

Update February 2014

No. 2014-10

Affected Programs: BadgerCare Plus Standard Plan, Medicaid **To:** Hospital Providers, HMOs and Other Managed Care Programs

Effective April 1, 2014, Qualified Hospitals Allowed to Make Presumptive Eligibility Determinations

This *ForwardHealth Update* announces that, effective April 1, 2014, qualified hospitals will be able to make presumptive eligibility determinations for BadgerCare Plus eligibility for specific populations due to the Affordable Care Act.

Introduction

To expedite enrollment of eligible members and provider reimbursement, ForwardHealth is implementing the Affordable Care Act (ACA) requirement that allows qualified hospitals to make presumptive eligibility (PE) determinations for certain Medicaid and BadgerCare Plus populations. Any Medicaid-enrolled hospital that agrees to the PE determination process set forth by ForwardHealth will be considered a qualified hospital.

In Wisconsin, PE is also known as express enrollment or temporary enrollment. Presumptive eligibility refers to temporary BadgerCare Plus eligibility determinations that are based solely on preliminary household and financial information provided by the applicant. This process allows the applicant to receive immediate health care coverage while his or her application for Medicaid or BadgerCare Plus is processed.

Becoming a Qualified Hospital

Becoming a qualified hospital is a straightforward process and there is no cost for this designation. Hospitals will be required to notify ForwardHealth of their interest via the ForwardHealth Portal. To be designated as a qualified hospital for making PE determinations, hospitals must meet both of the following requirements:

- The hospital must be enrolled in Wisconsin Medicaid and BadgerCare Plus.
- The hospital must agree, via a one-time attestation, to do the following:
 - Conduct PE determinations internally and only for patients of the hospital (inpatient or outpatient).
 Hospitals may not delegate their PE determination authority to an outside entity.
 - Only allow hospital staff who have received training on PE policies and procedures to conduct PE determinations.
 - ✓ Assist PE applicants with the completion of a full Medicaid and BadgerCare Plus application.
 - ✓ Retain a copy of all "Am I Eligible" (AIE) results pages for three years (AIE is a feature of ACCESS).

While hospitals may not delegate their PE determination authority to a third-party contractor, hospitals may rely on such contractors to assist patients with the PE process. Hospital staff must review and approve the AIE screening results and the information provided in the ForwardHealth Portal prior to submission. ForwardHealth will establish performance standards and will hold hospitals accountable based on these attestations. Refer to the Performance Reviews and Reasons for Disqualification section of this *ForwardHealth Update* for specific performance criteria and corrective action requirements related to these attestations.

Hospitals will provide their attestation via the ForwardHealth Portal at *mmw.forwardhealth.mi.gov/*. To access the Attestation page, the Portal account administrator of the hospital will need to log in to the hospital's secure home page and click the new Hospital Presumptive Eligibility Attestation link in the Quick Links box on the right side of the page. Access to the Attestation page will be available February 17, 2014; however, hospitals will not be able to submit PE determination information until April 1, 2014.

Refer to Attachment 1 of this *Update* for a flowchart that illustrates the process for becoming a qualified hospital to make PE determinations.

Eligible Populations

To meet the ACA requirement, effective April 1, 2014, ForwardHealth will allow qualified hospitals to make PE determinations for the following Wisconsin residents:

- Pregnant women.
- Children under age 19.
- Individuals applying for Family Planning Only Services benefit plan.
- Childless adults under age 65.
- Parents and other caretakers.
- Women under age 65 with breast or cervical cancer.

Additional eligibility information (e.g., specific poverty levels) will be included in the ForwardHealth training materials. Hospitals are currently eligible to make PE determinations for children, pregnant women, and for individuals applying for the Family Planning Only Services plan. Hospitals must meet the requirements outlined in this *Update* to make PE determinations for the new PE categories of childless adults, parents and other caretakers, and women under age 65 with breast or cervical cancer.

