



# Question & Answer

## HCPF: Emergency Waiver Webinar

*During the 2019 Novel COVID-19 Pandemic, Health Care Policy & Financing will be providing coverage to individuals not otherwise eligible for Medical Assistance coverage for COVID-19 related testing services. Currently these limited benefits do not include treatment or complications from COVID-19. We will also be providing continuous coverage to members during the public health emergency period.*

Question	Answer
<i>We were told that COVID 19 limited Medicaid coverage would cover COVID-19 treatment, not just testing. Can you please clarify?</i>	We continue on a daily basis to get clarification from CMS partners. Right now, only testing will be covered.
<i>Will the PEAK COVID questions print out on the PEAK application?</i>	Yes these questions will print on the PDF
<i>Since interviews are not required for MA, if the client was denied do we then call them and ask them these questions if they did not indicate that on the application?</i>	At this time, we are not asking anyone to hold up applications. If a member calls back or inquires about the limited coverage, you could have them then complete the worksheet and then reevaluate at that time.
<i>Will the COVID Details screen appear in the interactive interview queue?</i>	Yes, if Medical Assistance is on the case.
<i>Will this report be emailed to us or can we subscribe for it?</i>	This report is security limited to State and Connect 4 Health users only.
<i>Is there a reinstatement period if the program was originally denied and then the answers change?</i>	30 days - can be reevaluated
<i>Can the worksheet be client declaration or does it have to be the actual "worksheet"</i>	We can take self-attestation verbally.



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<i>If a member has a LOC cert that expires or does not turn in VCL items - the LTC is denied but then the member could apply for the COVID coverage?</i>	At intake that is correct.
<i>So if they are only eligible if they were denied for a reason other than the ones listed, is this essentially for people who would normally be over income for MAGI?</i>	Potentially, yes. If they don't meet one of the exceptions and were denied in a Medicaid or CHP+ category (i.e. over income, missing verifications) and answered the Covid questions accordingly, then they would be potentially eligible for the limited testing benefit.
<i>Can you please clarify regarding Long term Care Applications and Re-determinations. We have been encouraged to avoid denials/ closures if possible, using PPP and collateral contact regarding most required verifications. Are we processing business as usual- requesting and requiring verifications for approval?</i>	For Medicaid yes. For all intake applications we are looking at those verifications. Nothing has changed from a verification perspective.
<i>How will the logic run? Will it run for other Med first then COVID or only run for COVID if they answer the COVID questions?</i>	It will run through all medicaid and all CHP+ categories. If they are not eligible for either, then the system will look to see if they answered the COVID questions. If they did, and answered accordingly then they will be placed in the COVID-19 limited benefit program.
<i>Do we have to have verification or DOS for the testing or appt with a positive diagnosis to allow approval?</i>	That can be self attestation - verification is not needed.
<i>Will the reinstatement include MSP programs?</i>	Yes - all medical assistance categories.



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<i>Will there be system generated case comments indicating why the case was reopened?</i>	Yes. System will generate a system automated case comment for all members who were reopened (who would have otherwise been discontinued)that had action taken on them on/ or after 3/18/2020.
<i>How far back will cases be reopened?</i>	Cases will be reopened for anyone who had action taken on March 18th or after.
<i>Will the client receive correspondence explaining they are reinstated by the system?</i>	For the population that closed at the end of March and were instated they received a speed letter. For those that are scheduled to close at the end of april also will be receiving a speed letter letting them know they will remain open during the PHE
<i>Will there be a report of cases that exception out during the run to reinstate people?</i>	We didn't make any changes to mass exceptions. There should be no mass exceptions for these populations.
<i>Will LTC cases be reopened even if closed for failure to provide or LOC expires?</i>	Yes, per CMS guidance.
<i>If a child was declared on a parents case and didn't live with them they would keep the kid on the Med for now?</i>	Correct.
<i>What about the population that were scheduled to close March 31st due to the exchange issue a few months ago?</i>	We are locking them in as well - no longer taking action on these cases. This has been postponed until after PHE
<i>Clients failing for IEVS or over income on an open case will be reinstated?</i>	Yes.
<i>Once the mass case opens what action does the rep /client have to take?</i>	No action is required by the rep/member.



