

Medically complex services

Application for ICF/ID facilities



Facility name: _____ Admission record number: _____

Resident name: _____ Medicaid ID: _____

MCS program start date: _____ MCS program end date: _____

Diagnosis related to the medical services: _____

Indicate the medically complex service:

- Enteral feeding
- Wound treatment
- IV infusions
- Insulin dependent diabetes
- Ostomy care

The application must include the following documentation:

- Diagnosis of the primary condition which requires the medically complex service documented by a physician.
- A current, signed MD order for treatment of the condition.
- Medication administration records
- Treatment records, both facility and any outside care, specific to the condition.
- Glucometer check records with sliding scale insulin administration (if applicable).
- Wound care documentation, including a description of the wound and status (if applicable).
- Enteral feeding documentation, including dietitian notes, treatment and follow up (if applicable).
- Current medical care plan.

The provider must notify the Department within 30 calendar days of a change in condition, change in treatment orders, and/or discontinuation of the medically complex services.

Applications must be submitted online through PRISM, attached as a file to the correct Admission Record. For questions, call 801-538-6155 or toll-free 1-800-662-9651 and select option 3, 3, and choose the correct RA nurse or send an email to residentassessment@utah.gov.

An Admission Record must be approved for the same dates of service as the Medically Complex Services Add-on program.

The Medically Complex Services Add-on program cannot be combined with another add-on program.