first day after admission.
12. If a person is admitted on Friday afternoon, if the LOC is completed on the following Monday, would this be considered within the 3 days?	Yes, Day 1 of the 3 starts the first day after admission (in this specific scenario since the person was admitted on Friday, the 1 <sup>st</sup> day would start on Saturday).
13. So as far as the 3 calendar days, if they are admitted on Friday evening, does Friday count as day one and is due on Sunday? Or will Monday count as the third calendar day?	No, Saturday would be considered Day 1. Monday would be the 3 <sup>rd</sup> calendar day.
14. Does the 3 calendar days consider holidays? Meaning does the holiday count as day 1 if the person is admitted on Christmas day?	Yes, KLOCS considers Holidays. For this specific scenario, KLOCS would not count Christmas Day, the following day would be considered Day 1.
15. Saturday and Sunday count as two days correct or is it just holidays that count?	It's 3 calendar days, Saturday and Sundays do count, holidays do not count. If admitted on a Friday, the deadline to submit LOC application will be Monday unless the Monday is a holiday then Tuesday.
16. If someone admits on Friday and Monday is a holiday, will the	No, Holidays are taken in consideration. In this scenario, because Monday is a holiday, Tuesday would be the 3 <sup>rd</sup> day.



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LOC be late if it's submitted on Tuesday?	
17. Does admission day count as day 1?	No, the following day counts as day 1. Example: If admission is on Tuesday, day 1 would be Wednesday.
18. Are we required to keep a paper copy of the LOC application for the resident's chart?	That would be the choice of the facility
19. Can you get a LOC Determination prior to admitting a resident to your facility if they are currently at a hospital or nursing home?	You may submit an application prior to the admission just not any later than 3 calendar days after the admission date. For PASRR Level II referrals, the LOC application and decision must be completed prior to admission.
20. I do not have to complete any clinical information as I did before on paper LOC application?	The 726A is required. Other than that, the only requirement is height/weight. All other fields are optional but could be beneficial to enter any information retrieved.
21. After KLOCS go-live, what will we do with ancillary services such as oxygen and therapy? Will we still call these in, or will there be a place in this system to enter them?	Ancillary service prior authorizations will not change. They will be dealt with the same as you do today.
22. What if the onset date is prior to 2015 for a diagnosis? Must we use that date as earliest date?	Yes, you may use that date. Please document that in the comments box.
23. What if the diagnosis onset date is unknown?	Follow that same process that you followed before the implementation of KLOCS.
24. What happens if you start an application early in the day for someone that is coming later that same day and then they don't come?	You have the option to withdraw if you haven't submitted on the Dashboard screen, under the Applications table.
25. If the document file needed to upload is too big, is there a way to upload it in two parts?	Documents cannot be greater than 5MB. Providers would have to save the document twice (split and save as doc1 & doc2) and then upload each separately by clicking "Attach Another Document" on the Document Review screen.
26. I have been having a problem getting a correction on the dates of a LOC for an LTC resident for months now. How will we get that corrected if we are receiving a LOC with incorrect information?	KLOCS gives the providers the opportunity to put in the dates correctly from the beginning. If a mistake is made there is a process for a PRO user to correct.

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27. Can LOC's be started on payer change for facilities that have a high volume of short-term rehab that plan to return home. Particularly if they aren't seeking a potential Medicaid application until after they are no longer being covered by Medicare or a replacement policy and Medicaid is not current. Or what if they aren't in a Medicaid licensed bed, can a LOC be started after they move to the Medicaid licensed bed?	A provider may submit a LOC application for anyone that may need Medicaid or has Medicaid.
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### KLOCS MAP Forms Questions

1. Does this replace faxing in the MAP forms?	Unless requested there will no longer be any forms to fax. However, there will be certain forms that have to be uploaded in KLOCS.
2. Does this eliminate the MAP 24's?	Yes
3. Will this also replace the MAP 24's used for admission and discharges of residents?	Yes
4. Does the H&P and MAP-350 have to be uploaded within 3 days also?	Yes within 3 calendar days, if they are required for your LOC application.
5. Since the MAP-350 is required annually, will Providers also have to upload the MAP-350 into KLOCS each year?	DMS plans to obsolete the MAP 350 annual renewal before the end of 2020.
6. How many days before admission to a nursing facility can the MAP-350 be filed? Does the MAP-350 need to be submitted on the date of admission?	The MAP 350 will be uploaded into the system when the application is made. The MAP 350 needs to be submitted when the LOC application is submitted.
7. Will this take place of the MAP 350 for ICF?	Not when KLOCS goes live. DMS anticipates the paper form will be obsolete in the near future.
8. Are the MAP 350 forms to be uploaded in KLOCS?	They will be required for a period of time. DMS expects to obsolete those forms in the future.
9. For individuals who are unable to sign the MAP-350, will verbal accepts from the individual or family continue to be accepted?	If it is accepted today, then it should be accepted in the future if documented.

