

SUBJECT:Medical Assistance PolicyNUMBER:CS/RS-917-19APPLICABLE TO:Community and Residential CMS and CMSS

/s/ signature on original
Sam Abed, Secretary
6/11/19

I. <u>POLICY</u>

DJS staff shall complete a Medical Assistance (MA) application for every eligible youth to assist with payment of medical care and mental health services. Eligible youth include:

- youth committed to DJS for placement in-state or out-of-state in privatelyoperated residential youth care programs (e.g., foster family homes, group homes, shelters, non-DJS owned or operated residential facilities, and Long Term Care Facilities (LTCF));
- youth who lost their MA while in detention awaiting disposition and have returned home;
- youth in a detention facility, committed to DJS and pending placement in a MA eligible placement may be eligible, and
- youth leaving an out-of-home placement to return home or to another permanent living situation.

DJS Case Management Specialists (CMS) shall follow the procedures when making an application for MA eligibility. The CMS shall collaborate with the Local Department of Social Services' (LDSS) MA Eligibility Worker, and the Youth Welfare Case Manager (LDSS Social Worker/ Case Worker), when required, to ensure that eligible DJS youth have MA available for their care and/or treatment.

II. <u>AUTHORITY</u>

- A. 42 CFR Part 435.
- B. Md. Code Ann., Human Services, §9-203 and §9-204.
- C. COMAR 10.09.24.
- D. Department of Human Resources, Family Investment Administration, Action Transmittal #11-19, Medical Assistance Eligibility Determinations for Youth in and Leaving the Care and Custody of the Department of Juvenile Services, effective April 1, 2011.

III. <u>DIRECTIVES/POLICIES RESCINDED</u>

Medical Assistance Policy, OPS-917-16

Medical Assistance Policy CS/RS-917-19 May 9, 2023

IV. FAILURE TO COMPLY

Failure to comply with the Department's Policy and Procedures shall be grounds for disciplinary action up to and including termination of employment.

V. <u>STANDARD OPERATING PROCEDURES</u>

A standard operating procedural manual (CMS Medical Assistance Manual) has been developed and is attached to this policy.

VI. <u>REVISION HISTORY</u>

DESCRIPTION OF REVISION	DATE OF
	REVISION
New policy issued. New manual developed.	10/28/16
Revised policy number and procedures. Procedures revised:	6/11/19
Added LTCF definition	
Updated MCO web address	
Improved procedures for MA application upon	
admission to hospital or LTCF	
Revised procedures:	3/8/21
• Updated list of MCOs	
Removed Redetermination procedures - merged	
into Changes section	
• Updated Department of Health and Mental Hygiene	
(DHMH) to Maryland Department of Health	
(MDH)	
Revised procedures:	5/9/23
 Updated MCO list of providers 	
Removed training procedures	
Updated LTCF procedures	



PROCEDURES

SUBJECT:Medical Assistance PolicyNUMBER:CS/RS-917-19APPLICABLE TO:Community and Residential CMS and CMSS

APPROVED:	A. L. Reason	
	Antonia Reason Acting Deputy Secretary of Operations	
REVISION DATE:	5/9/23	
APPROVED:	athen & Jourson	

Mathew Fonseca Acting Deputy Secretary of Community Services

REVISION DATE:

5/5/23

I. <u>PURPOSE</u>

The CMS Medical Assistance Manual provides statewide procedures for applying for Medical Assistance for eligible DJS youth.

II. <u>RESPONSIBILITY</u>

Superintendents and Regional Directors are responsible for implementation and compliance with this procedure.

III. <u>INTERPRETATION</u>

The Deputy Secretary for Operations shall be responsible for interpreting and granting any exceptions to these procedures.

- IV. <u>LOCAL OPERATING PROCEDURES REQUIRED</u> No
- V. <u>DIRECTIVES/POLICIES REFERENCED</u> No policies referenced.

VI. <u>APPENDICES</u>

1. CMS Medical Assistance Manual



DJS POLICY AND STANDARD OPERATING PROCEDURES

Statement of Receipt and Acknowledgment of Review and Understanding

SUBJECT:Medical Assistance PolicyNUMBER:CS/RS-917-19APPLICABLE TO:Community and Residential CMS andCMSS REVISION DATE:May 9, 2023

I have received and reviewed a copy (electronic or paper) of the above titled policy and procedures. I understand the contents of the policy and procedures.

I understand that failure to sign this acknowledgment form within five working days of receipt of the policy shall be grounds for disciplinary action up to and including termination of employment.

I understand that I will be held accountable for implementing this policy even if I fail to sign this acknowledgment form.