Eligible Populations Who Are Inmates of Public Correctional Facilities

Hospitals will be allowed to make PE determinations for patients who are inmates of certain public correctional institutions (e.g., county jails) as long as those patients are expected to remain in the hospital for 24 hours or more. The PE determination process for these patients will be the same as for other patients. Patients who are inmates of a state correctional facility are not eligible for Medicaid or BadgerCare Plus through the hospital PE process.

Presumptive Eligibility Determination Process

The PE determination process will be Web-based and will be based on the results of a few questions. If the applicant is found presumptively eligible, the hospital will be required to assist him or her with completion of the full Medicaid and BadgerCare Plus application.

Process for Presumptive Eligibility Determinations

The Department of Health Services (DHS) will implement a temporary application process that hospitals will use until a permanent process can be implemented. Hospitals will use a combination of the AIE feature of ACCESS at *access.wisconsin.gov*/ and the ForwardHealth Portal to determine PE.

Note: Qualified hospitals that are currently using ACCESS for Providers and Partners (APP) are encouraged to continue to use that tool to make determinations for children and pregnant women.

The hospital worker will first lead the applicant through the AIE process on ACCESS to determine if he or she is eligible. The AIE screen takes about 15 minutes to complete and includes questions about the following as they pertain to the applicant:

- Household size.
- Household income.
- Access to health insurance.
- Monthly bills (housing, child care, child support).

If the applicant does not qualify for PE after completing the AIE process on ACCESS, the PE process stops there.

If the applicant is determined to be presumptively eligible after completing the AIE process, the hospital worker will then go to the Hospital Presumptive Eligibility Attestation link on the hospital's secure Portal page on the ForwardHealth Portal and complete the following information related to the applicant:

- Social security number.
- Full legal name (first, middle initial, last).
- Date of birth.
- Gender.
- Complete mailing address.
- Date of application.
- Indication of state residency.
- Indication that the applicant is a United States citizen or lawful immigrant.

Note: ForwardHealth will require hospitals to ask applicants about state residency and citizenship.

ForwardHealth will use this information to enroll the member in BadgerCare Plus.

In addition to providing the member's demographic information, ForwardHealth will ask the hospital staff to provide their attestations to the following actions:

- The hospital staff assisted the patient with the AIE screening.
- The hospital staff provided the patient with a copy of the AIE screening results.
- The hospital staff obtained the patient's signature in acknowledgement of the information provided.

For this purpose, hospital staff includes third-party contractors working within the hospital (inpatient or outpatient) setting.

Hospitals will receive confirmation of the PE status and the ForwardHealth Enrollment Verification System will immediately reflect the PE eligibility dates. Hospitals will not have the option of printing a temporary card for the member. ForwardHealth will mail a ForwardHealth identification card to the member within two business days if the member has not already been issued a ForwardHealth card.

Refer to Attachment 2 for a flowchart that illustrates the PE determination process.

Future Permanent Process for Presumptive Eligibility Determinations

At a future date, ForwardHealth will modify the PE process to have all PE determinations conducted through ACCESS APP, which is the current process for children and pregnant women. The use of APP will streamline the PE process and will allow hospitals to print a temporary identification card for eligible members. Hospitals will be notified when ForwardHealth is ready to make the transition to the APP eligibility tool.

Presumptive Eligibility Period

The PE period begins on the date of application. For all eligibility categories, the PE period ends on the earlier of the following:

- The last day of the month following the month in which the PE determination was made if no application for Medicaid or BadgerCare Plus is filed by that date.
- The date an eligibility determination for full Medicaid or BadgerCare Plus is made, regardless of the outcome of the determination.

For example, if a child is found presumptively eligible for BadgerCare Plus on July 3, he is certified until August 31. However, if on July 5, his mother completes a full BadgerCare Plus application for him, and on August 6, he is found ineligible for BadgerCare Plus for some reason such as excess income, the child's PE would end on August 6. Hospitals will not be required to amend the end date of the PE period.

Limits on Number of Presumptive Eligibility Periods

There are limits on the number of PE periods for all eligibility groups. Pregnant women will be eligible for one PE period per pregnancy. All other populations will be limited to one PE period within a rolling 12-month period, starting with the effective date of the initial PE period. Since multiple PE periods will not be allowed, hospitals are required to assist applicants with the completion of the full Medicaid and BadgerCare Plus application.