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10. Do we have 3 days to turn in the MAP 350 as well? Do we turn in everything at the same time?	Yes, everything must be submitted at the same time.
11. How many days do I have to complete the MAP 726A from the date of admission?	3 calendar days.
12. Is the onset date the date of admission into facility?	LOC application submitted less than 3 days after admission date: admission date more than 3 calendar days: application date.
13. Will the clinical information be less with KLOCS or will it be the same as the current 7-page document?	It is the same, just going from paper to electronic with the implementation of KLOCS.
14. Does PASRR still need to be done prior to or on the admission date?	Yes
15. Are PASRR'S that are required prior to admission to be done in KLOCS or on paper like normal?	Starting August 3 <sup>rd</sup> , everything is to be completed electronically only in KLOCS.
16. Is an physicians' electronic signature acceptable?	Yes
17. Is a Nurse Practitioner's signature acceptable for where Physician signature is requested?	Yes
18. How do we upload a signed copy of the H&P in KLOCS?	You will have to save a PDF version of the signed H&P form on your computer and then upload the PDF in KLOCS on the Document Review screen.
19. If the facility doctor does not round before three calendar days to do an H&P can we submit the hospital discharge?	If it is signed and has the H&P information included.
20. Does the H&P have to be signed by the facility's admitting physician or can it be the signed H&P from the hospital?	Either one if it is signed by the medical provider.
21. The MAP 409 PASRR will now only be completed in KLOCS instead of by paper?	Yes, that is correct.
22. Does entering PASRR into KLOCS eliminate the need to complete a MAP 409? If so, can I print the complete PASRR in KLOCS for member record?	Yes, this will serve as the PASRR Level I. Yes, you can print or save the document from KLOCS.

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23. Will we still have local PASRR coordinators?	Yes, they will remain the same.
24. Will the PASRR no longer be required to be completed before or on the day of admission since we now complete with the LOC and have 3 calendar days to do so?	The PASRR requirements are not changing. PASRR determinations are still required prior to admission.
25. Is the PASRR required prior to admission or at time of admission?	The PASRR has always been required on or before the day of admission. That is a federal policy.
26. We are critical access and at present are not required to complete a PASRR Level I, will this change?	KLOCS changes how the process works but not much of the policy. If you are not required to complete a PASRR I today, you will not be required to do so in KLOCS.
27. If our facility is not doing online PASRRs, do we not need to upload the PASRR with the H&P and MAP 350?	The MAP 409: PASRR Level I is a part of the application intake screens within KLOCS. Providers are required to complete the MAP 409 in order to submit a LOC application for all NF's with the exception of swing beds.
28. I did not see questions regarding ADL functioning. Do these ADLs need to be evaluated and submitted prior to submission?	Yes
29. Is the hospital exemption form still going to be required? If so, how will it be submitted?	Hospital exemption is still an option. If you select hospital exemption on the MAP 409: Level I screens, KLOCS will require that you upload the completed MAP 4092.
30. We also had the Map 409 and 4095 on the hard chart for LOC audits, will we print something out from KLOC to put on the hard chart?	Yes, that is the significant change and was covered in the training section "Request Level II". Starting August 3 <sup>rd</sup> , these will now be screens completed within KLOCS and will no longer be a form.

### Institutionalized Hospice (IHP) LOC Application Questions

1. Is the Nursing Facility considered the IH Provider?	No, the IH provider is a Hospice provider.
2. What does HS mean before HS PASRR Level I?	Hospice
3. If you have a resident in a facility as LTC then elects Hospice, is a new LOC application required?	The NF will have to complete the MAP726A

