

CHANGE NOTICE FOR MANUAL

DATE: 01-24-2003

MANUAL: EIS

CHANGE NO.: 05-03

TO: COUNTY DIRECTORS OF SOCIAL SERVICES

This change notice transmits revisions to the EIS Manual. Revisions are effective 02/01/2003 unless noted otherwise.

I. PRIVATE LIVING ARRANGEMENT (PLA) TRANSFER OF ASSETS

A. Background

1. In order to reduce Medicaid expenditures, the North Carolina General Assembly authorized changes to the Aged, Blind, and Disabled Medicaid eligibility policy. Individuals who are receiving Medicaid under the Aged, Blind and Disabled program and who transfer a resource for less than current market value on or after February 1, 2003, may be ineligible for assistance with in-home health services and supplies.

- a. This change in policy is applicable only to individuals who are:

- Living in a private residence, or
- Private Pay in an Adult Care Home (ACH),

And

Applying for or receiving Medicaid under the following aid-program/categories:

- MAA, or
- MAB, or
- MAD, or
- MQB-Q.

- b. This change does not apply to individuals receiving assistance under the State/County Special Assistance Program (SA) or individuals receiving under the Community Alternatives Program (CAP).

2. In-home health services and supplies are medically necessary services provided to an applicant/recipient (a/r) by a Medicaid certified provider and include the following:
 - Durable Medical Equipment (DME) and related medical supplies such as wheelchairs, walkers, canes, hospital beds, oxygen and oxygen equipment, needed to maintain or improve a recipient's medical, physical, or functional level.

- Home Health Services covers home health aide services, skilled nursing, physical therapy, speech pathology and audiology, and occupational therapy provided by a Medicaid certified home health agency to help restore, rehabilitate or maintain a recipient in the home.
- Home Health Supplies include items such as adult diapers, disposable bed pads, catheter and ostomy supplies provided by a Home Health or Private Duty Nursing (PDN) agency. Individuals in an ACH are not eligible for PDN services.
- Home Infusion Therapy (HIT) covers self-administered therapies such as nutrition therapy (tube feeding), drug therapy including chemotherapy for cancer treatments, antibiotic therapy and pain management therapy.
- Personal Care Services (PCS) are personal care activities such as bathing, toileting, monitoring vital signs, housekeeping and home management tasks essential for maintaining the recipient's health performed by an in-home aide in a private residence.

PCS provided to individuals in an ACH are not subject to this change in policy.

3. The procedures for determining if a non-allowable transfer has occurred, the uncompensated value of a transferred resource and the sanction period is the same for both long term care (LTC) and PLA. Therefore, individuals who are ineligible for assistance with nursing home cost of care, Community Alternative Program (CAP), or in-home health services and supplies due to a transfer of resources sanction may be eligible for other Medicaid covered services such as Medicare Buy-In, doctor visits, prescription drugs, dental and vision care.

B. Effects Of This Policy Change

1. Providers of the above services must be able to verify if an individual is eligible for the services to be paid by Medicaid. Eligibility is based on evaluations for transfers of assets done by county caseworkers.
2. Caseworkers must have a means of posting the findings of the evaluations into EIS so that EIS can transmit the information to the Medicaid claims contractor who will in turn make the information available to the providers through the Automated Voice Response System.
3. A new screen has been created for this purpose. It is the "Assets Transfer Tracking Screen". The screen is accessed by keying "AT" in the SELECTION field and the Individual ID number in the KEY field. The new screen will be available in EIS effective February 3, 2003.
4. Caseworkers use the Assets Transfer Tracking Screen to post an indicator showing an evaluation has been completed and the results of the evaluation.
 - a. If there is no sanction, the worker enters an indicator of "N".

- b. If there is a sanction, the worker enters an indicator of "Y" along with the Begin and End dates of the sanction period.
 - c. If the applicant/recipient (a/r) does not cooperate with the evaluation, the worker enters an indicator of "Y" with an End Date of 129999. Refer to MA-2240 to determine the Begin Date that should be entered.
5. When a claim is received by the Medicaid claims contractor, they will verify if the claim is eligible to be paid by the indicators received from EIS. If a claim is received and there is no indicator in the system for that individual, a report will be generated and posted in XPTR. We anticipate this report will be available in April 2003. Details about this report will be provided at a later date.

The individuals on this report must be evaluated for transfer of assets and the indicator keyed into EIS. If a sanction period has been keyed in EIS and includes the date of service of the claim, the claim will be denied. Otherwise, the claim will be paid.

C. Implementation

- 1. EIS will automatically enter an "N" indicator for the following PLA Medicaid recipients receiving under the MAA, MAB, MAD, and MQB-Q aid program/categories:
 - a. All non-SSI Medicaid recipients.
 - b. All SSI Medicaid recipients for whom an in-home health services and/or supplies claim was paid in December 2002 or January 2003.
- 2. A report will be generated and posted in XPTR on February 3, 2003, that lists all the individuals that have the "N" entered by EIS at implementation. It is entitled "DHREJA T OF ASSETS INDICATOR=N". No paper copy is generated.

II. MANUAL SECTION CHANGES

A. Volume I

- 1. EIS 1050 - Update the sample EIS MENU (UPDATE) screen with the Assets Transfer "AT" selection.
- 2. EIS 1054 - Add a description and sample of the Assets Transfer Tracking Screen.
- 3. EIS 1061 - Add the new report names for Passalong, COLA VA Report, and the new report created due to the new Assets Transfer policy.

B. Volume II

EIS 2400 - Corrected the Date Screen section to match policy regarding State/County Appeal Reversal Reopens.

C. Volume III

EIS 3900 - This is the new section of instructions for using the Assets Transfer Tracking Screen.

D. Volume IV

EIS 4900, Appendix E - Added new adequate and timely termination codes "6K" and "3K", "YOUR MEDICAID IS STOPPING BECAUSE TRANSITIONAL MEDICAID BENEFITS ARE LIMITED TO TWELVE MONTHS. YOU HAVE FAILED TO COMPLETE A REDETERMINATION OF YOUR ELIGIBILITY."

EIS MANUAL INSTRUCTIONS

SECTION	REMOVE PAGES	INSERT PAGES	ONLINE CHANGE
Volume I			
1050	3-4	3-4	II.C. Sample Update Screen
1054	1-2, 9-10	1-2, 9-10	I.B.,E.,VII
1061	17-23	17-23	New Reports
Volume II			
2400 Part III	15-16, 23-24	15-16, 23-24	III.D.1.a., III.D.6.a.
Volume III			
3900	Nothing to Remove	1-9	Assets Transfer Screen
Volume IV			
4000 Appendix E	5-6	5-6	New Termination Codes

If you have any questions, please contact your Medicaid Program Representative.

Sincerely,

Nina Yeager, Director
Division of Medical Assistance

(This material was researched and prepared by Debbie Daniels and Mary Spivey, EIS Program Consultants and Kathie Barnett, EIS Project Coordinator.)