



**Office of Eligibility Services  
Emergency  
Standard Operating Procedures**

**Effective Date: April 27, 2020**

**SOP # 20-08**

**Issuance Date: April 21, 2020**

**TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES  
DIRECTOR, OFFICE OF LONG TERM CARE ELIGIBILITY  
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT  
FAMILY INVESTMENT SUPERVISORS AND ELIGIBILITY STAFF  
ELIGIBILITY DETERMINATION DIVISION STAFF**

**FROM: DEBBIE RUPPERT, EXECUTIVE DIRECTOR, MDH/OES**

**RE: INTERIM EMERGENCY PROCEDURES FOR LONG-TERM CARE AND WAIVER  
MEDICAID CASES**

**PROGRAMS AFFECTED: LONG-TERM CARE MEDICAL ASSISTANCE (MA) IN THE  
ELIGIBILITY & ENROLLMENT (E&E) SYSTEM AND WAIVER  
CASES**

**ORIGINATING OFFICE: OFFICE OF ELIGIBILITY SERVICES**

**SUMMARY**

Due to the pandemic of COVID-19, this Standard Operating Procedure (SOP) provides mandatory instructions for specific interim emergency procedures for Long-Term Care Medicaid and the following Waiver cases, Community Options Waiver, Increased Community Services Waiver, DDA Community Pathways, DDA Community Support Waiver, DDA Family Support Waiver, Model Waiver, Traumatic Brain Injury Waiver and the Autism Waiver. Until further notice, these temporary changes will be implemented to enable customers to gain and retain medical coverage.

The previously issued procedures for processing applications, redeterminations and changes, in MDH OES 20-05, must still be followed. The following additional changes have been allowed for Long-Term Care and Waiver applicants in order to determine eligibility (approve or deny for reasons other than missing verifications) within 45 days for LTC and within 180 days for Waivers. When requested verifications have not yet been provided by the 45th day, Case Managers will process the applications based on the information that the applicant or authorized representative entered into E&E or on the paper application.

After the national emergency ends, each of the applications handled in this way will be reviewed for missing verifications and updated.

## **ACTION REQUIRED**

Case Managers should carefully review any application that is pending as of April 24, 2020 and any application that was denied using the code 552 (Missing Verifications) on or after January 27, 2020, when the US HHS Secretary declared the public emergency and when policy flexibilities were put in place. For prioritizing, Case Managers should process the oldest applications first (that is, those that were denied on or after January 27 with a 552 Code and then proceed to process the applications that are still pending). Follow the instructions below:

- The Asset Verification System (AVS) is an integral part of the interim emergency procedure. The E&E System automatically submits the applicant's and spouse's information to AVS for processing in overnight batch. Case Managers must run *ad hoc* AVS requests for any information needed. However, if the *ad hoc* match is not returned within 21 days of the request, proceed to process the application with the information on hand and set an alert every two weeks in E&E System to check AVS for the results of the ad hoc request. To set an alert, follow the steps in **Attachment 1**.
- Case Managers must continue to use existing system interfaces to verify SSN, citizenship and federal benefits (SSA, SSI, SSDI).
- Send a 1052 Form letter for any required verifications that cannot be validated through AVS or other online systems.
- If the AVS report shows the applicant to be overscale, then process the application noting in Case Notes that the case will be subject to post-eligibility review in order to provide the applicant a reasonable period to furnish any additional information to rebut the AVS findings.
- If the spouse's signature is missing on the application, contact the spouse by telephone to obtain verbal approval for the AVS match, and read the Consent Form statements to the spouse and obtain the spouse's verbal agreement to the statements after ensuring you are speaking with the spouse. (See **Attachment 2**). Narrate in E&E that the approval was obtained in this way. For waivers, narrate in CARES that the approval was obtained.
  - **Narration text if the spouse's signature was obtained by telephone:** “[Case Manager's name] read the Consent Form statements in full to [Spouse's Name] on [date] in order to obtain the spouse's signature by telephone.”
- Before the application can be approved, the Level of Care must be established by the MDH Utilization Control Agent, Telligen. Telligen will expedite the 257 forms and email them to the Office of Long Term Care Eligibility (OLTCE) at its dedicated email address [lrc.madocs@maryland.gov](mailto:lrc.madocs@maryland.gov). OLTCE staff will upload the 257 forms to the E&E case record and email the Case Manager and Supervisor to alert them.
- As of April 27, 2020, the E&E System will have a special **Delay Reason** value called “**COVID-19 Application**” on the **Administrative Information Page**. The Case Manager must select in the Delay Reason to indicate the application was approved with verifications still outstanding. See **Attachment 3** for a screenshot. In CARES, enter a “**CO**” code in the Special Circumstances field on the **ADDR** screen for the Waiver case.
- Any other outstanding verifications (such as life insurance, marriage certificate, death certificate) that have not been satisfied must be addressed during the post-eligibility review after the national emergency ends. Do not delay processing the application for approval if otherwise eligible.