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4. Is this taking place of the MAP forms that we use for Hospice patients?	The MAP forms for Hospice will need to be uploaded as the regulations require a patient/member signature.
5. If a Long-Term Care facility admits a hospice resident, is the facility responsible for completing the LOC application or Hospice?	The Hospice provider will initiate the LOC application process.
6. Are the Hospice applications the same as the Medicaid MAPs?	The MAP forms are part of the application process. They are uploaded in KLOCS.
7. Does institutionalized hospice patients have to have Medicaid before the LOC application is completed?	The Hospice provider must have a signed election form before the LOC application process is initiated.
8. If a Hospice patient is going from the home setting and transferred to NH or inpatient unit, do we have to initiate the application as a Hospice provider?	The Hospice Provider will need to initiate the process if the member is being admitted to the NH only. Inpatient settings are not considered institutions for purposes of Medicaid.
9. Is this only for Hospice patients that have Medicaid as their primary insurance? If they have primary Medicare to cover Hospice services with Medicaid as secondary, does an LOC application have to be created?	If the provider plans to bill Medicaid at any point of the member's NH/Hospice stay, then yes an application should be initiated in KLOCS.
10. How would we handle retroactively eligible members? For example, if 2 months after a member admitted to hospice, the member becomes eligible for Medicaid, would the hospice still request the LOC through KLOCS?	Hoping this would be the exception to the rule and we have a process in place for exceptions.
11. If you have a resident that is in the facility already and then at some point in the future, they elect to go on Hospice; what steps would need to be taken?	After KLOCS is implemented, the hospice provider would need to coordinate with the NF as the NF needs to discharge the resident one day prior to the date of admission into Hospice.
12. If a Hospice Resident is admitted to our NF, Hospice is the one that starts the LOC for the NF? What if Hospice is late on submitting this for the NF?	The hospice provider will not be paid for the days they provide services while the resident is in your facility.

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13. What if a resident is already in a SNF and goes to Hospice care?	The hospice provider will coordinate with the NF to enter a discharge date and the hospice admission dates.
14. Is there going to be a timeline for hospices to enter their information. A lot of times the patient is in the NH when they admit but they do not have Medicaid on the day of admission, but will get Medicaid coverage retro'd back to the hospice admission date, how will that be handled as it will not be entered timely?	Hospice has the same time requirement as all other facilities.

### Intermediate Care Facility (ICF) LOC Application Questions

1. Is it required that we complete a PASRR?	This system does not change the PASRR regulations or workflow. If you don't complete a PASRR today, you will not be required to do so in KLOCS.
2. How does this work if you are a private ICF and someone who is already in your facility goes into Hospice (they are not transferred nor admitted. They already live here, and Hospice becomes involved in care)?	The ICF will coordinate with the Hospice provider to discharge them from the ICF one day prior to the Hospice admission date.

### Discharge, Transfer and Overlap Questions

1. What is the expected timeframe to complete a discharge request?	It's practical to discharge on the date of discharge.
2. What kind of forms would need to be uploaded in the DC section?	For NF, whatever paperwork you feel necessary. For hospice, there are termination forms that have to be completed.
3. Do you only discharge the patient out of KLOCS when you DO NOT expect their return?	Correct
4. We have a 30-day bed hold policy. If the resident has been in the hospital and we need to discharge due to bed hold, however, we do anticipate the resident to return, we do NOT discharge - is this correct?	There are 14 bed hold days per calendar year per Medicaid policy. A new LOC has to be completed if a member discharged and then returns.



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5. If a resident goes to the hospital, is this required a discharge?	If a resident goes to the hospital but you expect them to return you do NOT want to discharge them in KLOCS.
6. If a resident within the facility is discharged from hospice, how do we handle this?	Coordinate with the hospice provider to have them discharge one day prior to readmission into the NF.
7. If a resident discharged with anticipated to return, should the facility do another LOC or update?	If the resident is anticipated to return, please do NOT discharge them in KLOCS.
8. Would ICF have to complete the Discharge screen when someone is discharged from Medicaid per policy of allowed bed hold days of being out of the facility for example in the hospital over 14 days? If so, then will we have to go back in and readmit them with a new LOC application or will it populate with their old LOC?	If a member is discharged, a new LOC will have to be entered
9. If the patient is hospice and moves to new NF without discharging hospice, would we need to do a transfer in KLOCS?	The NF would not transfer the resident as they are admitted to Hospice in KLOCS.
10. Does transfer to another facility include hospital transfers?	You would not transfer to a hospital as there is no LOC required for hospital admission.
11. With facility to facility transfer, can the receiving facility initiate the transfer or only the facility sending the person?	Only the transferring facility because only that facility can access the existing LOC information.
12. Occasionally a resident will discharge home with no intent to return to the facility but after a couple of days realize the family cannot meet the needs and they end up returning. If the MAP 24 has already been entered in KLOCS would a new LOC need to be initiated? Is there a time limit to withdraw the d/c or is it just until the d/c has been finalized? Can you withdraw if still pending?	Once the discharge is entered the facility cannot change it. Depending upon the situation there are a couple of avenues to correction. One is to submit a new application where most of the resident's information will already be in the system and should auto fill. If that is not appropriate, then another work around can be found.
13. If a resident is transferring from SNF to SNF, does the transferring SNF have to complete the DC before the new facility can complete the new application? If this is true and the	The act of transferring the member will discharge the resident from the transferring facility. If the receiving facility does not accept the transfer the resident is not discharged from the transferring facility.