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<i>If we find that someone has or is committing fraud and should not be eligible for MA, we cannot close the case or remove a member that should not be on that case?</i>	Correct - still have that documented in the case file but at this time they will be locked in.
<i>If we closed a case as a result of a fraud investigation in February or March, will that case be reopened?</i>	Yes, if action was taken on/or after 3/18 and the closure date was scheduled for 3/31/20.
<i>For those RRRs that closed correctly for failure to provide verifications, that are now being Forced Passed- when will their RRRs be due next? A year from now, or will it be at the end of the emergency, compounding the # of RRRs due in that month?</i>	With this project we have not extended any redetermination dates for ongoing cases. They will remain locked in for the remainder of the PHE. However, if an RRR was re-opened these were pushed out 1 year or until the next case RRR if guaranteed ppl were on the case. However, the Department with direction from our federal partners may need to require current verification once the PHE is over. The “how” has not yet been determined, but the Department is cognizant of the potential influx to the counties if all are due at the same time and is going to try our best to stagger where we can.
<i>Do WAWD clients get their premium automatically taken away?</i>	All Buy-in premiums including those that have set up a recurring payment have been waived/stopped during the COVID-19 PHE. If members choose to continue to pay and mail in their monthly premium they can do so. If they continue to pay, this will reflect as an overpayment in CBMS and on the members premium statement and will be applied to any future premium amounts owed once the COVID-19 PHE is over.
<i>Is it correct that individuals who had coverage discontinued as of 02/29/2020 due to over income will remain failing for coverage?</i>	Correct.



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<i>For cases in RRR mode, for instance MSP,. So we will need to still request verif of resources? If the client doesn't return those verifications then they will "force pass still"? Is there discussion at the State or Federal level or waiving these requirements?</i>	From a systems perspective yes. A member will not fail for not providing verifications. From a policy perspective, we still need to work these as normal.
<i>What should DSS1/5615 noticing to the SEP/CCB/NF look like for individuals that were Force Passed?</i>	The info sharing form should reflect that the member will remain active due to the force pass for COVID-19 PHE for LTC (whichever waiver). This form should also include the date of eligibility. The 5615 should also reflect this comment as well as the member's current gross income minus any allowable deductions to reflect the patient's liability.
<i>Some OAP cases closed 3/31/2020 after 3/1/2020 AF modernization due to exception. Some lost OAP, therefore, lost MA, will those OAP-MA cases also re-opened even though they are no longer OAP eligible due to AF modernization rules?</i>	Yes, the OAP-MA will reopen.
<i>To clarify RRR's should continue to be worked.</i>	Yes, RRRs still need to be worked. 1. These need to be worked because we have not been given permission by our federal partners to waive RRR's, 2. We share a system with our CDHS partners and do not want to impact their programs, 3. If members are eligible for a higher benefit category we need to be able to move them to that (i.e. Magi-Adult to LTC) and 4. This will help with the influx at the end of the COVID-19 PHE



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<i>Is there a report that shows who was sent the speed letters?</i>	There is a report that outlines all members that were discontinued and reopened that had action taken on them on/or after 3/18. This report is security limited to State and Connect 4 Health users only.
<i>Will signature requirements for MAGI member paperwork allow electronic signature as has been allowed for CMAs?</i>	We are still waiting on guidance from CMS on signature requirements.
<i>For those fraud cases will be able to close them after the Health emergency is over due to the fraud investigation determination?</i>	Awaiting guidance from CMS and will ensure to communicate once this guidance is received
<i>Can clients still turn in an ARBOR app and how would they do that, best way to proceed?</i>	Yes they can still turn disability applications in via in person, county drop boxes, mail in, etc...and workers should continue to review and send to ARG after the review.
<i>What communication will go out to the CCB's SEPs and the Nursing Homes?</i>	Internally we have been working with LTC supports and services staff. Communication has been issued out. They are also on the website and it went out in the County Connections newsletter.
<i>Question about the closures notices to SEP/NF: Should we send a denial to them however indicating that the case remains approved due to the public health emergency?</i>	The case will continue to force pass and not close. The information sharing form should not be sent saying the case closed. If you sent an info sharing form saying the case was closed 3/31, you should send a new info sharing form stating the case is being reopened due to COVID -19 Public Health emergency. This is also for 5615's sent terminating the patient liability. A new 5615 should be sent stating the



