KEES Job Aid – Child in Hospital 30 Days or More

Objective

The goal of this job aid is to provide guidelines for processing an application for a child who has been or is anticipated to be in a general hospital 30 days or more.

Overview

A MAGI determination is required for a child in a general or specialty hospital. However, if not eligible for MAGI, or while the MAGI determination is pending, the child can be approved for Institutional Care – General Hospital (IC-GH) provided the child has already been in the hospital for 30 days or more. If the child is anticipated to be in the hospital 30 days or more, Institutional Care – General Hospital (IC-GH) cannot be approved until the 30 day timeframe is met.

Special provisions apply when approving the Institutional Care – General Hospital (IC-GH).

- A 2126 is NOT required
- A CARE assessment is not required
- The parent(s) income is not counted for Institutional Care – General Hospital (IC-GH)
- There is no resource test for children on Institutional Care – General Hospital (IC-GH)
- A Medical Condition is NOT needed for the child.

This job aid does NOT apply to children who are requesting HCBS, are in a PRTF, State Hospital or other stay requiring an MS-2126. Nor does it apply to children who are anticipated to be in the hospital less than 30 days.

An application where LTC is being requested for a child in a hospital will be registered on a LTC program block and assigned to the LTC ghost Worker ID. Registration staff will e-mail E&DSpecialtyApplicaiton@maximus.com the app was received. The application will be assigned to an Advanced Workers. The Advanced Worker will be responsible for screening for both MAGI eligibility, and if needed, Institutional Care – General Hospital (IC-GH) eligibility following the steps outlined below.

If the child did not request LTC, but is later identified as having been in (or anticipated to be in) a general or specialty hospital for 30 days or more, the worker should place the task on hold, reassign the program block to the LTC ghost worker ID, reassign the task to the LTC Eligibility queue and e-mail E&DSpecialtyApplicaiton@maximus.com to let them know the application has been received.

Process

1. **Navigate to the case**
   a. From the e-mail, identify the case number. Paste the case number into the case number search field (left side of screen). Click Go.

b. Click the eligibility tab in the global navigation bar.

Case Info	Eligibility	Services	Child Care	Resource Databank	Fiscal	Special Units	Reports

Workload Inventory	Case Summary	Customer Information	Reporting	Distributed Documents	Customer

2. **Review the Case**

a. From Case Summary, determine how the application was registered. What type of RMT does the child have, what type of program block was registered, and to what ghost Worker ID is the child assigned.

b. Claim the task and determine if there are other tasks which need to be claimed and worked at the same time as the application for the child.

   i. Click on 'Tasks' hyperlink at the top of the page.

Journal	Tasks	Reminders	Contact Log	Logout	Help
			User : Elig Sup 2 CH Contractor		
			Env : NPD24		
Reports	Document Control	Admin Tools	Worker Portal	: 11/16/2015 02:15 PM	

   ii. Task Management displays. Click the Claim button to claim the task(s) to be worked. If a Claim button does not appear, click on the task hyperlink. The Task Details pop up window will display. Click on the Release button. Task Details will disappear. Close the Task Management window and then reopen the window. The task should now display with a Claim button.

Case	Tasks:				Add Task
Page: 2					▼ 1 2
Task	Queue	Received Date	Status	Actions	
Income Change	Eligibility	06/23/2015	New	Claim / Void	
Address Change	Contact Updates	06/23/2015	New	Claim / Void	
Assigned Tasks:					
Task	Queue	Name	Status Reason	Actions	
No Results					
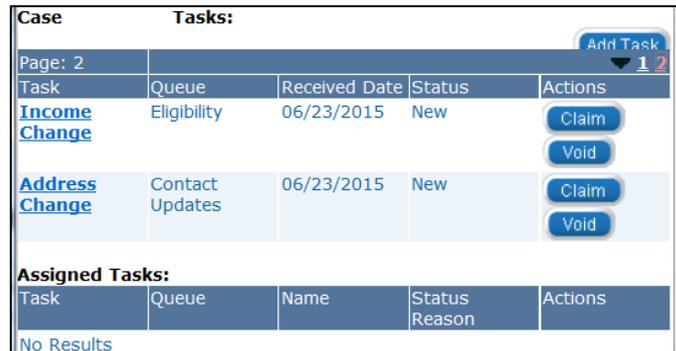
c. Click on the 'Journal' hyperlink at the top of the page. The Journal displays. Change the view to the last year and review recent journal entries on the case for relevant information.

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3. **Update RMT to MAGI and screen for MAGI eligibility**
Update the RMT to MAGI (but leave the Worker ID in the LTC ghost). Screen the application for MAGI eligibility following normal processes.

If information needs requested, skip to Step 8.

4. **All information is available**
If all information is available, there will three possible outcomes:

    a. The child is Medicaid eligible – proceed to Step 5.
    b. The child is eligible for CHIP – proceed to Step 6.
    c. The child is ineligible for MAGI – proceed to Step 7.

