Local Office Instructions for End Stage Renal

Disease Liability

In June 2014, individuals with End Stage Renal Disease were at risk of losing access to kidney transplant services due to the elimination of the spend-down provision. These individuals were provided extended Medicaid coverage with an applied liability instead of a spend-down.

This process is still in place for those who meet the following basic eligibility criteria

Basic Eligibility Criteria (IHCPPM 3375.00)

- Current diagnosis of End-Stage Renal Disease
- Have Medicare Part A & B
- Income between 150% and 300% FPL *

Population 1 [Former Spend-Down Enrollees]: The first group includes individuals with income over 150 percent of the Federal Poverty Limit (FPL) who were enrolled in both Medicare and the State's Medicaid Spend-down program as of May 31, 2014 (the last day the State operated under 209(b) status). This population met the spend-down eligibility requirements in effect under the State's 209(b) rules as of May 31, 2014, and were not subject to an upper income limit. These enrollees would have lost access to supplemental ESRD coverage as a result of the State's transition to a 1634 state. These individuals are referred to as "former spend down enrollees" in this waiver renewal request.

Population 2 [New Enrollees]: In addition to transitioning former spend-down enrollees to the ESRD §1115 effective June 1, 2014, new enrollees were also permitted. However, the ESRD waiver applied an income limit of 300 percent FPL to this population. This income limit applies to all ESRD §1115 enrollees who were not enrolled in the Indiana spend-down program as of May 31, 2014. Such enrollees are referred to as "new enrollees" in this waiver request.

As of

- Resources less than \$1500 for an individual and \$2250 for a couple
- Not be institutionalized
- Meet all non-financial Medicaid eligibility requirements
- Not eligible for any other Medicaid
- 1. **Note:** Individuals that were grandfathered (ESRD prior to 5/31/14) cases will have the same rules applied and without an income limit. The FPL and income standard in place at that time will be utilized.
- Manual budgets, fiats, and manual notices will need to be completed if determined that applicant meets the criteria for the ESRD provision

- The manual budget created will need to indicate that this is a **spenddown/liability (S)**
- When processing an ESRD application/case a system "workaround" was developed to prevent aged or disabled ESRD clients from accidental closure for those individuals whom continue to meet the criteria for special consideration.

Legacy System Workaround

- Enter 04 as living type on AEIDC
- AEIII enter Institution Type as 17 (ESRD Workaround)
- Food Stamp Eligible "Y"
- Pre-Admission Screening "S" Date can be application or a change date when ESRD diagnosis was reported
- Is the institution Medicaid Certified "Y"
- In institution 30 days "Y"
- Institutions Name and Address "enter client's name address, city and zip code
- (DO NOT MAKE ANY MENTION OF ESRD IN THIS FIELD)

When EDBC is run reason code 425 displays on AEWAA and Elig Stats will pend. If worker attempts to close or deny the prior to completion of the off line determination, edit message R68 will display. "End-Stage Renal Disease-Must Fiat"

Designated workers will determine if client passes ESRD rules. If client passes, an offline budget will need to be completed with the correct income standards applied and Medicaid will need to be fiated with a manual notice issued.

Any verified health insurance premiums or spouse/dependent allocation should be calculated offline and deducted from the overall spend down amount which is entered on AEWFT. (3375.30.00) (3455.15.10.10)

If the client does not pass or meet the ESRD rules based on the offline/manual budget processing guidelines delete AEIII and deny/close with the appropriate reason code.

MRT Processing Reminders:

DO NOT submit a FACTS task to MRT under the following circumstances.

- If an ESRD applicant is over the age of 65, and already receiving Medicaid due to age, blind or has DE for SSA, **DO NOT** send the Accelerated Diagnosis Form to MRT for review. Worker will apply the special ESRD rules to determine if the individual meets the eligibility criteria and send an e-mail to the <u>Medicaidreviewteam@fssa.in.gov</u>
- Individuals already on Medicaid with an MRT or SS approval and they report a new ESRD condition, an e-mail should be sent to the <u>Medicaidreviewteam@fssa.in.gov</u> to confirm if the Accelerated Diagnosis form is necessary. A review will still need to occur to determine eligibility under the special budgeting rules only.

MRT Exception to Submission:

 Individuals already on Medicaid with a Progress Report pending reports who reports a new condition of ESRD would need both an MRT review and eligibility determined under the special budgeting rules. This would be considered a reported change, and an e-mail should be sent <u>Medicaidreviewteam@fssa.in.gov</u> with this information.