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	case is open due to COVID-19 with the correct patient liability.
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<i>Do all 3 questions have to have those answers? Or as long as one of their answers matches from the 3 COVID19 screening questions?</i>	All 3 questions need to be filled out accordingly.
<i>Once approved does the recipient have a certain amount of time to go and get testing? If they get a negative result, then does the benefit end immediately since they don't have the virus?</i>	We have not set a time limit nor a limit of how many tests they get. We are locking this population in regardless if a negative test is received.
<i>Will people who have Medicare eligibility but did not sign up for Medicare be able to apply for this limited benefit for Coronavirus testing?</i>	Yes. Anyone that applies for Medicaid/Medicare programs and they don't qualify for one of those (keep in mind the exceptions outlined within training), if they answer the COVID questions accordingly, then they will be placed in the limited coverage benefit.
<i>Will cases still close for residency if a VCL was automatically sent to the household for PARIS to verify residency and they did not verify or they responded that they are no longer a CO resident and no exceptions apply?</i>	The system will not automatically update the Colorado residency screen from Y to N per current functionality. If the CO Residency is updated to N, the member will be denied or discontinued because they are no longer considered a Colorado resident based on the response or no response of the VCL.
<i>Will a system generated case comment be listed if case is rescind due to COVID-19?</i>	System generated comments will be reflected on cases that are force passing that had action taken on them March 18, 2020 or after. Any cases before that have not been reopened at this time.
<i>With CHP+, if there is a new application, will there be a fee due?</i>	Yes, the system will require them to pay their enrollment fee on a new CHP+ application.



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<i>Will this webinar count towards Med Incentive credit?</i>	Yes.
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<i>When people are in a "force pass" scenario does it extend the RRR date or does their eligibility remain open until the pandemic is lifted?</i>	With this project we have not extended any redetermination dates for ongoing cases. They will remain locked in for the remainder of the PHE. However, if an RRR was re-opened these were pushed out 1 year or until the next case RRR if guaranteed ppl were on the case. However, the Department with direction from our federal partners may need to require current verification once the PHE is over. The "how" has not yet been determined, but the Department is cognizant of the potential influx to the counties if all are due at the same time and is going to try our best to stagger where we can.
<i>During the call on Friday, you indicated that cases that were closed effective 3-1-2020 would be re-opened. Has that been clarified and not only for those cases closed 3-18-2020 and after?</i>	This project reopened all cases that had action taken from 3/18/20 and after. There will be a future project to look at the cases from 3/1/20 - 3/17/20. We will ensure to send out a CBMS Communication to notify the end-user when these cases will be re-opened.
<i>Those who have their payment automatically taken out, how will this affect them?</i>	As of 4/5/20, we stopped the recurring payment. These members were notified via a speed letter letting them know. If they still send in their payment, it will be accepted as a credit and will show as an 'overpayment' within the system and on their premium statement. These over payments will be applied to future owed premium amounts after the COVID-19 PHE is over.
<i>"Duration of Public Health Emergency" is currently undefined, am I correct? So if individuals are force passing, we can't tell them exactly when that will end?</i>	Correct. We don't know at this time when the Public Health Emergency will end but we will ensure to communicate and give guidance to our county partners as these details become available





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<i>When there's a VCL due is force passing clearing the VCL that was due for verification that was not provided?</i>	If someone is force passing and they have a VCL due, they will not be discontinued. They will be force passed in the aid code that they were going to be discontinued in.
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<i>For clients that do continue to pay their WAWD/CBWD premiums and system generates it as an overpayment do we leave the overpayment on case or should we refund the clients case?</i>	Please leave the overpayment on the case, as these will be applied to <b>future owed</b> premium amounts once the COVID-19 PHE is over
<i>If WAWD recipients were closed for past due payments and owe \$75, how will they pay? It's been reported that it will not allow them to make the payments to cover past due amounts.</i>	The system waived all past due premiums. We are not collecting nor are we penalizing members for past due premiums. This is only for the populations identified in March and April going forward. Keep in mind that the Feb premium would have been due by April 17, so these premiums were also waived.
<i>How does this work with new nursing home applications? Such as pending due to verification?</i>	All new intake cases need to be worked as normal. We are awaiting guidance from CMS, but as of this date verification requirements have not been waived for intake applications. Communications have been sent to our LTC partners regarding guidance on Level of Care. These memos are also posted on the website.
<i>If we have a LOC cert page that expires will the system just keep it updated?</i>	The ongoing case will remain open because we are "locking" everyone in. You can update the page with the date when you receive it from the case manager.
<i>If an undocumented person gets coronavirus, will they be treated under emergency Medicaid provisions?</i>	(guidance from CMS?) Currently we are approving undocumented individuals for COVID uninsured; however based on CMS clarification this is not permissible and will be corrected soon.
<i>If they do not apply through PEAK can they still apply in person? Does an attachment sheet need to be added to</i>	Yes, they can if the county is still taking in-person applications. The Covid -19 PHE questions can be verbal, an attachment sheet is not required. Once we have the worksheet



