

Starting Soon...

Medicaid Monday: Immediate Needs

September 11, 2023

Louis W. Pierro, Esq. Founding Partner

Frank E. Hemming III, Esq. Senior Associate Attorney



Welcome

- Your Lines Are Muted
- Type Questions in the Q&A Section at the Bottom of Your Screen
- Presentation is Posted:
 Pierrolaw.com/ Resources Under Medicaid Planning
- Fill Out Our Survey with Feedback





Our Team Of Attorneys







Aaron Connor



Peter Strauss



Caryn Keppler



Richard Rothberg



Frank Hemming, III



Ingrid Johnson



Anthony Khatchoui



Arkley Mastro



Robert Bosman



Michael Mullaney



Theresa Skaine



Carolyn Glynn



Kristen Peck



Jacob Verchereau



Bethany Van Pelt

<u>Serving New York State Residents Through Offices in:</u>

Albany, New York City, Ronkonkoma, Garden City, Hudson, Lake Placid, Utica Also licensed in New Jersey, Massachusetts and Florida



WATCH ALL MEDICAID MONDAY VIDEOS:

January 2023 Update and the Surprising New Numbers

February Qualifying and Why It's Become Harder

March Medicaid Asset Protection Trusts

April Using a Pooled Trust to Qualify for Medicaid Home Care

May Nursing Home Medicaid

June What Happens If You're Denied?

July Recertification and Post-COVID Protocols

August Planning for Individuals With a Disability

https://www.pierrolaw.com/medicaid-planning-videos/



AGENDA

- Typical MLTC Application Process and Timeline
- Immediate Needs
 - Timeline
 - Forms Required
 - Transition to MLTC





INCOME LEVELS ROSE IN 2023

Landmark Medicaid Increases Passed in NYS Budget: Same income limit will be used for younger people under Affordable Care Act and for Age 65+, blind & disabled

INCOME / MTH

ASSET LIMIT

YEAR	SINGLES	COUPLES	SINGLES	COUPLES
2023	\$1,677 + \$20	\$2,268 + \$20	\$30,182	\$40,821
Difference over 2022	+\$743	+\$901	+\$13,382	+\$16,221

Institutionalized Individual Income Allowance remains the same: \$50



Typical MLTC Application Timeline

Statewide, an adult Medicare beneficiary 21+ who needs community-based long-term care, can encounter long delays applying for Medicaid and then enrolling in an MLTC plan

Assuming the individual is Medicaid eligible:

- 1. Apply for Medicaid at the County DSS/HRA (45 days if no disability determination, 90 if disability determination and pooled trust is needed)
- 2. Once approved, schedule an community health assessment (CHA) and a Clinical Appointment with a provider from the Independent Practitioner Panel by contacting the New York Independent Assessor (NYIA). Both the CHA and the Clinical Appointment must be completed within 14 days of contact with NYIA. (up to 14 days)
- 3. Contact a MLTC plan
 - Schedule an in-home assessment to be completed by plan (up to 30 days)
 - Following assessment and offer of hours, enroll with plan
 - Enrollment paperwork must be submitted by 19th of month for enrollment to start 1st of mext month. No mid-month pick-up dates (10-41 days)

PIERRO, CONNO & STRAUSS. LLC

APPROXIMATELY 4.5 to 6 MONTHS TOTAL

TYPICAL MLTC APPLICATION TIMELINE (Non-Pooled Trust)

File Medicaid Application with DSS September 1

Medicaid Approved (45 days – Straight 90 days – With Pooled Income Trust) October 15*



Contact NYIA for CHA & Clinical Appointment

October 16



MLTC Conducts
Assessment of Needs
November 30



If Approved from CHA and Clinical Appointment - Contact MLTC Plan & Request Nurse Assessment of Needs November 1



CHA and Clinical Appointment
Conducted in 14 days
October 30



Enrollment Agreement Signed with MLTC Plan December 1

(12/19 deadline for 1/1/24 Service Commencement)



MLTC Plan assigns Licensed Home Care Vendor or contracts with Nursing Home



Service Commences January 1



^{*}Can take longer if there are deferrals for additional documentation.

