

 FAMILY INVESTMENT ADMINISTRATION	FIA INFORMATION MEMO
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**TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
FAMILY INVESTMENT SUPERVISORS AND CASE MANAGERS**

**FROM: CHARLES HENRY, ACTING EXECUTIVE DIRECTOR, FIA
JOSEPH E. DAVIS, EXECUTIVE DIRECTOR, OFFICE OF
OPERATIONS & ELIGIBILITY, DHMH**

RE: LONG TERM CARE (LTC) PROCESSING USING VENDOR CODE 3474

PROGRAMS AFFECTED: LTC MEDICAL ASSISTANCE

ORIGINATING OFFICE: OFFICE OF POLICY, RESEARCH, AND SYSTEMS

Summary:

In August of 1995, DHMH issued a **Request for Clarification of Medical Assistance Eligibility Policy and/or Procedure (CR-720 & 728)** to clarify the procedures for instances when non-institutionalized persons make a request for coverage of LTC. This procedure is still in effect.

In order to accommodate the applicant and the LTC facility with the least amount of time and effort on the part of the local department, please use the following procedure whenever a non-institutionalized person makes a request for LTC coverage.

CARES Procedure Required:

Screening (J)

- ☐ First, screen the case in a **Community MA** coverage group, i.e. **S98, F98, etc.**
- ☐ Select **L (Add A Program)** in order to pend an **LTC** coverage group, e.g. **L98**.
- ☐ This will result in two AU IDs for the case.

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Interviewing (O)

- ❑ When completing the **ADDR** screen, use the applicant's current community address.
- ❑ For the **LTC AU**, the person to be institutionalized has a relationship code of **SE (Self)** on the **STAT** screen and the case manager is to enter **PN (Applicant)** as his/her financial responsibility code. If there is a spouse, he/she will have a relationship code of **SP** and the case manager is to enter **NM (Non-member)** as his/her financial responsibility code.
- ❑ For the **Community MA AU**, the person to be institutionalized is still coded as **SE** and **PN**. If there is a spouse, the relationship code is still **SP**, however, the spouse now has **PN** as his/her financial responsibility, if indeed living in the home at the time of application. The reason behind this is because a community assistance unit always includes both spouses when living together.
- ❑ On the **DEM1** screen, enter **AH (At home)** in the **Living Arrgmt** field.
- ❑ Go to **INST** screen and complete the top line. Enter **NH** in the **INST TYPE** field, enter LTC Vendor ID **3474** in the **PROV ID** field, enter the first day of the month of application in both the **Entry Date** and **LTC Payment Auth Date** fields. (Use of this vendor ID#**3474** is intended to enable the case manager to get through the screens during the interview when the applicant has not been admitted into an institution.)
- ❑ In the **Level Auth** field, enter **I** as the level of care.
- ❑ Complete the remainder of the interview as usual, calling up the **LTSI** screen, if necessary. The **LTSI** screen is used in the case where there is a spouse involved and the total combined assets of the LTC applicant and his/her spouse is entered to determine whether they are within the asset limits for the first month of continuous LTC. To get to this screen, just fastpath to **LTSI**.

Finalization

If the applicant enters a facility before the end of the month of application:

- ❑ Change the living arrangement on the **DEM1** screen to the appropriate institutional status, e.g. **IC**, **CC**, etc. If there was a spouse entered on the community case, change the spouse's financial responsibility to **NM (Non-member)**
- ❑ Finalize the community case. CARES will deny the community MA coverage group due to living arrangement.
- ❑ If the spouse that was entered on the community MA case is eligible for community MA, keep his/her financial responsibility status a **PN** and change the financial responsibility of the person to be institutionalized to **NM**. The income and resources of the person to be institutionalized are not counted towards his/her spouse's community MA.
- ❑ Finalize the community case. If spouse is otherwise eligible, CARES will certify for community MA.
- ❑ Delete the information previously entered on the **INST** screen by entering a **Y** in the **DEL** field and pressing **PF24**. Replace it with the information supplied on the **DHMH 257**. Finalize the LTC case.

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If the applicant does not enter an LTCF before the end of the month of application:

- ❑ Finalize the community case for the month of application.
- ❑ If **DHMH 257** is received indicating admission to an LTCF in the month following the month of application,
 - ❑ Change the living arrangement on the community MA case, effective the month of admission, if it is in an active or preserved status (this should close the community case), and
 - ❑ Delete the information previously entered on the **INST** screen, replace it with the information supplied on the **DHMH 257**, and finalize the LTC case.
- ❑ If a **DHMH 257** is not received prior to the expiration of the standard of promptness (apply extension of time limits if appropriate), finalize the LTC. CARES will deny LTC based on living arrangement (**Rsn. 201---Invalid living arrangement**).
- ❑ If a **DHMH 257** is received by the end of the six-month period under consideration, reactivate the LTC coverage group by using option **J** and the LTC AU#, correct the living arrangement on the **DEM1** screen, delete the information previously entered on the **INST** screen, and replace it with the information supplied on the **DHMH 257**.
- ❑ If a **DHMH 257** is not received within six months of the month of application and the extension of time limits was discontinued, the LTC coverage group remains denied. If the client later requests LTC coverage, a new application must be filed for the new period under consideration, and if requested, for the three-month retroactive consideration period.

Inquiries

Please direct any questions regarding this information memo to David Holland at (410) 238-1295.

cc: FIA Management Staff
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