- If the application is only awaiting verification and would be otherwise eligible, then run the eligibility based on the information on the application and the AVS asset report. All other verifications are to be postponed until after the national emergency period has ended. As of April 25, E&E will allow approvals of applications even if there are outstanding verifications. CARES already allow case managers to approve Waiver applications without all required verifications being satisfied.
- Case Managers must narrate each application that is approved with the verifications still outstanding.
  - **Narration text for approval:** *“Customer’s [date] application was approved on [date of approval] without verification of [list what is still outstanding] in accordance with MDH OES SOP 20-08 Interim Emergency Procedures for Long-Term Care during the COVID-19 national emergency. A post-eligibility review will be conducted after the national emergency has ended.”* Also include in your narration the following:
    - All the clearances that were verified
    - The verifications that were received
    - The verifications that are still outstanding
    - Method spouse’s signature was obtained, if applicable
- Beginning on April 25, E&E will add text to the Notice of Eligibility (approval notice) for each application that was approved with outstanding verifications. The text will state: *“Your application was approved based on the information in your application and independent verification of some of the required eligibility factors. We still need to verify the information listed below, and we will conduct a review of your case once the national emergency has ended. Please continue to take steps to obtain the verifications listed below as they will be due 30 days after the emergency has ended. Please note, additional verifications may be requested during the post eligibility review. Please submit the verification by the requested due date so that we can review your case for continued coverage.”*
- Within three months after the national emergency has ended, all applications that were approved using the postponed verification rule must be examined and pended for required verifications that are missing.

## **PROGRAM INTEGRITY AND TRACKING APPLICATIONS**

E&E will produce a daily report of the applications that are approved under this emergency procedure. DHS will email the report daily to MDH for tracking and eventual second-level review when the post-eligibility casework is completed.

## **INQUIRIES**

**Policy:** Please direct policy questions to the Maryland Department of Health, Office of Eligibility Services at [mdh.maltceligibilitypolicy@maryland.gov](mailto:mdh.maltceligibilitypolicy@maryland.gov) or call 410-767-1463 or 1-800-492-5231 (select option 2 and request extension 1563)