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<i>the paper Medicaid application with these questions?</i>	ready with the additional questions we will notify eligibility sites.
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Question	Answer
<i>If a client is eligible under these rules, and tests positive, will their care be covered afterward?</i>	As of date we have only been given permission to cover the testing for COVID-19 PHE members. Awaiting direction from CMS on future benefits.
<i>If a client has Other Health Coverage (OHC) and wants to be considered for COVID-19 testing because their OHC does not cover testing, can they pass for this limited coverage?</i>	If the member has other health insurance (one of the three COVID-19 PHE questions) the member will not pass for the limited COVID-19 testing benefit.
<i>Should we submit HDT if we find any cases that reopened and shouldn't have for No Longer CO Resident?</i>	Yes, please open a helpdesk ticket.
<i>If their CHP+ ended March 30 or scheduled to end due to turning 19, or post-pregnancy period ends, will MA still end or will it continue with this covid extension?</i>	As long as they do not meet one of the exceptions listed in the webinar training, they will be locked into the CHP+ aid code.
<i>Will retroactive coverage be approved and will it be the standard - up to 90 days retro approval?</i>	We did not make any changes to the 90 days retroactive. Right now the COVID questions are applicable to the month of April 1st and forward.
<i>What should be done with cases that fell through the cracks and remain closed? These are individuals that received a notification stating benefits would be extended due to COVID-19. Should we submit Help Desk Tickets or Rescind?</i>	Please submit a Help Desk Ticket. First, be sure that these cases had action taken on or after March 18th, this includes Redeterminations. Anything prior to March 18th, these cases were not reopened with this build.
<i>If someone ages out will their MAGI continue due to forced passing?</i>	Yes. If someone is currently on Medicaid or CHP+ they will be locked into the aid code in which the member previously discontinued,



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	unless the member is now eligible for a higher benefit category.
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Question	Answer
<i>Will individuals that are required to submit resource verifications for eligibility, specifically LTC clients?</i>	Yes, they are still required to submit verification at this time. Process these cases as you normally would.
<i>Is there a phone number where clients can apply for Medicaid over the phone?</i>	To apply by phone call 1-800-221-3943 / State Relay: 711
<i>Is Self-Employment not counting on clients during the Force Pass? Or does Self-Employment income need to count and we should send HDT?</i>	If someone is force passing, they could potentially be over income.
<i>The information you are reciting for LTC (during live webinar) - can you put that in writing within the Q&amp;A doc? It was a lot of information.</i>	For LTC cases force passing, the info sharing form should reflect that the member will remain active due to the force pass for COVID-19 PHE for LTC (whichever waiver). This form should also include the date of eligibility. The 5615 should also reflect this comment as well as the member's current gross income minus any allowable deductions to reflect the patient's liability. For new LTC intake applications, they need to be worked as normal. We are awaiting guidance from CMS, but as of this date verification requirements have not been waived for intake applications. Communications have been sent by the Department's LTSS staff to LTC partners regarding guidance on Level of Care. These memos are also posted on the website. Case managers have been given guidance on the Professional Medical Information Page (PMIP) and that should not impact eligibility level of care. Continue to enter the level of care per the ULTC 100 on the level of care screen. Nursing facilities have been instructed to use



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	estimates of income for the patient liability until a completed 5615 is sent by eligibility site workers.
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