

# Centennial Care Member Long-Term Care Benefits and Services



## Nursing Facility Level of Care

Presbyterian Centennial Care members who have a Nursing Facility Level of Care (NFLOC) can get special services. NFLOC means that a member is eligible to get care and services in a nursing facility or nursing home. Many NFLOC members also can choose to get care and services in their home or another community setting that is not a nursing home. These services are called **Community Benefits**.

Your Presbyterian care coordinator needs to find out if you are eligible for NFLOC or other services to meet your healthcare needs. The care coordinator will ask you about your medical, behavioral (mental), and social needs. He or she also will talk to you, your family, and other caregivers as needed.

## Choosing Where and How to Get NFLOC Care and Services

Once you know you are eligible for NFLOC, your care coordinator will help you to choose where and how you want to get your NFLOC care and services. The care coordinator will work with you, your family, and your other caregivers to understand what you want and what would be best for you.

You will have three options for getting NFLOC care and services:

1. You may get care and services in a **nursing home**.
2. You may get care and services at home or in another community setting through an agency. This is called **Agency-Based Community Benefits (ABCB)**.
3. You may get care and services at home or in another community setting and manage those services and providers yourself. This is called **Self-Directed Community Benefits (SDCB)**.

## Getting Care in a Nursing Facility

You may decide to go to a nursing home because of your health condition. If so, you will get all of your NFLOC services and care from the nursing home. At any time, you may choose to go back to your own home or another community setting, if you are able.

## Agency-Based and Self-Directed Community Benefits

If you do not want or need to get care and services in a nursing home, you may choose to get **Community Benefits**. These are special care and services that help members to stay in their homes or another community setting. If you choose **Agency-Based Community Benefits (ABCB)**, you will pick an Agency to help you get the care and services you want. The Agency will hire providers for you. It will also set up schedules for those providers to give you all your care and services.

If you can and want to, you may choose to manage your community benefits, and providers yourself. This is called **Self-Directed Community Benefits (SDCB)**. If you choose this option, you will not use an Agency to hire and schedule providers and services. You must get ABCB for at least 120 days (four months) before you can choose SDCB. After that time has passed, care coordinators will help you move from ABCB to SDCB. If you think you would like to have SDCB, tell your care coordinator. Then your care coordinator can begin planning for you to move to SDCB when the time is right.

Whether you choose ABCB or SDCB, your care coordinator will work with you, your family, and your caregivers to find the best care option for your needs.

**ABCB and SDCB Benefits and Services**

ABCB and SDCB have different benefits and services. The table below shows those differences.

| Agency-Based Community Benefits*     | Self-Directed Community Benefits*    |
|--------------------------------------|--------------------------------------|
| Adult Day Health                     | Behavior Support Consultation        |
| Assisted Living                      | Emergency Response                   |
| Behavior Support Consultation        | Employment Supports                  |
| Community Transition Services        | Environmental Modifications          |
| Emergency Response                   | Home Health Aide                     |
| Employment Supports                  | Homemaker                            |
| Environmental Modifications          | Nutritional Counseling               |
| Home Health Aide                     | Private Duty Nursing for Adults      |
| Personal Care Services               | Related Goods                        |
| Private Duty Nursing for Adults      | Respite                              |
| Respite                              | Skilled Maintenance Therapy Services |
| Skilled Maintenance Therapy Services | Specialized Therapies                |
|                                      | Transportation (non-medical)         |
|                                      | Customized Community Benefits        |

Care coordinators can help you, your family, and your caregivers understand these different benefits. Care coordinators will work with you to choose which benefits would best meet your medical, behavioral, and social needs.

*\*Please see your Centennial Care Member Handbook for descriptions of all of these benefits.*

**Terms and Definitions**

Below are some terms and definitions that can help you understand your NFLOC and Community Benefits.

| Term   | Definition  |
|--|---|
| Agency-Based Community Benefits (ABCB)           | The Community Benefit (CB) services offered to a member who does not want to direct his or her CB services.   |
| Community Benefits                               | Benefits and services available to a member with a Nursing Facility Level of Care.  |
| Comprehensive Needs Assessment (CNA)             | A tool to help the care coordinator understand all of a member’s medical, behavioral, and social needs. The care coordinator will use the CNA to make a member’s care plan.   |
| Nursing Facility Level of Care (NFLOC)           | When a member is eligible to get care and services in a nursing facility or nursing home. Members with a NFLOC do not always have to get care in a nursing home. They may choose to get Community Benefits. This allows them to stay at home or in another community setting instead of going to a nursing home.  |
| Nursing Facility Level of Care Assessment        | The tool used to help a care coordinator see if a member is eligible for a Nursing Facility Level of Care (NFLOC).  |
| Self-Directed Community Benefits (SDCB)          | The Community Benefit (CB) services offered to a member who wants to self-direct his or her own CB services.  |
| Self-Directed Community Benefit (SDCB) care plan | For a SDCB member, the SDCB care plan is the services and goods that the member and the Support Broker chose. The plan is based on the member’s Comprehensive Needs Assessment. The SDCB services must be within the member’s SDCB budget.  |
| Support Broker                                   | A person who helps the SDCB member with his or her SDCB care plan and budget. Presbyterian will assign <b>both</b> a care coordinator <b>and</b> a Support Broker to a SDCB member. The Support Broker helps the SDCB member with the care workers he or she has hired. The Support Broker makes sure the member gets all the care and services in his or her SDCB care plan. |

To learn more about Presbyterian Centennial Care, call (505) 923-5200 or 1-888-977-2333 (TTY 711) or email [info@phs.org](mailto:info@phs.org). We are open 8 a.m. to 6 p.m. Monday to Friday (except holidays).

Enclosures: Notice of Nondiscrimination and Accessibility, [(Long) MPC081640]  
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