PUOP# Client003 Revision: 9/14/07

Prepared By: KP Approved By: GS Effective Date: 12/19/2001

Title: Aged/Disabled Adult and Assisted Living for the Elderly Medicaid Waiver

Waitlist Maintenance Procedures

Consumers are waitlisted in the ADA and ALE waiver program on a prioritized Policy:

basis and WCFAAA is responsible for tracking and maintaining all identified MW

eligible clients.

Scope: This procedure ensures WCFAAA has developed a tracking and maintenance

procedure for the waitlisted Medicaid waiver potential consumers.

Responsibilities: The Medicaid waiver specialists (MWS) are responsible for tracking and

maintaining the ADA Medicaid Waiver waitlist by county.

Procedure:

Lead Agency:

- 1. The Lead Agency receives a referral authorizing a consumer for a SGR program that appears to meet Medicaid waiver eligibility.
- 2. The Lead Agency case manager will complete an Assessment.
- 3. The Lead Agency case manger completes and submits the Medicaid Waiver Funding Approval Request (Form #: WCFMW 22) to appropriate MWS. If this information is hand delivered, it must be date stamped at WCFAAA.
- 4. CIRTS is updated by the Lead Agency and the consumer is identified in CIRTS as being waitlisted for the MW program (MW APCL).
- 5. The MWS will verify CIRTS enrollment as MW APCL and review the consumer's priority and risk level score.
- 6. Based on funding availability, the priority score will be used to determine which consumer is next for initiation of enrollment in descending order until each county has been addressed.** If more than one referral is forwarded to WCFAAA with the same priority score, priority will be given to the individual with lesser ability to pay for services (S.B. 642).
 - Adult Protective Services (high risk), CARES Imminent Risk referrals and Aging Out clientele will be given priority to community referrals regardless of priority score.
- 7. Once the Lead Agency receives funding approval from WCFAAA to initiate the enrollment process for the next consumer, the lead agency will update CIRTS to show consumer MW APPL, and start the eligibility determination process with DCF and the CARES Unit. If a consumer has SSI (type MS) Medicaid at the time of application, it is not necessary to forward an RFA to DCF since Medicaid eligibility has already been determined.
- 8. The Lead Agency will notify the MWS if the client will not enroll due to death, other placement, etc. through monthly updates of the APPL report.

ARC Benefits Counselor

- 1. The ARC Waitlist Manager refers a consumer to the Benefits Counselor that appears to meet Medicaid waiver eligibility.
- 2. CIRTS is updated by the Benefits Counselor and the consumer is identified in CIRTS as being waitlisted for the MW program (MW APCL).
- 3. The Benefits Counselor will complete and submit the Medicaid Waiver Funding Approval Request (Form #: WCFMW 22) to appropriate MWS. If this information is hand delivered, it must be date stamped at WCFAAA.
- 4. The MWS will verify CIRTS enrollment as MW APCL and review the consumer's priority and risk level score.
- 5. Based on funding availability, the priority score will be used to determine which consumer is next for initiation of enrollment in descending order until each county has been addressed.** If more than one referral is forwarded to WCFAAA with the same priority score, priority will be given to the individual with lesser ability to pay for services (S.B. 642).
 - Adult Protective Services (high risk), CARES Imminent Risk referrals and Aging Out clientele will be given priority to community referrals regardless of priority score.
- 6. Funding authorized, the Benefits Counselor will complete an Assessment and assist the consumer with collecting and gathering required information and documents for the Medicaid application.
- 7. CIRTS is updated by the Benefits Counselor and the consumer is identified in CIRTS as being in the pipeline for the MW program (MW APPL).
- 8. The Benefits Counselor will notify the MWS if the client will not enroll due to death, other placement, etc. through monthly updates of the APPL report.

The Medicaid Waiver Specialist will check CIRTS to review and verify the waitlist (APCL) and pending list (APPL) and the Medicaid Waiver Probables on a monthly basis. Lead Agencies and the ARC Benefits Counselor will be requested to provide status updates on consumers in the pipeline.

Revision History:

Revision	Date	Description of changes	Requested By
1	9/14/07	Established ARC Benefit Counselor Responsibilities	Katie Parkinson, Senior Program Manager