

## **COMMUNITY HEALTHCHOICES (CHC)**

### **OPERATIONS MEMORANDUM #2024-02**

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**SUBJECT:** Participant Renewal of Medical Assistance Financial Eligibility

**TO:** CHC-MCOs

**FROM:** Bureau of Policy Development and Communications Management

**DATE:** April 25, 2024

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#### **PURPOSE**

Most CHC Participants who receive long-term services and supports (LTSS) are required to have an annual renewal of financial eligibility for services conducted by the County Assistance Office (CAO). The only exception is for CHC Participants receiving a Supplemental Security Income (SSI) personal needs allowance while living in a long-term care facility. These Participants will be a subset of those authorized in the Medical Assistance (MA) categories A, J and M. The Social Security Administration (SSA) is responsible for reviewing financial eligibility and acting on changes in income and resources for that subset of MA recipients.

A missing, incomplete, or untimely annual financial renewal often results in a determination of ineligibility and a loss of services for a Participant. When the Participant later provides the missing information within the reconsideration timeframe outlined in [Long-Term Care Handbook Section 479.3](#) and eligibility is re-established, CAOs must retroactively re-enroll Participants back into CHC. Upon review, the Department of Human Services has determined that untimely annual renewals among Dual and Non-Dual CHC Participants who are receiving home and community-based waiver services is an area in which to improve.

Section V.J., Service Coordination, of the CHC Agreement requires Service Coordinators (SCs) to coordinate efforts and prompt the Participant to complete activities necessary to maintain LTSS eligibility. This Operations Memorandum provides a reminder to CHC-MCOs to have SCs encourage and, where necessary, assist Participants to complete the annual renewal process timely.

## **PROCEDURES**

The Participant's renewal date can be found on the 834 Daily Eligibility File. The CHC-MCOs should review the 834 Daily Eligibility File and notify Participants of their pending renewal date.

The CHC-MCOs risk non-payment for services provided where the SC has failed to prompt the Participant to complete activities necessary to maintain LTSS and assist the Participant, where necessary, that result in a determination of ineligibility.

## **NEXT STEPS**

1. Review this information with appropriate staff and SCs.
2. Establish a process for SCs to track when a participant is due for their annual renewal.
3. Contact the Division of Participant Supports if you have any questions.