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703 Med Needs

Overview

The 703 Med Needs Application is an application developed on the Quick Base platform for the Arkansas Department of Human Services to allow Nursing Home and Long-Term Care Facilities submit requests to transfer resident/clients from one facility to another. This application focuses on the completion of an initial intake form and tracks the process by which that application is approved or rejected. Once the form has been submitted, ARDHS Registered Nurses have the ability to review the application and determine whether the request should be approved or not. Once the determination has been made, an ARDHS Administrative Specialist will enter the completed application into the appropriate system of record and informs the facility of the decision.
703 Intake

Roles Involved:

Provider User

Process:

All Nursing Homes and Long-Term Care Facilities associated with ARDHS have one Quick Base License associated with their facility. This license is used by the facility designee to input the requests for this application. This designee will be referred to as a Provider User in this document.

- To Login to the Quick Base application, use the following web address: [https://ardhs.quickbase.com](https://ardhs.quickbase.com).
- Sign in by using the username/ID and password associated with your facility’s licensed account.

To begin a New Application the Provider User will open the 703 Med Needs Application in Quick Base and review their dashboard. The Dashboard will only show information related to Clients and Applications that are attached to the logged in Facility. From here, the Provider User can see: 1) any open 703 Applications awaiting decisions and the current status; 2) 704 Forms that show a new Eligibility Decision; 3) 703 Applications that have been Rejected for Incomplete Submission; or 4) 704 Forms that have an upcoming Expiration Date that requires attention.
Searching for Client Record

The Med Needs Quick Base system records and retains one client record per Social Security Number. Multiple applications can be submitted to a client record based on the need, including:

- Change of Condition
- Hospice/Convalescent Care Review
- Transfer
- Discharge

Provider Users can search for existing clients by typing in the full Social Security Number in the “Search Clients” field at the top of the Dashboard.

When a Provider User searches for a client, they must identify a client’s full Social Security Number. If this data is incorrect or not completed, the system will not return any results. Social Security Numbers need to be entered with no dashes - numbers only (i.e.: 123456789 instead of 123-45-6789)

**TIP:** Search for the client by the SSN before you create a new client record. If the client has been in the system previously through either your facility or another one, the client record will populate. If the client’s SSN is already in the Quick Base system, you can add an application from the client’s page. See the Updating Client or Transferring to New Facility section for more details. If you cannot find the client through the SSN search, continue with the “New Client” option.
Adding New Client Record

Provider Users can add new clients by selecting the “New Client” field at the top of the Dashboard.

When a Provider User adds a New Client, they will need to enter some basic information on the client, including the Social Security Number, Medicaid ID (if applicable), Name, Date of Birth, Sex, and Date Deceased (if applicable). The Provider User cannot proceed to the 703 form until this demographic information is collected. Note that any field with a red asterisk (*) is a required field and must be completed before continuing.

**TIP:** Duplicate Clients (i.e.: an individual whose SSN is already entered into the DHS Quick Base system) are not able to be added as a “New Client”. If a Provider User attempts to add a duplicate client, the system will not let them save the record. To change/update an existing client in the system, instructions can be found on Page 19 of this Training Guide under the Updating Client or Transferring to New Facility section.
Adding New Application to Client Record

Once the client’s demographic information is in the system, you may select “Add Application” to continue to the 703 data fields. If you would like to save and close the record or save and enter a new client’s demographics, you can select either option from the top right dropdown on your screen. If you “Save & Close” or “Save & New,” you will have to enter the full SSN in the Search Client field on the Provider Dashboard in order to retrieve the Client Record again.

You may receive the following pop-up message when selecting “Add Application.” In order to continue to the 703 data, select the Save button.