5. **Medicaid Eligible**
    a. If child is eligible for Medicaid under a MAGI category, IC-GH will not be applicable. The child will be approved under MAGI following normal processes with the exception being the application will be processed by an Advanced Worker on the State side and the task should be routed to the LTC-State queue.

    b. Update the Worker ID to the Eligibility ghost Worker ID.
    Note: If the Worker ID is set to the LTC ghost at the point the task is created for the state, the task is routed to the LTC-State queue automatically. However, if set to the Eligibility ghost when the task is created, the task will need reassigned to the LTC-State queue.

    c. The remainder of the Job Aid does not apply. Skip to Step 17.

6. **CHIP eligible**
    a. If the child is CHIP eligible, reassign the Worker ID to the Eligibility ghost and approve CHIP following normal processes.

    b. If 30 days have not yet elapsed since the child entered the hospital, put the task on hold. Set the due date to the 30th day in the hospital. IC-GH cannot be approved (to fill the gap) until the child has been in the hospital 30 days or more.

    c. If 30 days have elapsed (or once the 30 days elapse), contact the hospital and confirm the admission date and, if discharged, the discharge date.
        i. If the child was discharged and was actually in the hospital less than 30 days, there is no eligibility for IC-GH. The remainder Job Aid would not apply. Skip to Step 17.
        ii. If the child was in the hospital 30 days or more, IC-GH can be approved to fill the gap. IC-GH will end the month prior to the first full month of CHIP eligibility.

    d. Add a LTC program block. A separate task is NOT needed for the LTC program block.

    e. Skip to Step10.

7. **No Eligibility under MAGI**
   a. If the child is NOT eligible for MAGI, do not proceed with the MAGI determination. Instead, log why they are ineligible then change the RMT back to LTC.

   b. If 30 days have not yet elapsed since the child entered the hospital, put the task on hold until the 30 days have elapsed. IC-GH cannot be approved until the child has been in the hospital 30 days or more.

   c. If 30 days have elapsed (or when 30 days elapse), contact the hospital and confirm the admission date and, if discharged, the discharge date.
      i. If the child was discharged and was actually in the hospital less than 30 days, there is no eligibility for IC-GH. The remainder Job Aid would not apply. Skip to Step 17.

      ii. If the child was in the hospital 30 days or more, IC-GH can be processed. If not yet discharged, create a future task to monitor the child's discharge. Skip to Step 10.

8. **Dual Path – Request Information & Determine if IC-GH Can Be Approved While MAGI is Pending**
   a. If additional information is needed to complete the MAGI determination, request the information.

   b. If 30 days have not yet elapsed since the child entered the hospital, put the task on hold. Set the task due date based upon the due date of the requested information. Skip to 9.

   c. If 30 days have already elapsed, contact the hospital and confirm the admission date and, if discharged, the discharge date.
      i. If the child was discharged and was actually in the hospital less than 30 days, there is no eligibility for IC-GH. The remainder Job Aid would not apply. Skip to Step 17.

      ii. If the child has already been in the hospital 30 days or more, IC-GH can be processed while the MAGI determination is pending.
         1. Add a LTC program block.
         2. A separate task is NOT needed for the LTC program block.
         3. Skip to Step 10.

9. **Information Received**
   If the requested information is received and:
   a. IC-GH was NOT previously approved, skip to Step 12.
   b. IC-GH WAS previously approved, skip to Step 13

10. **Process IC-GH**
    a. Add a LTC Data record
        i. LTC Type = Institutional Care
        ii. Provider = Select the hospital from the RDB
        iii. Admission Date = Date admitted to hospital
        iv. Anticipated Length of Stay = 30 days or more
        v. Current Level of Care = General Hospital
        vi. Cost of Care = $9,999
        vii. Care Screening Met = Yes
        viii. Date Screening Completed = Date Admitted to the Hospital
        ix. Discharge Date = Enter discharge date if applicable.

    b. Run EDBC on the LTC program block for all months which the State worker will need to run EDBC. Do NOT Save and Accept. Click the Eligible Budget hyperlink and make sure the LTC Details show as IC-GH with the correct start and end dates for each month run.

    c. Journal – Log the admission date and whether the child has been discharged or not. If discharged, log the discharge date. If IC-GH will be both approved and discontinued by the state when the app is processed, provide start and end dates for IC-GH and rationale as to why IC-GH is being discontinued.

    d. Send to the State (LTC-State queue). After the task is created, check and make sure it is in the LTC-State queue. If necessary, navigate to the Task Inventory screen and reassign the task to the correct queue.

    e. Send an e-mail to BDohrman@kdheks.gov and RAltman@kdheks.gov with a subject line of – Child in Hospital. They will then assign the task to an advanced state worker for processing.

    f. If no information remains pending for the MAGI determination, the remainder of the job aid does not apply. Skip to Step 17.

