

-Revised 11/13/12-
-Revised 12/13/11-

Operations Memorandum

Medical Assistance

OPS111002

October 05, 2011

SUBJECT: Medical Assistance (MA) for Inpatients Who Are Inmates of a County Prison
TO: Executive Directors
FROM: Richard Wallace, Acting Director, Bureau of Operations

Purpose

To provide policy and procedures for the provision of Medical Assistance (MA) benefits for inpatient services to qualified inmates of county prisons.

Background

Currently, inpatient hospital care for inmates in one of the State's 63 county prisons is arranged and funded by the county in which the prison is located. Act 22, signed by the Governor and effective July 1, 2011, provides the authority for the Department of Public Welfare (DPW) to authorize MA for inmate inpatient care.

Discussion

Effective October 10, 2011, county prison staff will submit inmates' applications through the Commonwealth of Pennsylvania Access to Social Services (COMPASS) system. These applications will be sent to the County Assistance Office (CAO) in which the prison is located, and forwarded by the CAO to the Central Unit (CU) for processing. The application will be submitted after the inpatient stay. Good communication between the CU and county prison staff will be important to the success of this initiative.

Policy and procedures for this initiative are as follows:

POLICY

County prison inmates who are admitted to hospitals for inpatient care can apply for and receive MA coverage for inpatient services, if they are otherwise eligible. For the purposes of this initiative, an inmate is defined as someone who lives in a public correctional institution. Therefore, individuals who are defined as "work-release,"

whereby they reside in the prison for only part of the week, are not classified as inmates, and will not be eligible for this process.

The CU will consider information on the COMPASS application and accompanying documentation as verified upon receipt. Individuals will be authorized in the appropriate category and notices will be sent as indicated below.

PROCEDURES

Implementation of this process requires actions by both county prison and DPW staff.

County Prison Staff

- **Submit and E-sign** (when appropriate) the application through COMPASS as a Community Partner.

NOTE: The application may be used for more than one hospital admission, if the admissions occur within 60 days of the date of application. For each hospital admission that occurs within 60 days of an approved inmate application, the SCI will notify the CU of the new admission by email, then fax a completed County Prison Inpatient Eligibility form (Attachment 1) to the CU for the new Non-Continuous Eligibility (NCE) period.

- **Fax or scan** the County Prison Inpatient Eligibility form (~~Attachment 1~~) with the E-form number and the eligibility dates to the CU. The CU fax number is:
1-866-322-2678.

NOTE: A field for the Incarceration Date has been added to the County Prison Inpatient Eligibility Form. The inmate's date of incarceration is required information.

- **Fax or scan** the COMPASS Signature Page to the CU in instances where the inmate's Social Security Number was not obtained.

CAO

- **Review** the COMPASS application in e-CIS (at Web Application Details/CAPWAD) and determine it was submitted with the permanent address of the county prison.
- **Forward** the COMPASS application from the county prison to the CU (23/3). The application must be forwarded on the same business day it is received.

CU

- Process the COMPASS application with the County Prison Inpatient Eligibility form upon receipt. . **Effective December 19, 2011, the application will be processed as a Special Program Request. Program Status Code (PSC) 39 has been designated for the County Prison inmate population.**
- Enter the county prison information and the hospital MA Provider information in e-CIS/CIS.
- Consider the application information as verified upon receipt.
- Ensure that all necessary forms are signed and completed. (If additional information is needed, please refer to the County Prison Contact List, [Attachment 2](#).) The IMCW will receive an e-signature or a faxed signature page.

NOTE: Income and resources are excluded for this initiative based upon their restricted availability.

- **Review to see if inmate is enrolled in a Managed Care Organization (MCO). Inmates found to be enrolled in MCOs are not covered during incarceration and must be disenrolled in order for MA payment to occur. To disenroll the inmate:**
 1. Select "Health Choices" from the Links section on the OIM Homepage.
 2. Click on *Managed Care Programs* in the menu bar and select *Forms* in the *General Information* section.
 3. Click on *Incarceration-Physical Health MCOs*; complete the form that comes up and click on "submit" when finished. Instructions are included with the form. The incarceration date must be entered; this date can be obtained from the PA 1890 form that accompanies the application.
- Enter the ~~Non-Continuous Eligibility (NCE)~~ period using the dates of hospital admission and discharge as shown on the County Prison Inpatient Eligibility form.

NOTE: The NCE period cannot start before July 1, 2011. If the individual's hospital admission occurred prior to July 1, 2011, but ended on or after that date, the NCE will be from July 1, 2011 through the date of discharge.

EXAMPLE: Individual is admitted on June 23, 2011 and discharged on July 3, 2011. The NCE period for this individual will be July 1, 2011 through July 3, 2011.

- **Enter the correct category (PC, PH or PD) and PSC 39 on CARMRQ beginning December 19, 2011**
- **Authorize MA benefits for:**
 1. Permanently disabled individuals under age 65 in category ~~PH00~~. **PH39** (One of the SSA disability criteria must be checked.)
 2. Temporarily disabled individuals over age 20 and under age 65 in category ~~PD/00~~. **PD39** (Do not meet SSA disability criteria.)
 3. Individuals ages 18 to 20 in ~~PC00~~. **PC39**
 4. Individuals over age 65 in category ~~PH00~~. **PH39**
 5. Pregnant women in category ~~PC00~~. **PC39** Override required. (County Prison Inpatient Eligibility form will indicate pregnancy and estimated due date.)

Reminder: Applications for newborns of pregnant inmates are to be submitted by the hospitals to the CAO in the county where the newborn is residing.

NOTE: Individuals with citizenship codes 2, 3, and 5 not otherwise eligible will be authorized for emergency MA.

- **Send** a notice of eligibility to the individual, the county prison, the hospital MA provider, and to the County Commissioners Association of Pennsylvania (CCAP). The CCAP notice should be sent to:

PIMCC
 c/o Cost Management Plus
 2319 Walnut Street
 Harrisburg, PA 17103
 Attn: Inmate Medical

- **Send** a monthly report by the 10th of the following month to the Bureau of Policy, Division of Health Services, Attn: Mary Ellen Roche at mroche@pa.gov. The report will follow the format below:

Name	County Prison	Case Record #	Recipient #	Cat/PSC	NCE Start	NCE End	COMPASS #
John Smith	Dauphin	23/3/xxxxxxx	xxxxxxxxx	XX/00	7/1/xx	7/3/xx	Wxxxxxxx

Next Steps

- 1) Review this memorandum with appropriate staff.

- 2) Direct questions regarding this Operations Memorandum to your Area Manager.
- 3) This Operations Memorandum will become obsolete upon updating the Medical Assistance Eligibility and Supplemental Handbooks.