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| With the increase in post pandemic MA renewals, we are experiencing an increase in MA terminations/potential MA terminations. We wanted to remind Care Coordinators of the requirements and expectations for our MSHO & MSC+ members open to EW and/or accessing PCA/MA State Plan Home Care services that are coming due for their reassessment. MA Terminations or Potential MA Terminations & Care Coordinator ResponsibilitiesUpon notification that a member’s MA is terming the Care Coordinator must:1. Reach out to the Financial Worker to determine the reason for MA closure and if the MA will be reinstated.
2. Contact the service providers to let them know the member’s MA has or is termed and if the providers choose to continue providing services there is a possibility they may not be paid for the services if the member’s MA is not reinstated.
3. If the status of MA reinstatement is unknown or is expected to be reinstated and the member is due for their reassessment, the Care Coordinator must complete the reassessment prior to 365 days prior to the last in-person LTCC or Revised MnCHOICES assessment. This reassessment is not entered into MMIS unless the member’s MA is reinstated. If the member is unable to complete the reassessment, the Care Coordinator must educate the member/auth rep that their EW and/or PCA/MA State Plan Home Care services cannot continue without a timely new assessment.
4. By day 60, the Care Coordinator should complete the DHS 6037 Lead Agency Transfer and Communication Form as notification to County of Residence (COR) that member has lost MA eligibility, and their reinstatement status is unknown. Select “Was enrolled in MSHO/MSC+ but has lost Medical Assistance (MA) financial eligibility.” Include all necessary transfer attachments, including any assessments completed within 60 days of MA terming. **Note** this is not a transfer of Care Coordination responsibility.
5. If the member’s MA has not been reinstated by day 90 and an assessment was due and was completed after the DHS 6037 was sent to the COR (see above), the Care Coordinator must send updated DHS 6037 and the reassessment to the COR as the official transfer of this case.
6. \*For members opened to another HCBS waiver that have MA terming/termed and are coming due for their reassessment for up to 90 days, Care Coordinators should work closely with the wavier CM and FW to determine MA status and offer the member a HRA-MCO or 3428H and associated care plans/support plans, etc. to complete the assessment within 365 days of the previous assessment. The Care Coordinator must inform the waiver case manager that their PCA/MA State Plan Home Care services cannot continue without a timely new assessment.

If the Care Coordinator has consulted with the Financial Worker and the member’s MA status is unknown or expected to be reinstated, we will reimburse delegates for Care Coordination assessment activities during this period. **This applies to both MSHO and MSC+ members open to EW and/or accessing PCA/MA State Plan Home Care services that show termed for up to 90 days.** Despite Care Coordinator’s due diligence to determine if the member’s MA will be reinstated, some members’ MA may not be reinstated, and claims will automatically be rejected. Delegates must reach out to Bridgeview and their PR Consultant to ensure any Care Coordination claims get reprocessed, if applicable, after their term date. For any MSHO or MSC+ that are not open to EW or accessing PCA/MA State Plan Home Care services and the Care Coordinator confirms the member’s MA will be reinstated, Care Coordinator must offer the reassessment timely and document activities. For more information refer to the [DHS 6037A HCBS Waiver, AC, and ECS CM Transfer and Communication Form: Scenarios for People On AC, EW or ECS.](https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6037A-ENG)Please reach out to your Partner Relations Consultant if you have any questions. |