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transferring facility does not complete the DC timely will this be held against the new facility?	
14. Can the new facility request the transfer request?	The new facility cannot request the transfer in KLOCS, but you may contact the new facility and coordinate as needed.
15. Currently if we have a resident return from hospital on Medicare A, we complete a new LOC application, will we continue to do so in KLOCS?	If you discharge them in KLOCS you will need to complete a new LOC application.
16. A discharge has to be put into KLOCS and not just on the MAP 24?	The MAP 24 is going obsolete, everything is going to be electronic starting August 3 <sup>rd</sup> .
17. We are a pediatric facility, if a resident age out of our facility & transfers to an adult facility, will we need to discharge that resident in KLOCS so that the adult facility can submit their own LOC application?	No, it is a transfer
18. Will the Approve Transfer Task apply to us when a client ages out of our facility & transfers to an adult facility?	Yes
19. Any time we have a Medicaid resident discharge, we have to go in and do a discharge?	Yes
20. If a resident goes out to the hospital on bed hold days and they use all 14 bed hold days, do we discharge them at that time?	The policy has not changed. 14-day bed hold for hospitalization and 10 days for other absences.
21. If a resident is out to the hospital, how long before we can discharge in KLOCS?	After they run out of the 14 bed hold days. If after the 14th day they return, a new LOC has to be completed in KLOCS.
22. A discharge has to be put into KLOCS and not just on the MAP 24?	The MAP 24 is going obsolete, everything is going to be electronic starting August 3 <sup>rd</sup> .
23. How will Provider A know who Provider B is? Will there be specific information about the overlap?	Facility will need to ask the family or contact the PRO if that is not possible.
24. Will KLOCS show the other Provider if there is an overlap?	KLOCS will not show the other provider. The facility must contact the family or call the PRO.
25. For a long-term care admission, can we send a discharge summary from the hospital if they do not have an H&P?	If you can use one from the hospital now, then you can when KLOCS goes live.



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26. What happens if Hospice discharges a client but fails to enter the discharge in KLOCS?	That depends upon what happens to the member. If they remain in the NF, then NF and hospice need to coordinate the discharge and the admission.
27. If a resident goes to the hospital, a transfer is not needed but if the resident expires in the hospital do I need to go in and do a d/c expired?	Yes
28. If you discharge resident when they go to hospital would you have to reenter them in KLOCS?	You should not discharge if you expect them to return. If you do and they return you will need to submit a new LOC application.
29. Who gets paid for the day of discharge in the event of a transfer?	The facility or the provider who can count the member on the midnight census.
30. Are discharged to home patients, not in the facility, transitioned into KLOCS?	If they are still in the current database with an active LOC they will be converted.
31. What type of documents would we need to upload in resident discharge?	Some providers have a document requirement at discharge.
32. What if the other facility that has the LOC open doesn't close it within the 3 calendar days? Will our application be late?	Providers must coordinate with each other to maintain correct information. The LOC information impacts both member eligibility and provider claims payments. As such it is vital it be correct.

### PASRR Level II/Requesting PASRR Level II Questions

1. If they already have a Level II, will these residents already be in KLOCS?	We are converting everyone we have data on so hopefully the answer is yes. If not, there is a process to double check and correct.
2. We usually send over the Level II request to Comp Care. Do we still need to notify them or will KLOCS notify them of the Level II request?	KLOCS will notify the CMHC if the Level I trigger a Level II referral once the LOC application is submitted.
3. Who initiates PASRR II prior to admission?	This is on your facility to determine who completes the LOC application in KLOCS. When the answers on the MAP 409: Level I indicate a Level II is needed and you submit the LOC application, KLOCS will send a task for the Level II to the CMHC.
4. How do we request Level II PASRR for residents who have not admitted yet and who do not have an approved LOC?	Once you submit the LOC application in KLOCS that triggers a Level II, then the PASRR Level II task will be sent to the CMHC. This is required prior to admission. The CMHC determines PASRR and LOC.

## KLOCS Webinar FAQ – Part One

5. Who is responsible for submitting Level II?	Request for a Level II is done by KLOCS based on the NF answers on the MAP 409: Level I screens. Once you submit the LOC application, KLOCS will send a task to the CMHC if the Level I indicate the need.
6. Are we not going to be able to do a waiver for PASRR Level II?	There are no waivers for PASRR Level II. There is a hospital exemption, and a provisional admission for respite or delirium. These questions are built into KLOCS and require the completed corresponding MAP form if chosen.
7. Will a MAP 4095 (Significant Change form) for PASRR Level II still be required in KLOCS?	Yes, this is completed through the Request Level II button on the Individual Summary screen
8. Can you give examples of why the PASRR Level II request would not be accepted? Does it require certain documents to be uploaded?	It requires an H&P signed by a physician and the MAP 350. If a provisional admission was used, it would also require the corresponding completed MAP forms.