Once you have selected Add Application, the Provider Users will need to add all of the 703 required information (as indicated by the red asterisk *) and any other optional fields as necessary. Depending on the choices entered in a particular field, additional information may be required. Additional information boxes or question will appear on your screen.
After all other information on the form has been completed, the Provider User can select that they are ready to save their application and move to the next step by selecting the “Unsubmitted” option from the dropdown shown below. This option will allow the application data to be saved and still editing rights by the Provider User; this option will not officially submit the application to ARDHS for review and approval. This step is crucial in keeping the application in an editable format to add any signatures required electronically.
Next, select the appropriate option from the dropdown menu that you would like to use. “Save & Close” will save the application and close out the screen to the Provider Dashboard. “Save & Next” will save the application and allow you to move to the next application. “Save & Keep Working” will save the application but stay on the current page so that you can continue to the next phase in the current application.

If any required fields are left unanswered, you will receive the following pop-up message indicating any required field still needing attention before moving on in the process. Click OK and find the field indicated in the message to correct.

On the tab **703 Intake**, the field **Medication Assistance** is required.

Once the form has been saved, the Provider User can now add any needed signatures to the record before submission. The following buttons will appear next to the signature fields: Add Patient Signature, Add Witness Signature, Add MD Signature, and Add Additional Signature. When any of the Add Signature buttons are selected, a Scribble Page will appear where the signature can be recorded and then transferred to the form.
Once you submit the signature, it will appear electronically on the screen as a Signature Image.
Once the needed signatures have been recorded and the application has been reviewed for accuracy, the Provider User will select the “Submit Application” option to officially submit the 703 to ARDHS for review and approval. Note: Once the application has been submitted to ARDHS for review, it can not be edited by the Provider User anymore, unless ARDHS submits the application back to the facility for additional information.

Provider Application Options
Select any of the options below

Submit Completed Application

Save & keep working  Cancel

Once submitted, you will be able to view the processing status in the “Open 703s Awaiting Decision” window on the Provider Dashboard. The Processing Statuses include:

- **Unsubmitted**- indicating an application has been started and saved; however, it has not been submitted to ARDHS for review.
- **Submitted**- indicating that the facility has submitted the 703 successfully but it has not been assigned to an ARDHS Registered Nurse to review.
- **Nurse Assigned**- indicating that an ARDHS Registered Nurse has been assigned to the 703 and is currently in the review phase.
- **Approved**- indicating that the ARDHS Registered Nurse has approved the 703 for a Level of Care and is now pending the ARDHS Med Needs Administrative Specialist to key the 704 information into the appropriate systems.
- **Denied**- indicating that the ARDHS Registered Nurse has denied the application and is now pending the ARDHS Med Needs Administrative Specialist to key the denial information into the appropriate systems.
Uploading Documents to Client Application (including DMS-787 & 780)

When a DMS-787 or a DMS-780 form is required to be submitted along with the 703 application, the User Provider will complete those forms through the paper format and upload to the Quick Base system.

Before submitting the application to ARDHS for review, select the “Documents” tab to upload any additional information or documents needed. Select the “Add Document” button to upload the document from your files and provide a Title for the document that is clear and concise.

Next, click either “Save & Close” to return to the main page of the client’s record or “Save & New” to add additional documents.
703 Rejected for Incomplete Submission

If a 703 application is returned due to missing information, the Provider User may revise or update the application form based on the information requested by the ARDHS. If an application is rejected for this reason, that application will appear in the section labeled “703s Rejected for Incomplete Status” on the Provider Dashboard.

**TIP:** Incomplete applications will remain on the Dashboard for a period of 30 days.

To view the record, select the view icon (●) in the first column. Note that the 703 Processing Status has been updated to “Returned for Additional Information.” Select the Pending/Missing Information tab to view the missing information being requested. You can then select the view icon again for a more detailed look.
To make the edits, select the first tab labeled “703 Intake” and select the Edit button at the top right of the page in order to open the application. Once the application has opened for revisions, locate the area in which additional information is being requested to update.

