

DATE: January 8, 2015

OPERATIONS MEMORANDUM #15-01-02

SUBJECT: The “Raise Your Hand” Process

TO: Executive Directors

FROM: Tom Strickler
Director
Bureau of Operations

PURPOSE

To inform County Assistance Offices (CAOs) of the “Raise Your Hand” process which can be used by recipients who believe they have a complex health condition to facilitate a change in health care benefit package (HCBP) or Medical Assistance (MA) category.

BACKGROUND

Healthy PA made several changes to the MA program, including the consolidation of HCBPs, the creation of new health care categories, and the usage of a health screening questionnaire used to determine HCBP and category.

DISCUSSION

A process has been implemented to ensure that recipients are correctly placed into the HCBP that is best suited to their medical needs. This process is known as “Raise Your Hand.”

Recipients enrolled in the “Healthy” HCBP or “*Healthy PA* Private Coverage Option” can request a review of benefit plan at any time by contacting the Statewide Customer Service Center (1-877-395-8930 or 1-215-560-7226 in Philadelphia) or their caseworker if they:

- Have a change in health condition or feel their current HCBP does not meet their medical needs. A paper health screening (see Attachments 1 ([English](#)) and 2 ([Spanish](#))) will be given to the recipient for completion.

Note: The paper health screening, known as Appendix C to PA 600HC (10/14), will also be available separately on DocuShare.

- Report a disability. A PA 635 or PA 1663 will be given to the recipient for completion by a medical professional in addition to the paper health screening.

Note: These documents do not need to be submitted simultaneously and a recipient may submit a health screening without the PA 1663 or PA 635.

Note: Any time a recipient provides a paper health screening, it will be treated as though the recipient is making a new “Raise Your Hand” request.

Once the screening and/or medical form(s) are returned, the CAO will:

- Scan and attach the health screening and/or medical form(s) in Imaging.
- The caseworker supervisor submits a ServiceNow request to the Clinical Validation Team (CVT) for analysis. Results should be received via ServiceNow within 10 business days.
- Once results are received by the caseworker supervisor, the CAO will:
 - Perform a benefit package or category override using codes 903 or 904 within 5 business days, if the clinical validation results indicate that a benefit package or category change is needed. An automated notice is sent.
 - Send out a manual notice containing appeals rights using the language in the attached PA/FS 162 ([see Attachment 3](#)), if the clinical validation results indicate that no benefit package or category change is needed.

Reminder: An individual who has been validated as medically frail is not certified disabled for purposes of determining eligibility in a Healthy Horizons or SSI-related MA category. If the individual indicates a disability that would likely result in a move to a Healthy Horizons or SSI-related MA category, then a PA 1663 or other medical documentation is needed.

A recipient receiving the “Healthy Plus” HCBP cannot make a “Raise Your Hand” request as they are receiving the highest HCBP available. If the recipient wishes to change their HCBP, they can opt out of “Healthy Plus” into the “Healthy” HCBP. Additionally, an individual who has opted out of the “Healthy Plus” HCBP can complete a “Raise Your Hand” request at any time in order to be considered for placement back into the “Healthy Plus” HCBP.

NEXT STEPS

1. Share and review this information with appropriate staff members.
2. Direct questions regarding this Operations Memorandum to your Area Manager.
3. This Operations Memorandum will become obsolete when this information is incorporated into the MA Eligibility Handbook.

Attachments