SIGNATURE

PRINT FULL NAME

DATE

WORK LOCATION

SEND THE SIGNED COPY TO YOUR SUPERVISOR FOR PLACEMENT IN YOUR PERSONNEL FILE.

MAY 2023



CMS MEDICAL Assistance Manual

CMS Medical Assistance Manual Community & Residential Services

The CMS Medical Assistance Manual was approved on October 28, 2016 and is subject to annual revision as part of the policy review cycle.

DEPARTMENT OF JUVENILE SERVICES 217 E REDWOOD ST. BALTIMORE, MD 21202

TABLE OF CONTENTS	
INTRODUCTION	3
DEFINITIONS	4
APPLICATION PROCEDURES	5
Supplemental security Income (SSI)	
DETENTION	
Shelter6	
Сомміттед6	
COMPLETING AN APPLICATION	
ELIGIBILITY DETERMINATION	8
ENROLLING IN AN MCO	
Changing an MCO	
Reporting changes	
ELIGIBILITY REDETERMINATION	9
CASE CLOSURE.	9
GENERAL PROCEDURES AT RELEASE/DISCHARGE	
Specific Guidance for Release/Discharge Based on Placement Type 10	
TABLE OF ABBREVIATIONS	11
FORMS REFERENCED/APPENDED	11

INTRODUCTION

DJS staff will screen all youth entering out-of-home placement and all youth discharged from out-of-home placement, to ensure that eligible youth have access to Medicaid/Medical Assistance (MA) to assist with the cost of their medical care and mental health services.

Generally, youth who are in a DJS-operated facility are not eligible for MA; however, if a youth has been referred to a MA eligible placement, then an application shall be filed.

Youth who may be eligible for Medicaid include:

- all youth committed to DJS for placement in-state or out-of-state in privately-operated residential youth care programs (e.g., foster family homes, group homes, shelters, non-DJS owned or operated residential facilities, and Long Term Care Facilities(LTCF));
- youth who lost their MA while in detention awaiting disposition and have returned home;
- youth in a detention facility, committed to DJS and pending placement in a MA eligible placement may be eligible, and
- all youth leaving an out-of-home placement to return home or to another permanent living situation.

DJS Residential and Community Services staff responsible for case management or re-entry shall follow these procedures when requesting MA eligibility determinations for youth committed to DJS and those leaving DJS custody. The CMS working in conjunction with the Local Department of Social Services' (LDSS) MA Eligibility Worker, and the Youth Welfare Case Manager (LDSS Social Worker/Case Worker), when required, will ensure that the MA of youth committed to DJS is available for their care.

The following procedures apply to all youth for whom MA applications are made. Each group has some specialized criteria and specialized circumstances discussed in this manual. The procedures for special circumstances are to be completed along with the MA application.

DEFINITIONS

Foster Care means the 24-hour substitute care for youth placed away from their parents/guardians/ custodians and for whom the state agency has placement and care responsibility. This includes, but is not limited to, placements in:

- foster family homes,
- foster or kinship homes of relatives,
- group homes,
- emergency shelters,
- non-DJS owned/operated residential facilities,
- childcare institutions, or
- pre-adoptive homes.

Long Term Care Facility means a skilled nursing facility, intermediate care facility, intermediate care facility for individuals with intellectual disabilities or persons with related conditions (ICF/IID), chronic hospital, tuberculosis hospital, or mental hospital. Long term care is somatic or behavioral health care provided to a person residing in a Residential Treatment Center (RTC), Regional Institute for Children and Adolescents (RICA), or Institute for Mental Disease (IMD) who requires an intermediate, skilled or chronic level of services.

Managed Care Organization (MCO) is a health care organization that provides services to Medicaid/MA recipients in Maryland. These organizations contract with a network of providers to provide covered services to their enrollees. MCOs are responsible to provide or arrange for the full range of health care services. The following are the 9 MCOs currently participating in HealthChoice.

- Aetna Better Health https://www.aetnabetterhealth.com/maryland/index.html
- Care First Blue Cross Blue Shield Community Health Plan <u>https://www.carefirstchpmd.com/about-us/contact-us</u>
- Jai Medical Systems -<u>http://www.jaimedicalsystems.com/</u>
- Kaiser Permanente-<u>http://www.kp.org/medicaid/md</u>
- Maryland Physicians Care -<u>www.marylandphysicianscare.com/</u>
- MedStar Family Choice -<u>www.medstarfamilychoice.net</u>
- Priority Partners <u>www.ppmco.org/</u>
- UnitedHealthcare <u>www.uhccommunityplan.com</u>
- Wellpoint https://www.wellpoint.com/md/medicaid

Non-state-owned residential facility means the private in-state and out-of-state residential facilities. This includes, but is not limited to, placements in:

- foster family homes,
- foster or kinship homes of relatives,
- group homes,
- emergency shelters,
- non-DJS owned/operated residential facilities,
- childcare institutions, or
- pre-adoptive homes.

