

COMMUNITY HEALTHCHOICES (CHC)

OPERATIONS MEMORANDUM #2020-01

SUBJECT: **REVISED-** Need for Comprehensive Needs Reassessment Following a Lapse in Medical Assistance (MA) Long-Term Care (LTC) Eligibility

TO: CHC Managed Care Organizations (MCO)

FROM: Bureau of Policy Development and Communications Management

DATE: ~~January 14, 2020~~ **May 04, 2023**

PURPOSE

Section V.E. of the CHC Agreement requires that, when the CHC-MCO or the Independent Enrollment Broker (IEB) identifies that a Participant who has not been determined Nursing Facility Clinically Eligible (NFCE), otherwise known as Nursing Facility Ineligible (NFI), has unmet needs, service gaps, or a need for service coordination, the CHC-MCO must conduct a comprehensive needs assessment of the Participant. This Operations Memorandum clarifies that a lapse in MA LTC eligibility is not treated the same as having unmet needs, service gaps, or a need for service coordination within the meaning of Section V.E. of the CHC Agreement and explains when a comprehensive needs reassessment is not needed following a lapse in MA LTC eligibility. Please note, however, that MCOs are encouraged to treat every case as a unique circumstance and adhere to person-centered planning principals.

PROCEDURES

Due to changes in income, resources, and other factors, Participants' eligibility for MA LTC can fluctuate over time. As a result, some CHC Participants may experience temporary lapses in CHC coverage. The CHC-MCO does not have to perform a comprehensive needs reassessment of a Participant who experienced a temporary lapse in eligibility if **all** of the following criteria are met:

1. The Participant did not experience a change in situation, functional status, or other event which meets the criteria for a trigger event during the lapse in eligibility;

2. The loss of MA LTC eligibility lasted for a period of no more than ~~30~~ 90 days (to allow for the timely resumption of services during the Medical Assistance unwinding resulting from the Consolidated Appropriations Act of 2023);
3. The Participant received a comprehensive needs assessment from the CHC-MCO within the past year;
4. The Participant did not request a new comprehensive needs assessment during or following the lapse in eligibility; and
5. The Participant re-enrolled with the same CHC-MCO following the lapse in eligibility.

NEXT STEPS

1. Review this Ops Memo with appropriate staff.
2. Contact the Bureau of Coordinated and Integrated Services if you have questions.