



Department of Human Services
 311 West Saratoga Street
 Baltimore MD 21201

**Family Investment Administration
 ACTION TRANSMITTAL**

Control Number: # 19-10 Replaces AT # 18-24

Effective Date: Immediately

Issuance Date: 1/15/19

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

**FROM: DEBBIE RUPPERT, EXECUTIVE DIRECTOR, MDH/OES
 NETSANET KIBRET, EXECUTIVE DIRECTOR, DHS/FIA**

RE: 45-DAY APPLICATION PROCESSING

PROGRAMS AFFECTED: NON-MAGI MEDICAL ASSISTANCE (MA)

ORIGINATING OFFICE: OFFICE OF ELIGIBILITY SERVICES

SUMMARY

This action transmittal (AT) provides new guidance on the timelines for the processing of Aged, Blind, and Medical Assistance Long-Term Care (MA-LTC) applications. Specifically, the timeframe for processing these particular applications has increased from 30 days to 45 days so that Maryland’s regulation will match the Federal regulation. **There is no change to the application processing timelines for the Disabled or the Modified Adjusted Gross Income (MAGI) groups.**

The Maryland Department of Health has established time standards for determining eligibility and informing the applicant(s) of what they are. The time standards cover the period from the date the application is received to the date the agency mails a notice of its decision to the applicant/authorized representative. The agency must determine eligibility within the standards except in unusual circumstances, for example: (1) When the agency cannot reach a decision because the applicant or an examining physician delays or fails to take a required action, or (2) When there is an administrative or other emergency beyond the agency's control.

ACTION REQUIRED

Applications for Medical Assistance need to be determined within specific timeframes, but as soon as possible:

- 60 days for applicants who apply for Medicaid on the basis of disability;
- 45 days for all other non-MAGI applicants (COMAR 10.09.24.04-1, revised as of Dec.

- 31, 2018);
- 30 days for MAGI applicants (COMAR 10.09.24.04);
- 10 days for pregnant women applicants for MAGI (Local Health Department standard); and,
- retrospectively as soon as possible for applicants in the X02 category.

Case managers must determine eligibility for Aged, Blind and MA-LTC applications within 45 days if all eligibility requirements have been satisfied. Approve the case if the applicant is eligible, or deny for specific eligibility reasons (for example, resources overscale). When appropriate, case managers should use the Good Faith and Reasonable Certainty policy (FIA AT #17-15) to determine eligibility within the 45 day required timeframe.

When an applicant has not returned all required verifications by the 45th day, the case manager must deny the MA-LTC application in the Eligibility & Enrollment (E&E) system and deny the Aged and Blind applications in CARES until they are converted to the E&E system.

For all applications that are denied on the 45th day for not returning all required verification the case manager must:

- monitor the application in the appropriate eligibility system for receipt of the requested and required information until the last day of the month of the 6-month consideration period;
- send appropriate notices for any subsequent eligibility determinations (for example, resources overscale); and,
- ensure that all case information and manual notices are uploaded to the E&E system for MA-LTC applications and uploaded to ECMS for Aged and Blind applications processed in CARES until they are converted to the E&E system.

A case manager must respond to and document any questions received from the applicants and assist applicants with obtaining verification when they request assistance because they are having difficulty obtaining the verification (FIA AT #18-06 Revised).

Note: As soon as it can be determined that an applicant is overscale in resources based upon verifications already received before the 45-day timeframe, the application **MUST be denied immediately**. The case manager should also cite any remaining required verifications when they notify the applicant that they are overscale in resources.

INQUIRIES

Please direct system and procedural inquiries for MA-LTC applications to help.mdthink@maryland.gov and system and procedural inquiries for Aged and Blind applications to fia.policy@maryland.gov. Please direct policy questions to the Maryland Department of Health, Office of Eligibility Services at 410-767-1463 or 1-800-492-5231 (select option 2 and request extension 1463).

cc: DHS Executive and FIA Management Staff
MDH Executive and OES Management Staff
MHBE Executive and Management Staff
DHS Constituent Services
DHS Help Desk