11. **Information Not Provided**
    When the due date for the information has passed, and the required information is not provided:
    a. Set up the Non-Compliance record and deny the FM program block due to FTP.
    b. Send NOA.
    c. Remove the Non-Compliance record.
    d. If IC-GH WAS approved while MAGI was pending
        i. Contact the hospital to determine if the child has been discharged.
        ii. If not yet discharged, create a future task to monitor the discharge. Skip to Step 17.
        iii. If child was discharged, determine when coverage will end allowing for timely notice.

    iv.   Update the LTC Data Detail with discharge information. Enter the discharge date as the last day of eligibility for IC-GH. For example, if timely notice can be given to close 8/31/2016, then enter a discharge date of 8/31/2016.

    v.   Run EDBC on the LTC program block for the last month of IC-GH eligibility and the come up month. In the example above, EDBC would be run for 08/2016 (last month of IC-GH) and for 09/2016 (to discontinue IC-GH coverage).

Note: If EDBC is not re-run for the last eligible IC-GH month, the LOC screen is not updated with an end date in MMIS. This causes problems if the child subsequently is approved for a MAGI program as the cap payment would be made at the IC-GH rate instead of at the MAGI rate.

    vi.   Journal and send NOA regarding IC-GH closure. A facility notice is not required.

    vii.   Set the task to complete

  e. If IC-GH WAS NOT approved while MAGI was pending (because child had not yet been in hospital 30 days or more):

    i.   Determine if the 30 days has now elapsed.

    ii.   If not, change the due date on the task to when the 30 days will expire.

    iii.   If the 30 days has elapsed (or when the 30 days elapse), contact the hospital and confirm the admission date and, if discharged, the discharge date.

        1.   If the child was discharged and was actually in the hospital less than 30 days, there is no eligibility for IC-GH. The remainder Job Aid would not apply. Skip to Step 17.

        2.   If the child has been discharged, and was in the hospital 30 days or more, IC-GH can be processed but cannot extend past the month of discharge. Return to Step 10 for instructions on how to process the IC-GH.

        3.   If the child has been in the hospital 30 days or more, and is still in the hospital, IC-GH can be processed. Set a future task to monitor the child's release from the hospital. Return to Step 10 for instructions on how to process the IC-GH.

12. **Information Provided – IC-GH NOT Previously Approved**

If all needed information is provided and IC-GH was NOT previously been approved, complete Steps 4 – 7 then skip to Step 10 above.

13. **Information Provided - IC-GH Previously Approved**

If all needed information is provided and IC-GH coverage WAS already approved:

  a. If Medicaid Eligible under a MAGI category, skip to Step 14.

  b. If CHIP Eligible, skip to Step 15

  c. If Ineligible for MAGI, skip to Step 16.

14. **Medicaid Eligible – IC-GH Previously Approved**

   a. Update LTC Data with discharge information. Enter the last day of the month prior to the come-up month as the date of discharge.

   b. Either add a MAGI program block or add the child to an existing MAGI program block starting with the month of application.

   c. On the MAGI program block, run EDBC for the month of application (and prior medical months if requested) up through the current month to ensure they build the correct budgets. Do not Save and Accept EDBC.

   d. On the LTC program block, run EDBC for the month prior to the come-up month (to ensure LTC Details are end dated appropriately) and the come-up month (to ensure IC-GH is discontinued appropriately). Do not Save and Accept EDBC. <u>The IC-GH should remain open. When the State authorizes MAGI coverage, they will also discontinue the IC-GH. This will prevent a break in coverage.</u>

      Note: If the come-up month changes before the State worker can process the case, the LTC Data Detail will need to be updated to the last day prior to the come-up month.

   e. Journal

   f. Complete the task and create a task for the state. And remember, the task must be in the LTC-State queue as the application must be processed by an Advanced State Worker even though MAGI is being approved.

   g. Send an e-mail to BDohrman@kdheks.gov and RAltman@kdheks.gov with a subject line of Child in Hospital.

15. **CHIP Eligible – IC-GH Previously Approved**

   a. Update LTC Data with discharge information. Enter the last day of the month prior to the come-up month as the date of discharge.

   b. If the child is CHIP eligible, add the child onto a MAGI program block (do not change the RMT on the existing LTC program block). Use the correct application date and follow the normal CHIP processing guidelines. IC-GH will not be overlaid by CHIP eligibility, but the CE dates and Review dates for CHIP are correctly set based on the CHIP approval.

   c. On the LTC program block, run EDBC for the month prior to the come-up month (to ensure LTC Details are end dated appropriately) and the come-up month (to ensure IC-GH is discontinued appropriately).

    d. Send NOAs

    e. Journal

    f. Complete the task.

16. **Not Eligible for MAGI – Previously Approved for IC-GH**

    a. Contact the hospital to determine if the child has been discharged.

    b. If not yet discharged, create a future task to monitor the discharge. Then skip to Step 17.

    c. If the child has been discharged, determine, based on timely notice, when coverage will end.

    d. Update the LTC Data Detail with discharge information. Enter the discharge date as the last day of eligibility for IC-GH. For example, if timely notice can be given to close 8/31/2016, then enter a discharge date of 8/31/2016.

    e. Run EDBC on the LTC program block for the last month of IC-GH eligibility and the come up month. In the example above, EDBC would be run for 08/2016 (the last month of IC-GH) and for 09/2016 (to discontinue IC-GH coverage).

17. **End of Process**