Covered Services

Effective with the date of determination,(i.e., the date an application that meets the PE criteria is submitted) individuals will be eligible to receive coverage under Wisconsin Medicaid and BadgerCare Plus as indicated below.

Pregnant Women

As currently allowed, pregnant women will be eligible for *ambulatory* pregnancy-related care as outlined in the Express Enrollment for Children and Pregnant Women service area of the ForwardHealth Online Handbook at *www.forwardhealth.wi.gov/*. The member is required to be fully enrolled for coverage of inpatient services, including the delivery.

Family Planning Only Services

Individuals who are determined eligible for the Family Planning Only Services benefit will be eligible for family planning and family planning-related services only. Refer to the Online Handbook for the specific listing of services.

All Other Populations

All other populations indicated below will be eligible for Medicaid and BadgerCare Plus Standard Plan coverage, as outlined in the Online Handbook:

- Children.
- Parents and caretakers.
- Childless adults.
- Women with breast and cervical cancer.

Performance Reviews and Reasons for Disqualification

ForwardHealth will monitor PE submissions and will conduct periodic, random reviews of the hospital PE process. Reviews could include on-site visits. ForwardHealth will provide technical assistance to hospitals if a need is indicated. However, ForwardHealth will make immediate referrals to the state's Office of the Inspector General (OIG), if internal monitoring or random reviews lead to a suspicion of inappropriate PE submissions. ForwardHealth may immediately suspend the hospital's ability to submit applications pending the outcome of OIG's investigation. If an allegation of fraud is substantiated, ForwardHealth will pursue recovery of payments made to the hospital during the PE period, if submissions do not meet ForwardHealth requirements.

ForwardHealth will also monitor, on a hospital-by-hospital basis, the number of presumptively eligible members who are subsequently found eligible for Medicaid or BadgerCare Plus. ForwardHealth may require additional training for hospitals with resulting Medicaid or BadgerCare Plus enrollment levels that fall below 90 percent of the number of PE determinations made in a 12-month period.

On an annual basis, ForwardHealth will monitor each hospital to ensure that the hospital is following the stated policies and procedures. ForwardHealth will use the criteria outlined below to disqualify hospitals:

- Hospitals delegating their PE determination authority to an outside entity will immediately have PE submissions suspended by ForwardHealth. Hospitals will be disqualified for two years if this practice is not corrected as requested by ForwardHealth.
- Hospitals committing fraudulent violations of the PE policies will be disqualified for five years by ForwardHealth, if such violations are verified.
- Starting in calendar year 2015, hospitals that fall short of an established submission rate for a completed Medicaid and BadgerCare Plus application may be subject to corrective action and ultimate disqualification for up to two years. The performance expectation for this

measure will be established in 2015, based on the ratio of PE applications to full Medicaid and BadgerCare Plus submissions.

ForwardHealth will send a written notification to hospitals stating the reason for the disqualification. ForwardHealth will not accept PE determinations from hospitals during the period of disqualification.

Training

ForwardHealth will provide qualified hospitals with a stepby-step user guide and training on the hospital PE process. Training sessions will be conducted in mid-March 2014. ForwardHealth will notify qualified hospitals of the initial training dates. The initial and subsequent training dates will also be posted on the ForwardHealth Portal. Hospitals will be responsible for ensuring that their staff receives training and understand the PE process, prior to conducting determinations. Hospitals must retain documentation that shows the names of trained individuals and the dates they received their training.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at *www.forwardhealth.wi.gov/*.

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ATTACHMENT 1 Process for Becoming a Qualified Hospital

The following flowchart details the process a hospital needs to follow when seeking to be designated as a qualified hospital for making presumptive eligibility (PE) determinations.



ATTACHMENT 2 Presumptive Eligibility Determination Process

The following flowchart details the steps needed to complete the presumptive eligibility (PE) determination process.

