

DEPARTMENTAL MEMORANDUM

MAD-IPP: 17-01

DATE: OCTOBER 25, 2017

TO: MAD AND ISD STAFF

FROM: *NS* NANCY SMITH-LESLIE, DIRECTOR, MEDICAL ASSISTANCE DIVISION
MB MARY BROGDON, DIRECTOR, INCOME SUPPORT DIVISION

BY: *RB* ROY BURT, MAD ELIGIBILITY BUREAU CHIEF

SUBJECT: 90 DAY RECONSIDERATION PERIOD FOR MEDICAID WAIVER CATEGORIES

A 90 day reconsideration period for Modified Adjusted Gross Income (MAGI) renewals is contained in current policy at 8.291.410.18(C)(4) NMAC. Effective October 01, 2017, MAGI policy is being revised to match the federal language and will be located at 8.291.410.19 NMAC. The MAGI renewal policy will state the following:

RESCINDED

HSD will reconsider in a timely manner the eligibility of an individual who is terminated for failure to submit the renewal form or necessary information, if the individual subsequently submits the renewal form within 90 days after the date of termination without requiring a new application.

The Medical Assistance Division (MAD), through this IPP, is extending the 90-day reconsideration period to all the Home and Community-Based Waiver (HCBW) categories:

Medicaid Waiver AIDS (COE 090)
Medicaid Waiver Aged (COE 091)
Medicaid Waiver Brain Injury (COE 092)
Medicaid Waiver Blind (COE 093)
Medicaid Waiver Disabled (COE 094)
Medicaid Waiver Medically Fragile (COE 095)
Medicaid Waiver Developmentally Disabled (COE 096)

Under the 90-day reconsideration period, if a waiver recipient provides all of the required documentation needed to approve eligibility within 90 days from the date of closure, eligibility shall be re-established back to the closure date without requiring a new application. The Income Support Division (ISD) may begin applying the 90-day reconsideration period to any HCBW recertifications that closed during the month of July or August 2017 and for HCBW closures going forward.

This policy revision will reduce gaps in coverage for individuals who are eligible for HCBW categories, but who did not recertify timely. MAD will update 8.290.600 NMAC to formally include the 90-day reconsideration period for HCBW Medicaid categories.

An ASPEN change request has been submitted to automate this process. Until the change request is implemented the following interim process will be in place:

ASPEN Interim Process

1. Register the case in ASPEN from the date of application-The date of application is considered to be when the waiver client submits a new application (not required), or completed the renewal process by either providing the recertification packet and/or all verification needed to recertify within the 90 day reconsideration period.

2. Process the application-The applicant, if eligible, can be approved for waiver eligibility from the month of application ongoing. The 90 day reconsideration period, defined as three calendar months, allows waiver eligibility to be approved from the end date of the recertification period. For example, suppose a waiver client failed to recertify and closed July 31, 2017. If the client completed the recertification process on October 31, 2017, waiver eligibility for the prior three calendar months can be evaluated to fill in the coverage gap. If the client completed the recertification process on November 01, 2017 or later, a new application would be required because it is outside the three month reconsideration period.

3. Waiver coverage gap-ASPEN does not allow for the approval of waiver eligibility prior to the application month. Once ISD has determined a client is eligible back to the recertification closure date, MAD staff must be notified so that waiver eligibility can manually be added into Omnicaid. An email should be sent to Roberta Busich at robertaj.busich@state.nm.us with a copy to Renee Martinez at renee.martinez12@state.nm.us with the case number and gap months to be entered.

4. Case comments should be entered regarding approval of reconsideration period month(s) and referral to MAD. MAD IPP 17-01 can be cited until the ASPEN CR is implemented.

Please address any questions concerning this IPP to Roy Burt at Roy.Burt@state.nm.us or (505) 476-6898.

RESCINDED