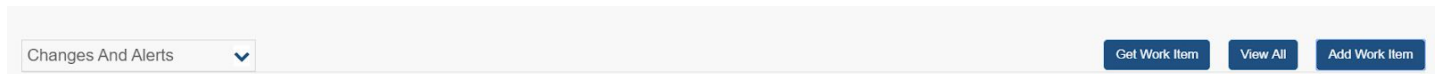
### Attachments

cc: MDH Executive and OES Management Staff  
MHBE Executive and Management Staff

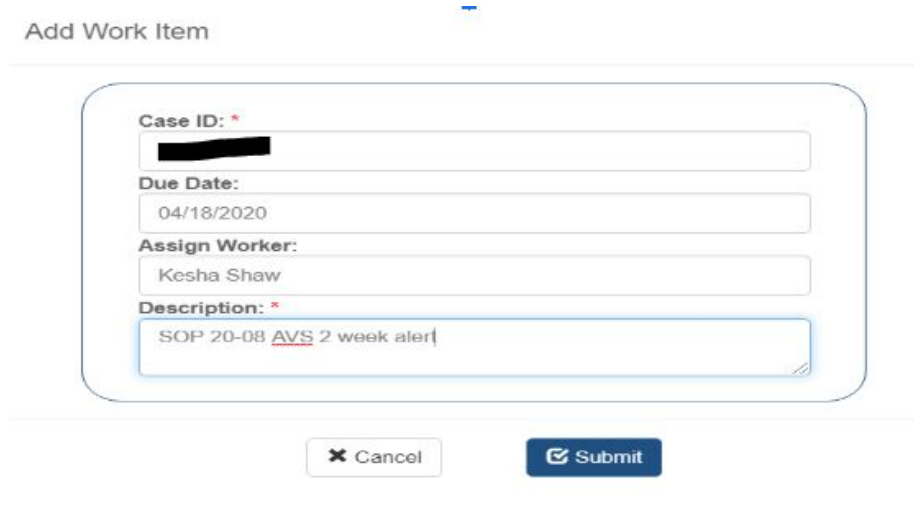
## Attachment 1

### How to Set an Alert in E&E

**Step 1:** Scroll down to the Changes and Alerts Panel of your dashboard. Click on the **Add Work Item** button.



**Step 2:** A new pop-up box will display. Enter in the **Case ID**, select a **Due Date**, select a Worker from the **Assign Worker** drop-down list if the worker name is blank, and enter a **Description**. Click **Submit** to save the work item. Note: If the worker is not assigned, the alert will be assigned to the statewide queue.



**Step 3:** Once a Worker Generated item has been assigned to a worker, it will appear on the Worker's Dashboard. Click on the **"Changes and Alerts"** menu to view the item.

Case	Work Item Status	Case Status	HOH Name	Created Date	Due Date	Assigned to	Type	Sub Type	Description	Actions
[REDACTED]	CLOSED	CLOSED	[REDACTED]	04/18/2020	04/18/2020	Kesha Shaw	Changes & Alerts	Worker Gen	Test	<input type="checkbox"/>
[REDACTED]	OPEN	CLOSED	[REDACTED]	04/18/2020	04/18/2020	Kesha Shaw	Changes & Alerts	Worker Gen	SOP 20 08 AVS 2 week alert	<input type="checkbox"/> <span style="color: red;">✖ Close</span>
2 total										

## Attachment 2

### VERBAL CONSENT FORM TO BE READ IF THE SPOUSE'S SIGNATURE IS MISSING ON THE APPLICATION

Case Manager: When you call the applicant's spouse to obtain a verbal signature, you must verify that you are speaking with the spouse. Ask to verify the SSN or the DOB of the applicant and the spouse, for example.

After you have verified the identity verbally, read the statements below in full to the applicant or recipient before beginning to assist the customer on the telephone.

*We received an application for your spouse for Medical Assistance. We need to have your signature on the application. Due to the COVID-19 national emergency, I can obtain your signature over the telephone if you agree to the following statements. Please let me know that you understand each statement after I read it:*

- I understand that my spouse [name of LTC/Waiver applicant] has applied for Medical Assistance and part of the eligibility process includes a review of my own assets through an automated system called the Asset Verification System.*
- I hereby consent to have the case manager submit my name, date of birth and Social Security Number to the Asset Verification System in order to obtain assets that I own.*
- I understand that the case manager will follow privacy and information security standards when creating, collecting, disclosing, accessing, maintaining, storing, and/or using my Personally Identifiable Information (PII) and/or the PII of my authorized representative.*

*Thank you for your cooperation. I will contact you again if any more information is needed.*

## Attachment 2

### Screenshot of the COVID-19 Field on E&E's Administrative Information Page

As of April 27, 2020, the E&E System will have a special **Delay Reason** value called "**COVID-19 Application**" on the **Administrative Information Page**. The Case Manager must select in the Delay Reason to indicate the application was approved with verifications still outstanding. See **Attachment 2** for a screenshot

The screenshot displays a form titled "PROGRAM: Long Term Care" with a blue upward-pointing arrow in the top right corner. The form is divided into two main sections: "Delay" and "QA Errors".

**Delay Section:** This section contains a "Delay Reason" label above a dropdown menu. The dropdown menu currently shows the word "Select" and a downward-pointing arrow.

**QA Errors Section:** This section contains three checkboxes, each followed by a label: "Quality Control", "State Review", and "Administrative Review". All three checkboxes are currently unchecked.

At the bottom right of the form, there are two buttons: a white "Back" button and a dark blue "Next" button.