State-owned residential facility means the DJS owned and operated detention and committed facilities.

Scheduled redetermination means the redetermination of eligibility that must occur every 12 months according to federal law.

APPLICATION PROCEDURES

SUPPLEMENTAL SECURITY INCOME (SSI)

If during an interview at Admission or Intake, the CMS determines that the youth is receiving SSI, the CMS should document receipt of the SSI as an Alert in ASSIST. Youth who are eligible for SSI are categorically eligible for MA in Maryland.

For youth who are SSI eligible, regardless of placement, the CMS or Re-entry Specialist shall:

- Notify the Youth Assistance Unit so DJS can become the representative payee for the SSI payment when the youth goes to an eligible placement.
- Notify the Youth Assistance Unit upon receiving notification that the youth is no longer receiving an SSI payment.
- Complete the MA application for the youth in accordance with the *Completing an Application* section of this manual.

Eligibility for SSI MA will continue until the LDSS MA Eligibility Worker notifies the CMS or Re-entry Specialist that the Social Security Administration has determined that the youth is no longer eligible for SSI MA.

DETENTION

If a youth is pending adjudication, the CMS should not apply for MA. Youth are not eligible for MA while pending adjudication in detention.

If a youth is placed in a state-owned facility and is admitted to a hospital, including an RTC or RICA. (e.g., in-patient or overnight), the CMS should apply for MA for the hospital stay. At application or upon receipt of the hospital discharge Form, the CMS shall forward the Form to the LDSS MA Eligibility Worker.

If a youth is committed, pending placement and the planned placement is

- A state-owned residential facility, the CMS should not apply for MA;
- A non-state-owned (private) residential facility, the CMS should apply for MA within 10 business days following the Multi-disciplinary Assessment and Staffing Team (MAST) staffing; and
- Either a state or non-state owned placement, and referrals have been made to both, the CMS should apply for MA. Once the youth is placed, notify the MA Specialist of the youth's placement.

If a youth receiving MA is placed in detention longer than ten (10) days, the Community CMS shall notify the LDSS MA Eligibility Worker

SHELTER

The CMS should apply for MA retroactively if medical expenses occur while in Shelter Care, *if the youth is pending adjudication, and*

- has MA or private health insurance, no action is needed; and
- does not have MA or private insurance.

If a youth is committed and the planned placement is

- A state-owned residential facility, the CMS should not apply for MA;
- A non-state-owned (private) residential facility, the CMS should apply for MA; and
- Either a state or non-state owned placement, and referrals have been made to both, the CMS should apply for MA. Once the youth is placed, notify the MA Specialist the youth's placement.

The parents/guardians/custodians should apply for community MA, *if a youth is released from Detention or Shelter to the community,* and the family is not receiving MA. The Community CMS shall provide the parents/guardians/custodians with a copy of the **Parent Guidance Letter (Appendix 2)** within 10 business days of the youth's release to encourage the parents to apply for MA.

COMMITTED

General

. The CMS shall complete a new **HealthChoice Form** within 5 business days of the change to remove a youth MCO and Primary Care Provider with the acceptance letter from the provider or a letter indicating the name of the child, the date of placement, and the name of the placement.

Residential Facility

If youth is placed in a state-owned and operated residential facility, the CMS should not apply for MA.

If a youth is placed in a state-owned facility and later is admitted (e.g., in-patient or overnight) to a hospital or long term care facility (LTCF), the CMS should apply for Community MA.

If youth is placed in a non-state-owned and operated (private) residential facility, the CMS should apply for MA.

Long Term Care Facilities

If the youth is placed in a Long-Term Care Facility (LTCF) (*i.e.,* a Residential Treatment Center (RTC) or a Regional Institute for Children and Adolescents (RICA) or Institute for Mental Disease (IMD),

- At time of acceptance this CMS should apply for community MA and the facility will apply for long term care MA;
- confirm that the LTCF has filed a signed MA application;
- provide the LTCF with the name and contact information of the CMS who will serve as the youth's authorized representative on the MA application.

Foster Care

When a youth is placed in a Foster Care placement, including Independent Living, the CMS shall complete the Foster Care Verification Form (Appendix 3) if the Form was not completed at the time of application.