**TIP:** If any other information is changed other than what has been requested by ARDHS, this may delay processing as the DHS Nurse will be required to review the entire 703 application again.

Once the necessary changes and updates have been made, you may resubmit the application to ARDHS by selecting the “Resubmit Application-Missing Information Provided” option in the drop-down menu at the bottom of the page. Select the “Save & Close” button to submit the form and return to the Provider Dashboard.

Once successfully submitted, the client’s record will disappear from the “703s Rejected for Incomplete Submission” section and return, once again, to the “Open 703s Awaiting Decision” as a Submitted status.
Hospice/Convalescent Care 703 Reviews

When a Level of Care has been determined that includes a Hospice or Convalescent Care review date, the facility will receive an Expiration Reminder within seven (7) calendar days of the expiration. This reminder can be seen at the bottom of the Provider Dashboard. This reminder is to prompt you to resubmit any necessary 703 and/or documentation.

In order to submit a review 703, you must submit a new application to the client’s record. Procedures on how to search for the client record can be found on Page 4 and additional information can be found in the Updating Client or Transferring to New Facility section on page 19.
You can view and print an approved or denied application with two different methods. First, you can use the Search Clients engine by entering the client’s SSN and selecting the search icon (🔍). The second option is to locate the client in the “704 New Eligibility Decision” area on the Provider Dashboard. You can filter this report by clicking on the “Filter this report” icon (🔍) and entering the clients name.

In order to view the 704-Determination, select the tab labeled as such. In order to print this determination, click the dropdown arrow next to “More” on the top right of the screen.
A new window will pop up displaying the full 703 Intake application, Missing Information, 704 Determination, and any Notes or other Documents that have been included for this client. You can opt to print based on your current printer connections, or you may choose to save the file as a .pdf to your computer.
Updating Client or Transferring to New Facility

To update a client record for Change of Condition, Hospice/Convalescent Care Review, the Provider User must submit a new 703 application for that client by searching for the client using the SSN on the Provider Dashboard. Inaccurate or partial social security numbers will not return any results.

To submit a 703 for a transferring client, the new facility receiving the client must complete a 703 application for the transferring client by using the same search function.

The search will bring up the Client Record for that SSN located within the ARDHS Quick Base system. Review the demographic information (including SN, First and Last Name, Medicaid ID (if applicable), Date of Birth, and Sex to ensure you have received the correct client record.

To create a new 703, select the Add Application button and proceed to enter 703 information as described under the Adding New Application to Client Record section of this training guide on page 6.

**TIP:** Searching by the full SSN will populate that client’s main demographic information for a transferring facility; however, facilities will only be able to see applications they have created or submitted. For example, a transferring facility will be able to see the SSN, Medicaid ID, Name, DOB, and Sex of the client but not the application(s) submitted previously be another facility.
704 Reconsideration

This process details the steps by which the Provider User appeals a Denied Status.

A Provider User will be alerted when the application is completed, and if the application has been denied by the ARDHS Registered Nurse. The Provider User will then have the ability to appeal the decision by opening the Client Record and selecting Status Reconsideration Requested.

Start by selecting the View icon (اظف) to open the application. Click the Edit button at the top right of the page to open the application for editing.

Scroll to the bottom of the application and select “Reconsideration Requested” from the drop-down option of the Provider Application Options field. Select the Save option which best fits your need.
Upon successfully saving the Reconsideration Request, the request will be submitted back to ARDHS to review and appear once again on the Provider User’s “Open 703s Awaiting Decision” report.
Additional Features

- This application can also be accessed and utilized through mobile devices, including iPads, SurfacePro, and other tablet designs. For optimal viewing through a mobile device, select the Mobile Web icon ( ) at the top right of the screen.

- You can expand the any of the report fields on the Provider Dashboard to a full screen by hovering over the top right corner of the report field and clicking the “Display in Full Window” icon.
By selecting More Options and Full Report, you can view your applications with filtering options.