IMMEDIATE NEED

Fast track your Medicaid Application if you can prove immediate need

 2015 Law requires new procedures to process a Medicaid application in SEVEN DAYS for any applicant with an immediate need for personal care (PCS) or consumer-directed personal assistance (CDPAP) services & to approve PCS/CDAP in 12 DAYS.



WHAT TO INCLUDE IN IMMEDIATE NEED APPLICATION

Cover Sheet / Transmittal Form (in NYC)

COMPLETE Medicaid application (or approval Notice if already have Medicaid)

Practitioner Statement of Need for Personal Care/Consumer Directed Personal Assistance Services Form (DOH-5779)

Signed "Immediate Need for Personal Care/ Consumer Directed Personal Assistance Services Informational Notice and Attestation Form" (DOH-5786)

HIPPA RELEASE - OCA Form No. 960

Cover letter describing Immediate need circumstances



ATTESTATION FORM - IMMEDIATE NEED

Form - DOH-5786. https://www.health.ny.gov/forms/doh-5786.pdf

Must attest that the applicant:

- Has no informal caregivers available, able and willing to provide or continue to provide care;
- Is not receiving needed help from a home care services agency;
- Has no adaptive or specialized equipment or supplies in use to meet your needs; and
- Has no third party insurance or Medicare benefits available to pay for needed help.
- (Arguably, even if Medicare, hospice or private services in place, explain why not enough to provide "NEEDED" help, or that won't continue etc.)
- Form says may be submitted while hospitalized or in nursing home



TIMELINE FOR IMMEDIATE NEED PROCESSING

- 7 calendar days after receipt of complete Application w/ Attestation form & DOH-5779, DSS must determine Medicaid eligibility.
- DSS must request missing documents within 4 calendar days after receipt of Medicaid application, DOH-5779 form and DOH-5786 form.





WHAT HAPPENS AFTER APPROVAL?

- Within 12 calendar days of receiving complete Medicaid app, Attestation form and M11q, DSS must:
 - Refer case to NYIA for assessments
 - Once NYIA confirms receipt of case from local Medicaid office, the local Medicaid office should initiate a call between consumer or their representative and NYIA to schedule the Community Health Assessment and Clinical Appointment.
 - Following NYIA approvals, the local Medicaid office then reviews the documentation from the CHA and the Clinical Appointment and a plan of care is developed.
 - If Plan of care is for more than 12 hours, the case is referred back to NYIA for an Independent Medical Review.
 - Then Medicaid office assigns the case to a contracted Medicaid home health agency or CDPAP fiscal intermediary so services can begin "as expeditiously as possible."



TRANSITION FROM IMMEDIATE NEED TO MLTC

- Immediate Need is only temporary
- AUTO-ASSIGNMENT after 120 days receiving the temporary Immediate
 Need services, Maximus/ NY Medicaid Choice will send individual a letter.
- Letter says that if applicant doesn't select & enroll in an MLTC plan in 60 days, applicant will be auto-assigned to an MLTC plan (partial capitation).
- TIP Use that time to select a plan find plan that contracts with same home care agency
- No Conflict Free assessment necessary



THE ROLE OF PIERRO, CONNOR & STRAUSS

- Determining eligibility for success with an Immediate Needs application
- Knowledge of guidelines: i.e. single or married differences
- Preparing and assembling required forms and physicians order
- Getting the care: identification of home care options
- Keeping the plan on track with legal and care management





NEXT MEDICAID MONDAY

12-12:30pm, October 16, 2023

* 3rd Monday Due to October 9th Holiday

Consumer Directed Personal Assistance

REGISTER:

https://www.pierrolaw.com/events/ (518) 459-2100

PRESENTED BY





Frank Hemming III & Louis Pierro



Thank You! QUESTIONS?

Schedule a
Consultation for
yourself, a loved one
or clients:

info@pierrolaw.com (518) 459-2100

Please Fill Out Your Survey Following the Program