

Policy Clarifications - Medicaid - SSI

PMS13662305

Submitted: 4/2/07

Agency: CAOs

Citations:

Subject: TAW and TJW Categories

MEH [305.22](#) states that “The PAW/TAW client must be age 65 or older and be receiving home and community-based services.” [305.23](#) states, “The PMW client must be age 21 or older and under age 65 and be determined eligible to receive the home and community-based waiver services. They also must meet the same criteria as the PM client referenced above.” And [305.24](#) states, “The PJW/TJW client must be under age 65, be disabled, and be eligible to receive home and community-based services.”

LTCH [405.4](#) states that the TAW and TJW categories may only be used for LTCCAP.

[OPS 02-07-01](#) authorized the COMMCARE waiver and states under For New Applicants, #3, “If the applicant does not meet the income and/or resources limits for NMP (PJ), determine eligibility for MNO-MA (TJ)...If the applicant meets the income and resource limits, the CAO will authorize TJ (with Facility Code 59 on CIS, via CAIFAC or CCIFAC). The effective date of eligibility is the date the applicant was determined eligible for waiver-funded services by the AE and determined eligible for Medicaid by the CAO.”

Other waivers, similarly, indicate an evaluation for MNO is appropriate and that the MNO category should be authorized with the waiver facility code.

These policies appear to be in conflict. Which one is correct?

Response By: L Schmidt

Date: 5/30/07

The Division of Health Services staff advises that the guidance in LTCH [405.4](#) which limits TAW and TJW categories to LTCCAP cases is not correct. These categories are appropriate for any waiver case. However, TJW and TAW categories do not currently exist in the MEDA cascade. TA/TJ 22 may be used until TJW/TAW are reinstated.