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Department of Human Resources
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TO: DIRECTORS, LOCAL DEPARTMENT OF SOCIAL SERVICES
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
FAMILY INVESTMENT SUPERVISORS/ELIGIBILITY STAFF
DIRECTORS, LOCAL HEALTH DEPARTMENTS
LOCAL HEALTH DEPARTMENT ELIGIBILITY STAFF
Charles E. Henry for
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POLICY, FINANCE AND REGULATION, DHMH
E: MARYLAND CHILDREN'S HEALTH PROGRAM (MCHP)

PROGRAMS AFFECTED: MEDICAL ASSISTANCE (MA)

ORIGINATING OFFICE: OFFICE OF POLICY, RESEARCH AND SYSTEMS

SUMMARY: On July 1, 1998, the Maryland Children's Health Program (MCHP) became effective. This new program provides health insurance coverage for children under the age of 19 and pregnant women of any age with family income below 200% of the Federal Poverty Level. Children who were enrolled in the Maryland Kids Count program were converted to MCHP on June 30, 1998.

The Department of Health and Mental Hygiene (DHMH) is conducting numerous outreach efforts for the program. Applications for MCHP are available at Local Health Departments (LHD), school based health centers, Head Start programs, day-care centers, libraries, WIC Centers, and other community based centers, as well as at Local Departments of Social Services (LDSS). The application is short and contains instructions for mailing to the Local Health Departments who have authority to process eligibility for MCHP as they do for the Pregnant Women and Children (PWC) program. Local Departments of Social Services may also process eligibility for this program. CARES Bulletin #98-29 provides instructions for processing MCHP eligibility through the PWC Track of CARES which has been expanded to include new coverage groups for MCHP.

Unlike other FLA programs, MCHP does not require a face to face interview and the only written verification an applicant is required to submit is medical confirmation of pregnancy and due date. Local Health Departments may process applications and redeterminations for MCHP for families who submit the MCHP application. However, LHDs are not authorized to accept

applications or process eligibility for other FIA Programs such as Temporary Cash Assistance (TCA) and Food Stamps (FS). In addition, other FIA programs continue to require documented verifications for eligibility that are not required for MCHP, such as verification of family income. **When the declaratory information given on the MCHP application conflicts with that given for another FIA program, the documented information must also be used for MCHP.** Therefore, MCHP applications for families who receive other benefits such as food stamps or TCA must be processed at the LDSS. Families who wish to apply for MCHP as well as other benefits may file the MCHP application at the LHD but must be referred to the LDSS to file for other programs. This Action Transmittal provides guidance on coordinating logistical procedures and responsibility for MCHP processing and maintenance of case records between the LDSS and LHD in a given jurisdiction.

ACTION REQUIRED

Local Health Departments are responsible for maintaining cases that are active in any PWC Track coverage group from P02 through P14 when the family has no associated pending, preserved or active FIA case at the LDSS. LHD case managers will process applications and ongoing redeterminations for customers who request PWC or MCHP only. When existing PWC only cases at the LDSS are redetermined, if eligibility is continued, the case is transferred to the LHD for future maintenance and redeterminations. Local Departments must transfer each case individually to the LHD after completion of the next scheduled redetermination. Responsibility for maintaining existing PWC cases remains with the LDSS until redetermination.

Local Departments of Social Services are responsible for MCHP applications, redeterminations, and case maintenance when the customer is also active or pending in another FIA program. LDSS are also responsible for all applications for retroactive MA coverage. Application for retroactive MA coverage is not a part of the following procedures. Follow existing procedures to determine retroactive eligibility in the appropriate MA track.

While any individuals who apply for FIA programs are encouraged to utilize the resources of the Child Support Enforcement Administration (CSEA), assignment of support is not a requirement of the Maryland Children's Health Program. An applicant who does not want to pursue support or medical coverage by the absent parent may not be denied MCHP for eligible children. Current CARES programming is underway to change the CSEA system interface to avoid referrals for customers who do not wish to pursue medical support.

Attachments I and II are staff designated by the LHD and LDSS as the respective MCHP contact person for the local department. Local jurisdictions must develop procedures between the LHD and LDSS to transfer cases as appropriate based on the following guidelines. Local departments should develop mutually agreeable procedures that are tailored to the work flow of the specific jurisdiction yet allows them to maintain the integrity of all programs.

LOCAL HEALTH DEPARTMENT RESPONSIBILITIES

When the LHD receives an application for MCHP, the LHD reviews it to determine if it is adequately completed. If necessary, the LHD will contact the applicant to obtain any missing information. The LHD then makes a CARES inquiry to determine if an associated current case (pending, preserved, or active in any other FIA program) exists at the LDSS.

- ▶ If there is no associated current case at the LDSS, the LHD processes the MCHP application (CARES processes J through Q). The LHD retains the case for future maintenance and redeterminations.
- ▶ If an associated current Medical Assistance (MA), Temporary Cash Assistance (TCA) or Food Stamp case exists (pending, preserved, or active), the LHD does not screen or pend the MCHP. The LHD forwards the application and verification of pregnancy, if appropriate, to the LDSS. The LHD notifies the applicant that the application has been forwarded to the LDSS for processing. The LDSS processes the application in accordance with the guidelines below. Local jurisdictions should develop appropriate tracking procedures to ensure efficient coordination and timely processing of these applications.

