



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

Larry Hogan, Governor — Boyd Rutherford, Lt. Governor — Dennis R. Schrader, Secretary

February 24, 2017

The Honorable Thomas M. Middleton
Chair
Senate Finance Committee
3 East Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Shane E. Pendergrass
Chair
House Health and Government Operations
Committee
241 House Office Bldg.
Annapolis, MD 21401-1991

The Honorable Edward J. Kasemeyer
Chair
Senate Budget and Taxation Committee
3 West Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Maggie McIntosh
Chair
House Appropriations Committee
121 House Office Bldg.
Annapolis, MD 21401-1991

Re: HB 1181 (Chapter 303 of the Acts of 2016) – Report on the State's Progress in Determining the Eligibility of Applicants for Long-Term Care Services Under the Medical Assistance Program Within 30 Days

Dear Chairs Middleton, Kasemeyer, Pendergrass and McIntosh:

Enclosed please find a report pursuant to HB 1181 – *Maryland Medical Assistance Program – Determinations of Eligibility for Long-Term Care Services – Reports and Meetings*, which passed during the 2016 legislative session of the General Assembly. The report addresses the State's progress in determining the eligibility of applicants for long-term care services under the Maryland Medical Assistance program within 30 days after the filing of the applications as required by State law.

Thank you for your consideration of this information. If you have questions or need more information on the subjects included in this report, please contact Webster Ye, Director of Governmental Affairs at (410) 767-6480.

Sincerely,

Dennis R. Schrader
Secretary

Enclosure

cc: Lourdes R. Padilla, Secretary of Human Resources
Shannon McMahon
Debbie Ruppert
Vesta Kimble
Webster Ye
Sarah Albert, MSAR #10764

**REPORT ON THE STATE'S PROGRESS IN DETERMINING LONG-TERM CARE
SERVICES ELIGIBILITY**

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE

MARYLAND DEPARTMENT OF HUMAN RESOURCES

HB 1181 – Chapter 303 of the Acts of 2016

January 1, 2017

2016 REPORT REQUIREMENT

The Department of Health and Mental Hygiene (DHMH), in consultation with the Department of Human Resources (DHR), is required by HB 1181 (Ch. 303 of the Acts of 2016) to report on the State's progress in determining the eligibility of applicants for long-term care (LTC) services under the Maryland Medical Assistance Program within 30 days after the filing of the applications as required under State law.

OVERVIEW

Effective July 2016, DHR introduced an initiative to further streamline application processing by developing a tracking system to track LTC application processing every 15 days. This report shows the progress to date in improving the processing of applications within the 30-day timeframe.

1. The number of new applications filed each month with each local department of social services (LDSS), the Bureau of Long-Term Care (BLTC) and the DHMH Waiver Unit.

DHR continued to track the number of new applications filed each month for Long-Term Care Medicaid in each LDSS, BLTC and the DHMH Waiver Unit. *Table 1* shows the numbers filed for each LDSS, the BLTC and the DHMH Waiver Unit.

	Totals	BLTC	Allentown	Calvert	Caroline	Carrall	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Queen Anne's	St. Mary's	Somerset	Talbot	Washington	Wicomico	Worcester	DHMH Waiver Unit
Applications filed in June 2016	778	413	29	16	6	28	11	10	7	31	4	37	15	2	75	10	13	9	11	33	8	10	0
Applications filed in July 2016	724	386	37	4	11	15	15	13	5	41	9	21	7	6	57	3	13	9	7	32	19	12	2
Applications filed in August 2016	729	383	27	9	6	22	12	21	3	28	11	27	19	1	75	7	12	9	4	26	17	7	3
Applications filed in September 2016	675	343	31	8	4	13	21	13	11	32	10	23	17	5	54	4	8	8	6	36	17	9	2
Applications filed in October 2016	571	313	26	7	5	23	12	12	6	12	11	28	16	5	34	2	8	6	2	23	18	2	0
Applications filed in November 2016	552	358	13	4	2	11	15	19	8	16	6	23	16	2	0	0	10	7	1	23	13	5	0

Table 1. Long-Term Care Applications Filed, by Month, by Jurisdiction

2. Information on pending eligibility cases, including, to the extent available, detailed information on the length of time beyond 30 days it is taking for the State to complete eligibility determinations, with a breakdown of the information presented in 15-day increments.