COMPLETING AN APPLICATION

The CMS must complete a MA application for every youth committed to an in-state or out-of-state residential program or a committed youth who is pending placement to an in-state or out-of-state residential program. A face-to-face interview is not required when a DJS representative files a signed MA application for a youth in a DJS Medicaid eligible placement.

MA applications can be found on the DJS intranet under Medicaid Medical Assistance.

The CMS shall file the completed and signed MA application with the LDSS MA Eligibility Worker with the following:

- The name and address of the youth;
- The youth's demographics (citizenship, date of birth, social security number, race, ethnicity, etc.);
- The expected date of the placement, and the expected release date, if known;
- If an application was not filed at admission and the youth has medical bills from 3 months prior to the date of current application and has no MA or private health insurance coverage, the CMS may apply for retroactive MA for those 3 months;
- Private insurance information and a copy of the insurance card (front and back);
- Absent parent information (both parents are considered to be absent when a youth is in DJS custody);
- A copy of the commitment order;
- A copy of the DJS Physical Attributes screen from ASSIST as proof of identity. The Physical Attributes screen must have all the data completed and the photo must be discernible;
- The contact information for the CMS, including name, address, and phone number;
- If the youth is placed, provide the name, address, and phone number of the residential program;
- Enter the CMS' name as the authorized representative, including contact information; and
- If the youth is placed in Foster Care, the CMS also shall complete the **Foster Care Verification Form (Appendix 3)** and submit with the application.

The CMS shall respond within five (5) business days to inquiries and requests for information made by the LDSS MA Eligibility Worker to facilitate processing of the MA application.

ELIGIBILITY DETERMINATION

$ENROLLING \, IN \, AN \, MCO$

The LDSS MA Eligibility Worker will determine MA eligibility and notify the CMS. Once notified, the CMS must complete the **HealthChoice Form (Appendix 4)** to select a Managed Care Organization (MCO) within 10 calendar days of the MA eligibility date. If the CMS does not select an MCO within 30 days, the MCO will be auto-assigned by Maryland Department of Health (MDH).

To select an MCO:

- If the youth was MA eligible when residing with their family, the CMS should check with the facility to determine if the MCO and Primary Care Provider should be changed.
- If the youth was determined MA eligible following the DJS MA application, the CMS shall check with the facility to determine which MCO and Primary Care Provider the facility uses and indicate those choices on the **HealthChoice Form**.
- If the CMS has questions, the CMS should contact the DJS Medical Assistance Specialist.

CHANGING AN MCO

If a youth changes placement, the CMS may need to change the MCO. The CMS should check with the new facility to determine which MCO and Primary Care Provider the facility uses. If a change is necessary, the CMS shall complete a new **HealthChoice Form** within 5 business days of the change to select a new MCO and Primary Care Provider (the facility will provide the information.)

EXCLUDED FROM MCO

Staff shall ensure that the following youth are not enrolled in an MCO:

- Youth placed in out-of-state residential programs;
- Youth placed in Residential Treatment Centers; or
- Youth who do not meet citizenship requirement (Non –citizens).

When a youth is placed out-of-state, the CMS shall dis-enroll the youth from their MCO within 5 business days of admission to the out-of-state facility. The CMS shall complete the MDH **HealthChoice Form** to remove a youth from the MCO and include the name and address of the out-of-state facility on the Form. The CMS shall provide a letter to MDH from the out-of-state placement provider (on letterhead) verifying the youth's placement /enrollment in the program.

The youth will be removed from the MCO on the day the HealthChoice Unit processes the HealthChoice Form.

DISCHARGE

When a youth is discharged from an out-of-state placement, and is

- Placed in-state, the CMS must complete a new **HealthChoice Form**. The CMS should check with the facility to determine which MCO the facility and Primary Care Provider uses and complete a new HealthChoice Form to select a new MCO and Primary Care Provider; or
- Returned home, the CMS shall close the MA case according to the procedures in the *Case Closure* section of this manual.

REPORTING CHANGES

The CMS must report changes to the LDSS by completing the Medical Assistance Change Notification Form and submitting the form to the DJS MA Specialist or the LDSS MA Eligibility Worker within 10 business days of the change. When the youth is in an LTCF, the CMS also must report all changes to the LTCF.

Changes include, but are not limited to:

- Change in assignment of CMS;
- Change in income (receipt of Social Security, wages, or inheritance etc.)
- Change in placement; include date of admission and address of new placement;
- AWOL status of youth who is AWOL; and
- Release from DJS Custody or Out-of-home Placement
- Released from Commitment

Note: Selecting or changing an MCO will take 10 calendar days to go into effect.