Manual Processes:

Step 1: Calculate the ESRD Spenddown/Liability using a Manual Budgeting Process

- When completing off line eligibility, the income standard utilized will be based upon when the determination is completed. Example if completing the determination in 2020, utilize the current income standards for that year.
- **Exception:** If the individual was receiving the ESRD option prior to 5/14 the income standard in place would be utilized and income in their budget would be compared to those standards to determine eligibility

- The excess income will be the ESRD spenddown/liability. Please use the Medicaid budget (State form 45885, Medical Assistance for the Aged, Blind and Disabled Budgeting Worksheet) located in the S Drive.
- General income disregard for off line determination is \$20.00

Step 2: Create the Spenddown/ Liability

Using the liability amount calculated in Step 1 with the manual budget, add this amount to the case.

A fiat will need to be completed to create the liability. **Note:** For this circumstance, the **S** indicator will need to be used on AEWFT, along with the amount calculated. This will also show as a spend-down (S indicator on AEWAA, but manual notices will reference ESRD Spenddown/Liability

To fiat the spenddown/liability:

- Run AEABC
 - a. On AEWAA, the current Medicaid category will pend
- AEOAG Case/Cat/ current Seq and delete the pending AG
- Recreate the AG on AEOAG with the same sequence number as what was deleted prior to completing the off line determination
- Rerun
- On AEWFT, be sure to use the S indicator and the amount determined to be the ESRD spenddown/liability from the manual budget.
- Use reason code 425 (Eligible under ESRD) for this action.
- Complete the ED/BC process through to AEWAA and authorize
- Document all actions/steps taken in CLRC

Step 3: Attach the manual budget to the case

After completing the manual budget:

- 1. Click on the Office button at the top left hand side of the page
- 2. Select Save As
- 3. Indicate the document should be saved as PDF or XPS
- A window will open and next to File name it will say: MEDICAL ASSISTANCE FOR THE AGED, BLIND AND DISABLED BUDGETING WORKSHEET. It will be highlighted.

- a. Type the case number in that field, then on the left hand side of the window, you will need to scroll until you see Desktop.
- b. Click on Desktop.
- 5. After those two actions are complete, click the Publish button at the bottom of that window and then the window will close.

To attach the manual budget to FACTS:

- 1. Go to the FACTS case, then to Documents.
- 2. At the top of the documents page, click on Attach document.
- 3. A window will open click on Browse.
- 4. Scroll through your Desktop items until you locate the PDF file you have titled with the case number you are working on.
- 5. Click on that document, then on OPEN.
- 6. That window will close and you will then click on the magnifying glass search icon
 - a. Go to Eligibility support documents document type
 - b. Click search
 - c. Find Medical budget for Aged, Blind and Disabled.
 - d. Select that document and Save.

The budget will now be attached in FACTS to the case.

Step 4: Create and send the manual notice

Once that budget has been attached to the case in FACTS, then you will create the manual notice in Correspondence.

Sample manual notices are attached: The specific language for this notice is included and needs to be included. Complete the manual notice as indicated by the attached example.

Before you click on the Mail button at the bottom of the screen:

- 1. Click on Attach document,
- 2. Scroll through the documents and select the Medical budget,
 - a. After this is selected, you will be returned to the detail screen
- 3. Click Mail.

The budget showing the spenddown/ liability calculation will be attached to the notice.

IEDSS Processing

When processing an ESRD case in IEDSS Special Medicaid Approval question must be answered as Y in order for this page to be included in the data collection module and for the special ESRD budget to form, and is contained in the Household Questions module

SPECIAL MEDICAID APPROV	AL	-
Does anyone in the case have special		
Medicaid approvals (such as Home and	YES	
Community Based Services (Waiver),		
Breast and Cervical Cancer Program)?		

Yes will bring up the following

Special Medicaid Approvals - Details				
PERSON INFORMATION				
Name: Person ID:	12			
SPECIAL MEDICAID APPROVALS INFORMATION DATES				
Circumstances Start / Change Date:* End Date:	01 / 26 / 2015 MM / DD / YYYY			
SPECIAL MEDICAID APPROVALS INFORMATION				
Approval Type:* Approval Begin Date:	End Stage Renal Disease			

IEDSS ESRD Budget

Special Medicaid Budget

Person ID:				
Person Name:				
Benefit Period:	07/01/2020-	07/01/2020-		
Type of Assistance:	MA D	MA D No Change		
Eligibility Status:	No Change			
Authorization Status:	Authorized			
ESRD BUDGET INFORMATION:		Note: General Income Disregard is		
Unearned Income		incorrect and Own 1 is aware		
Allowable Expense				
Individual Unearned Income:	\$2,536.09			
Spouse Unearned Income:	\$0.00	Complete off line calculations with		
Step-Child Allocation:	\$0.00	the \$20 General Income Disregard when determining eligibility		
General Income Disregard:	\$15.50			

Additional information for Special Medicaid Approval is located on the HUB under the IEDSS Resource Section (IEDSS Knowledge Exchange) 12/5/19 Pages 26-29