

Policy Clarifications - Medicaid - Long Term Care PMN16385404

Submitted: 10/12

Agency: CAOs

Citations:

**Subject: Receipt of Incomplete Home and Community-Based Services (HCBS)
Eligibility/Ineligibility/Change PA 1768 Forms from the Independent Enrollment Broker
(IEB) MAXIMUS**

Over the past few weeks we have been receiving PA 1768s from the IEB, which are missing certain information. For example, these PA 1768s did not include an assessment date or type of waiver, while others include conflicting comments regarding the level of care. What process should be used when we receive these “incomplete” PA 1768s?

Response By: Division of Health Services

Date:10/17/12

This document sets forth the procedures that should be used when a PA 1768 does not include certain information. These procedures are part of a larger process that the Department of Public Welfare (DPW) implemented to ensure that applications for some specific HCBS Programs are processed timely. Those HCBS Programs are:

- 0192 Waiver (80)
- Attendant Care Waiver (40)
- Independence Waiver (42)
- COMMCARE Waiver (59)
- OBRA Waiver (79)

The goal of the larger process is to allow one element of the overall eligibility determination to proceed if there are delays in other elements of the process. Consequently, the CAO may not receive a completed PA 1768 verifying functional eligibility prior to beginning the financial eligibility process.

Additionally, the procedures essentially anchor around the date of September 1, 2012 to prioritize the applications. All applications submitted prior to September 1, 2012 have a higher priority.

To help highlight the PA 1768s relating to pre-September 1 applications, the IEB began to mark those PA 1768s as “Mosley Backlog” in the comments section (this

is a reference to a court matter where certain individuals alleged that applications had not been processed in a timely manner). The marking in the comment section began on September 19, 2012. All Mosley Backlog cases must be expedited.

This Policy Clarification is meant to provide guidance for the Mosley Backlog cases only, although some of the procedures will carry over to applications submitted after September 1, 2012.

When one of the PA 1768s marked Mosley Backlog is received, the CAO will use the assessment date listed on the PA 1768 as the application date and the requested effective date for determining financial eligibility. Due to the need for an expedited review, when a pending list is sent, the individual has 15 days to provide all requested documentation. After 15 days the CAO should reject the case as specified below unless the individual specifically requests more time to gather the information. Only if requested should these backlog cases be held for 30 days.

The CAO will follow the procedures listed below for PA 1768s marked 'Mosley Backlog':

	Already a Medical Assistance (MA) Recipient? (Yes/ No)	PA 600L Received? (Yes/ No/ Not Applicable-NA)	PA 1768 Status? (Nursing Facility Clinically Elig-NFCE/Nursing Facility Inelig-NFI/ Incomplete)	Action to be taken:
1	Y	NA	NFCE	Authorize payment of HCBS following current procedures.
2	N	Y	NFCE	Send pending list within five business days. Follow current procedures for determining financial eligibility.
3	N	N	NFCE	Reject reason 042 for failure to provide a completed PA600L.
4	Y	NA	INCOMPLETE	Reject reason 042 for failure to provide. Include the incomplete documents noted in the comments section of the PA 1768 including either or both of the following that apply: 'Complete and Accurate Physician's Certification' or 'Complete and Accurate Level of Care Assessment'.
5	N	Y	INCOMPLETE	Send pending list within five business days. Include the incomplete documents noted in the comments section of the PA 1768 including either or both of the following that apply: 'Complete and Accurate Physician's Certification' or 'Complete and Accurate Level of Care Assessment'. Also include all applicable financial documentation.
6	N	N	INCOMPLETE	Reject reason 042 for failure to provide. List the incomplete documents noted in the

comments section of the PA 1768 including either or both of the following that apply: 'Complete and Accurate Physician's Certification' or 'Complete and Accurate Level of Care Assessment'. Also include a completed PA 600L.

7	Y	NA	*NFI	Reject reason 057 because the individual is not functionally eligible.
8	N	Y	*NFI	Send pending list requesting verification necessary to review for non-LTC related MA, including disability verification if needed. Follow current procedures for determining eligibility for MA.
9	N	N	*NFI	Reject reason 057 because the individual is not functionally eligible.

*If determined NFI then a specific HCBS program does not need to be included on the PA 1768 or PA 1768-Pending.

All pending verification lists and notices of eligibility or ineligibility must be sent to all involved parties, including:

- o Individual
- o Individual's representative, if any
- o IEB
- o OLTL-Bureau of Individual Supports (0192 Waiver only, see [PMN 15281477](#))

Some incomplete PA 1768s relating to applications submitted prior to September 1, 2012 may not include an assessment or the phrase 'Mosley Backlog'. This is because it may have been transmitted prior to September 19, 2012. Although this information is not included on the PA 1768, the CAO should review these forms following the procedures listed above.

These policy changes only affect the five waivers listed above. An Operations Memorandum discussing ongoing procedures for processing MA and HCBS eligibility for these five waivers will be forthcoming.

If you have any questions please feel free to contact the Bureau of Policy at 717-772-6646.