ELIGIBILITY REDETERMINATION

Every 12 months, the youth's MA eligibility must be redetermined. The <u>CMS who is identified as the</u> <u>authorized representative</u> will be notified of the pending redetermination 60 days prior to the end of the eligibility period. The CMS will receive the redetermination packet 45 days prior to the end of the eligibility period. If the CMS who receives the MA redetermination packet is not the currently assigned CMS, the CMS or Case Management Specialist Supervisor (CMSS) in receipt of the MA redetermination packet should forward the packet to the currently assigned CMS.

The CMS shall complete the MA redetermination application and return to the LDSS MA Eligibility Worker by the date indicated on the redetermination form. If the youth has been released from custody, out-of-home placement, or commitment, the CMS shall request the DJS MA Specialist or the LDSS MA Eligibility Specialist close of the MA case in accordance with the *Case Closure* section of this manual.

CASE CLOSURE

GENERAL PROCEDURES AT RELEASE/DISCHARGE

At least 30 days prior to the youth's planned release/discharge, the CMS shall provide the parent/guardian/custodian with the **Parent Guidance Letter (Appendix 2)** for applying for community MA through the Maryland Health Connection. At release/discharge, the CMS shall give the MA and MCO cards to the parent/guardian/custodian because the youth may remain eligible for 3 months following release/discharge from an LTCF or Foster Care placement.

Within 10 business days of the youth's planned release/discharge from a placement, the CMS shall notify the LDSS MA Eligibility Worker of the youth's name, DOB, MA number, the date of the youth's release/discharge from placement, and the address, and telephone number of the parent/guardian/custodian with whom the youth will be living.

If the youth was in a foster care placement on his/her eighteenth birthday, including, Group Home or Foster Care placements, the CMS shall complete and send the **Foster Care Verification Form (Appendix 3)** to the youth and the parent/guardian/custodian to notify them of the youth's foster care status, because the youth may be eligible for MA until age 26 under the Affordable Care Act.

If a youth is discharged and readmitted to another LTCF, the CMS does not have to complete another MA application. The admitting LTCF will facilitate the filing of a new LTCF MA application. The CMS must notify the Division of Eligibility Waiver Services (DEWS) that the youth moved from one long term care program to another long term care program. The CMS should verify within 10 business days with the discharging facility that the discharge papers have been forwarded to DEWS at MDH.

If the youth is released/discharged from an LTCF or DJS-operated facility and placed in a community residential program, the CMS must complete a community MA application and forward it to the LDSS MA Eligibility Worker within 10 business days of release/discharge. Once eligibility has been determined, the CMS must complete the application in accordance with the *Completing an Application* section of this manual.

SPECIFIC GUIDANCE FOR RELEASE/DISCHARGE BASED ON PLACEMENT TYPE

If the youth is discharged from a non-state-owned residential facility, the CMS shall;

- Complete the **Medical Assistance Change Notification form** (and submit it to the LDSS Appendix X) MA Eligibility worker within 10 business days of release/discharge; and
- Complete the Medical Assistance Return Home letter and provide it to the parent/guardian/custodian at release/discharge with the MA card and a copy of the **Parent Guidance Letter (Appendix 2)** to encourage the parent/guardian/custodian to apply for community MA.

If the youth is released/discharged from a LTCF, the CMS,

- does not have to notify the LDSS MA Eligibility worker because the facility will notify the LTCF MA Eligibility caseworker; and
- Complete the Medical Assistance Return Home Documentation letter and provide it to the parent/guardian/custodian at release/discharge with the MA card and a copy of the **Parent Guidance Letter (Appendix 2)** to encourage the parent/guardian/custodian to apply for community MA.

If the youth is released/discharged from a DJS facility, the CMS shall provide the parent/guardian/custodian with a copy of the **Parent Guidance Letter (Appendix 2)** at release/discharge, to encourage the parents/guardians/custodians to apply for community MA.

TABLE OF ABBREVIATIONS

- CMS Case Management Specialist DEWS – Division of Eligibility Waiver Services MDH – Maryland Department of Health DOB – Date of Birth IMD - Institute for Mental Disease LDSS – Local Department of Social Services LTCF - Long-Term Care Facilities MA – Medical Assistance MCO – Managed Care Organization RICA - Regional Institute for Children and Adolescents
- RTC Residential Treatment Center
- SSI Supplemental Security Income

FORMS REFERENCED/APPENDED

- 1. MA Application
- 2. Parent Guidance Letter
- 3. Out of Home Placement/Foster Care Form
- 4. HealthChoice Form
- 5. Medical Assistance Change Notification Form
- 6. Medical Assistance Return Home Letter

ALL FORMS CAN BE FOUND ON THE DJS INTRANET See at <u>http://intranet/new_medicaid.htm</u>