DHR continued to track the status of each new long-term care application filed. *Table 2* shows the progress, as of November 30, 2016, with approvals and denials of the applications filed from June through November. On average, about one-third of the applications are approved or denied within 30 days. *Tables 3 through 7* present the information, in 15-day increments, about the status of the applications that were in a pending status after the 30th day of pending.

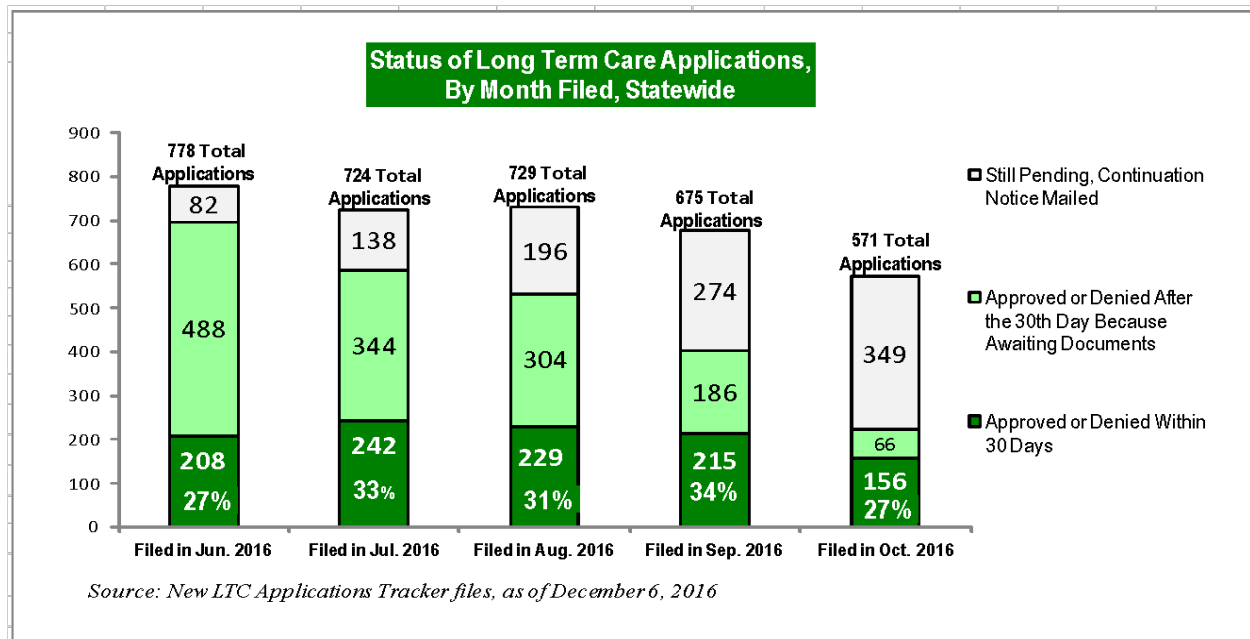


Table 2. Status of Long-Term Care Applications, by Month Filed, Statewide.

	Status of Applications Pending Longer Than 30 Days											
	6/15/2016	6/30/2016	7/15/2016	7/30/2016	8/15/2016	8/31/2016	9/15/2016	9/30/2016	10/15/2016	10/31/2016	11/15/2016	11/30/2016
Jun-16	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals
App Reviewed	86	306					5	1				6
1052 Issued	155	335	372	285	202	85	23	7	2	3	2	
Good Cause/ Reasonable Certainty Under Review		1	2	6		2						
Some Docs on 1052 Returned	3	52	134	224	253	201	80	39	22	15	20	63
All Docs on 1052 Returned			1	6		2	18	2	1		6	3
Ready to Work		3	9	19	24	6	5	10	4	6	2	2
Revised 1052 or 4210 Mailed	7	21	46	60	45	29	18	18	8	8	6	
At State Review Team											1	1
4th Month Friendly Reminder Sent							51	121	21	5	5	
5th Month Friendly Reminder Sent									86	78	39	
30-day Extension Granted		4	7	9	9	3	1		1	1	1	7
Unsatisfied debt -- In Recovery												
In Appeal					1	1			1			
Awaiting 257 Form						13	9	9	6	6	3	

Table 3. Status of Applications Filed in June 2016 and Pending Longer Than 30 Days