The MCHP application does not contain a field for requests for retroactive Medical assistance or for other FIA programs such as Food Stamps or Temporary Cash Assistance, nor are LHDs authorized to accept applications for these other programs. If a customer indicates a need for other benefits the LHD must advise the customer that an application for those benefits must be made at the LDSS.

- ▶ In such a case, the LHD completes the eligibility determination for MCHP and maintains the case record.
- ▶ If the customer does apply for additional benefits at the LDSS, upon notification from the LDSS, the LHD will transfer the case to the LDSS for a determination of eligibility for those benefits.
 - ▶ While a current case (active, pending or preserved) for other benefits exists, the case will be maintained at the LDSS.
 - ▶ When the case is denied current benefits, or any retroactive determination is completed, the case will be transferred back to the LHD for maintenance of the MCHP eligibility.

LOCAL DEPARTMENT OF SOCIAL SERVICES PROCEDURES

When the LDSS receives an application for MCHP the LDSS completes a CARES inquiry to determine if an associated case exists. The LDSS follows the procedures below for MCHP applications:

- I. No associated case - If there is no associated current case (pending, preserved, or active in any other FIA program) the LDSS and LHD jointly must select one of the following options:

A. The LDSS processes the case (J through Q) within ten days of the date of application and transfers the case to the LHD for future maintenance and redeterminations.

OR

B. Forwards the application immediately to the LHD. The LHD processes the case (J through Q) within ten days of the date of application and retains the case for future maintenance and redeterminations.

When a decision is reached between the LDSS and LHD as to which option to use, it should be applied consistently in that jurisdiction. Any application filed by a pregnant woman should be completed as quickly as possible, regardless of which agency is making the eligibility determination. This must be considered when local jurisdictions evaluate these options.

II. Associated MA or TCA - If the associated case is a current pending, preserved or active TCA or MA case:

A. If the case is already active TCA or MA in a Family track or the pending case when finalized is eligible for current coverage of the child/children in any of the MA tracks (with the exception of PWC), no additional consideration of the MCHP application is required. Note receipt of the MCHP application and retain it in the case record.

B. If the associated active MA case is in another track and does not include the child for whom MCHP is requested, process (J through Q) the MCHP application. If eligible when finalized, retain the MCHP at the LDSS for all future redeterminations as long as there is an associated MA case.

C. If the case is already active PWC only or when a pending case is found eligible in coverage groups P02 through P14 and no other pending, preserved or active associated case exists, transfer the completed case to the LHD for future maintenance and redeterminations. If already active, update the case using the MCHP application to complete a redetermination if necessary, before transferring it to the LHD.

D. If the pending TCA case is denied when finalized, CARES automatically tests MA eligibility in the Family track. If the pending case (TCA or FAC) is ineligible for current coverage in the Family track due to excess income it trickles to spenddown, F99 ("preserved" with "M" status). Retain the preserved case throughout the consideration period.

I. If a customer presents medical expenses for consideration of spenddown, follow existing procedures to process the spenddown. If the case meets FAC eligibility when finalized, the entire family is eligible in F99. Retain the case through the consideration period and follow existing redetermination procedures at the end of the period. If the family does not meet eligibility for FAC at the redetermination, consider eligibility for MCHP at that time

2. If the customer has insufficient medical expenses to meet spenddown, add a program in the PWC track and process the MCHP (O through Q). *It is no longer necessary to close or deny the F99 in order to "Add a Program" in the PWC track. CARES now allows an active MCHP concurrently with a preserved FAC in dual tracks.* Retain the MCHP and the preserved case throughout the consideration period. Should the customer submit medical expenses during the period, follow existing procedures to process the spenddown. At the end of the preserved period, if no other pending, preserved or active associated case exists. transfer the MCHP to the LHD.

E. If the associated case is in preserved only status in any MA track, retain the preserved AU through the consideration period, following the procedures in D. 1 and 2, above.

III. Associated FS only case - If an associated Food Stamp (FS) only case exists (pending or active), the FIA case manager screens the MCHP to "Add a Program" (J).

A. If the FS case is already active, process the pending MCHP case (O through Q) and if eligible when finalized, retain the FS and the MCHP cases and process all future redeterminations for both AUs.

B. If the FS case is pending, process the pending FS and MCHP cases (O through Q) and if the applicant is eligible for FS and MCHP when finalized, retain both AUs and process all future redeterminations for MCHP as long as the customer remains eligible for FS.

C. If the pending FS case is ineligible when finalized, but the MCHP is approved, if no associated pending, preserved or active AU exists, transfer the completed MCHP case to the LHD for future maintenance and redeterminations.

When LDSS is in receipt of enough information to finalize the MCHP application but does not have needed verifications to finalize application for an associated case, the FIA case manager is expected to exercise good judgement in determining whether to complete the MCHP application immediately. The case manager must consider the purpose of the program and the need for immediate medical attention or prenatal care in making a decision to complete the case immediately or hold it to be completed with the associated case. Any application filed by a pregnant woman should be completed as quickly as possible.

INQUIRIES: May be directed to Phyliss J. Arrington, FIA Program Analyst on (410) 767-7079. CARES questions may be directed to Nicole Pyles on (410) 767-7957. Local Health Department staff may direct inquiries to Christine Gerhardt at DHMH on (410) 767-5221.

cc:	DHR Executive Staff	FIA Management Staff
	DHMH Executive Staff	FIA Trainers
	DHMH Management Staff	Constituent Services

**LOCAL DEPARTMENT of SOCIAL SERVICES
MCHP LIAISONS**

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