	Status of Applications Pending Longer Than 30 Days									
	7/15/2016	7/30/2016	8/15/2016	8/31/2016	9/15/2016	9/30/2016	10/15/2016	10/31/2016	11/15/2016	11/30/2016
Jul-16	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals
App Reviewed	138	244	27	26	15	3				
1052 Issued	149	374	399	175	106	84	28	7		
Good Cause/ Reasonable Certainty Under Review		1	6	1	1			1		
Some Docs on 1052 Returned	8	37	145	151	130	122	154	103	24	39
All Docs on 1052 Returned			4	16	6	2	1	2	7	1
Ready to Work		2	6	11	10	8	14	8	3	
Revised 1052 or 4210 Mailed	5	10	35	45	33	38	26	20	12	2
At State Review Team										
4th Month Friendly Reminder Sent								80	118	36
5th Month Friendly Reminder Sent									54	59
30-day Extension Granted			12	4	3					
Unsatisfied debt -- In Recovery										
In Appeal				4	1					
Awaiting 257 Form				14	31	27	22	12	7	1

Table 4. Status of Applications Filed in July 2016 and Pending Longer Than 30 Days

**Status of Applications Pending
Longer Than 30 Days**

	8/15/2016	8/31/2016	9/15/2016	9/30/2016	10/15/2016	10/31/2016	11/15/2016	11/30/2016
Aug-16	Totals	Totals	Totals	Totals	Totals	Totals	Totals	Totals
App Reviewed	132	216	32	3		1	1	
1052 Issued	178	390	348	199	101	75	34	24
Good Cause/ Reasonable Certainty Under Review	1				1	1		
Some Docs on 1052 Returned	4	47	114	156	163	121	88	65
All Docs on 1052 Returned	1	3	4	3	3	5	4	9
Ready to Work	1	4	9	22	7	11	7	3
Revised 1052 or 4210 Mailed		8	32	54	38	38	15	1
At State Review Team								
4th Month Friendly Reminder Sent							92	83
5th Month Friendly Reminder Sent								9
30-day Extension Granted			13	17	9	2	1	
Unsatisfied debt -- In Recovery								
In Appeal					1			
Awaiting 257 Form		11	18	49	34	23	15	2

Table 5. Status of Applications Filed in August 2016 and Pending Longer Than 30 Days

Status of Applications Pending Longer Than 30 Days						
	9/15/2016	9/30/2016	10/15/2016	10/31/2016	11/15/2016	11/30/2016
Sep-16	Totals	Totals	Totals	Totals	Totals	Totals
App Reviewed	98	188	12	1		
1052 Issued	108	295	266	136	92	51
Good Cause/ Reasonable Certainty Under Review						
Some Docs on 1052 Returned	2	53	130	171	156	155
All Docs on 1052 Returned		3	4	8		4
Ready to Work	2	5	10	3	12	7
Revised 1052 or 4210 Mailed		13	29	45	29	32
At State Review Team						
4th Month Friendly Reminder Sent			1		1	9
5th Month Friendly Reminder Sent						
30-day Extension Granted		1	14	14	5	2
Unsatisfied debt -- In Recovery		2	2	1		
In Appeal						
Awaiting 257 Form	8	28	27	22	19	14

Table 6. Status of Applications Filed in September 2016 and Pending Longer Than 30 Days

	Status of Applications Pending Longer Than 30 Days			
	10/15/2016	10/31/2016	11/15/2016	11/30/2016
Oct-16	Totals	Totals	Totals	Totals
App Reviewed	87	146	20	5
1052 Issued	88	283	249	138
Good Cause/ Reasonable Certainty Under Review				
Some Docs on 1052 Returned	2	31	75	121
All Docs on 1052 Returned	1	2	4	3
Ready to Work	4	11	10	4
Revised 1052 or 4210 Mailed		10	29	41
At State Review Team				
4th Month Friendly Reminder Sent				
5th Month Friendly Reminder Sent				
30-day Extension Granted			11	16
Unsatisfied debt -- In Recovery				
In Appeal				
Awaiting 257 Form	9	11	19	21

Table 7. Status of Applications Filed in October 2016 and Pending Longer Than 30 Days

3. Steps being taken by the State to achieve compliance with the requirement in State law that eligibility determinations be completed within 30 days after the filing of an application.

- DHR convened an additional strategy session on October 17, 2016 with DHR, DHMH and Long-Term Care industry representatives to explore specific reasons why certain applications could not be processed within 30 days. Three principal factors were identified as the reason for the delays: 1) some applications for Long-Term Care (LTC) Medical Assistance (MA) were filed prematurely during the time that the customer was covered by Medicare copay days (and thus not yet eligible for LTC MA); 2) some applications were filed prematurely because the customer was still covered by another type of Medical Assistance (and thus not yet eligible for LTC MA); and, 3) the customer's stay was less than 30 days and therefore an LTC MA application was not necessary.
- As a result of the mapping session, DHR instructed its local offices and the Bureau of Long Term Care to examine all applications already filed in order to identify which applications that were still pending fell into one of the three categories.
- DHR will procure an automated Asset Verification System to verify financial assets and real property that will minimize the need to request documents from the authorized representative.
- **Written Guidance for LTC eligibility processing provided to LTC staff:** SOP 16-04, Increasing Personal Needs Allowance to Permit Guardianship Fee Payment. LTC staff will be notified that effective January 1, 2017, Managed Care Organizations (MCO's) will be responsible for their members for up to 90 days instead of 30 days. LTC staff will be reminded how to process Long-Term Care Patient Activity Reports (DHMH 257) for submitted LTC MA applicants during the eligibility period that is the responsibility of the MCO.
- **Written Guidance to Nursing Facilities, Speciality Pediatric Hospitals and Chronic Hospitals** of their Roles and Responsibilities when Admitting HealthChoice Managed Care Organization (MCO) Members. The guidance informs that effective January 1, 2017, MCO's will be responsible for their members for up to 90 days. It also reminds Facility staff to verify Medicaid eligibility using the State's online Eligibility Verification System (EVS) to determine Medicaid status and to identify if the individual is enrolled in an MCO. The identified guidelines for responsibility for payment for MCO Members should significantly reduce premature and inappropriate LTC MA applications filed by Facility staff.

4. A timeline for achieving compliance with the 30-day requirement.

The procurement of an Asset Verification System is expected to hasten the processing for at least 84% of the applications that are filed because it can return to the case manager within 10 days the necessary proof of financial and real property assets that need to be considered for the application. The anticipated start date of the system is March 2017.

5. Information on:

(i) improvements made to the technology systems used to determine eligibility

- Planning continues in order to create a Long-Term Care eligibility module that will determine eligibility as well as track applications and monitor action on them. Funding for improvements is dependent upon the Implementation Advance Planning Document that DHR, DHMH and the Maryland Health Benefit Exchange are submitting for federal funding.

(ii) any planned improvements to the technology systems, including the implementation of an asset verification system, with a time frame for implementation of the planned improvements

- Provide guidance in the *myDHR* portal to help online applicants understand when is the correct time to apply for LTC MA, anticipated for launch in January 2017.
- Improvements to *myDHR* will include adding all the fields necessary for a complete online application so that paper applications are no longer needed, anticipated for launch by February 2017.
- Allow authorized representatives to upload documents when filing applications on *myDHR*, anticipated for launch in early 2017.
- Procure an Asset Verification System (AVS), scheduled for implementation in March 2017.
- Long-term modernization goals for Medicaid are dependent upon federal funding.

6. DHMH, in collaboration with DHR, shall conduct quarterly meetings with interested stakeholders to discuss the report and develop strategies to resolve ongoing issues with and delays in eligibility determinations for long-term care services under the Maryland Medical Assistance Program.

For several years, DHR and DHMH have convened quarterly meetings of the Long-Term Care Advisory Workgroup. The latest meeting was held on December 12, 2016. The meetings have a formal agenda, including items that Workgroup members submit in advance, and membership in the workgroup includes key DHR and DHMH staff as well as representatives from elder care law firms, Legal Aid Bureau, long-term care facilities and industry groups that represent the interests of long-term care facilities.

DHMH and DHR will continue to meet on at least a monthly basis to develop strategies to resolve ongoing issues with any delays in eligibility determinations for long-term care services under the Maryland Medical Assistance Program. In addition, as agreed at the December meeting a breakout working group will convene in January 2017 to address two legally and technically intensive issues which require closer collaboration between agency representatives and community advocates.

CONCLUSION

Maryland is committed to collaborating with long-term care providers and advocates in developing strategies to hasten the processing of LTC applications and redeterminations. We will continuously evaluate and explore opportunities to streamline processes and improve compliance with application processing.