



MARYLAND Department of Health

Larry Hogan, Governor · Boyd Rutherford, Lt. Governor · Dennis Schrader, Secretary

October 24, 2017

The Honorable Thomas M. Middleton, Chair
Senate Finance Committee
3 East Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Shane E. Pendergrass, Chair
House Health and Government Operations
Committee
241 House Office Bldg.
Annapolis, MD 21401-1991

The Honorable Edward J. Kasemeyer, Chair
Senate Budget and Taxation Committee
3 West Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Maggie McIntosh, Chair
House Appropriations Committee
121 House Office Bldg.
Annapolis, MD 21401-1991

Re: HB 1181 (Chapter 303 of the Acts of 2016) – Report on the State’s Progress in Determining the Eligibility of Applicants for Long-Term Care Services Under the Medical Assistance Program Within 30 Days

Dear Chairs Middleton, Kasemeyer, Pendergrass and McIntosh:

Enclosed please find a report pursuant to HB 1181 – *Maryland Medical Assistance Program – Determinations of Eligibility for Long-Term Care Services – Reports and Meetings* (Ch. 303 of the Acts of 2016). The report addresses the State’s progress in determining the eligibility of applicants for long-term care services under the Maryland Medical Assistance program within 30 days after the filing of the applications as required by State law.

Thank you for your consideration of this information. If you have questions or need more information on the subjects included in this report, please contact Webster Ye, Deputy Chief of Staff at (410) 767-6480 or webster.ye@maryland.gov.

Sincerely,

Dennis R. Schrader
Secretary

Enclosure

cc: Lourdes R. Padilla, Secretary, Department of Human Services
Debbie Ruppert
Vesta Kimble
Webster Ye
Sarah Albert, MSAR#10764

**REPORT ON THE STATE'S PROGRESS IN DETERMINING LONG-TERM CARE SERVICES
ELIGIBILITY**

MARYLAND DEPARTMENT OF HEALTH
MARYLAND DEPARTMENT OF HUMAN SERVICES

House Bill 1181 – Chapter 303 of the Acts of 2016

October 1, 2017

2016 REPORT REQUIREMENT

The Maryland Department of Health (MDH), in consultation with the Maryland Department of Human Services (DHS), is required by HB 1181 (Ch. 303 of the Acts of 2016) to report on the State’s progress in determining the eligibility of applicants for long-term care services under the Maryland Medical Assistance Program within 30 days after the filing of the applications as required under State law.

OVERVIEW

Effective July 2016, DHS introduced an initiative to further streamline application processing by developing a tracking system to track the Long-Term Care (LTC) application processing every 15 days. This report shows the progress to date in improving the processing of applications within the 30-day timeframe.

1. The number of new applications filed each month with each local department of social services (LDSS), the Bureau of Long-Term Care (BLTC) and the Maryland Department of Health (MDH) Waiver Unit.

DHS continued to track the number of new applications filed each month for Long-Term Care Medicaid in each LDSS, BLTC and the MDH Waiver Unit. *Table 1* provides the numbers filed for each office.

Table 1. Long Term Care Applications Filed, by Month, by Jurisdiction

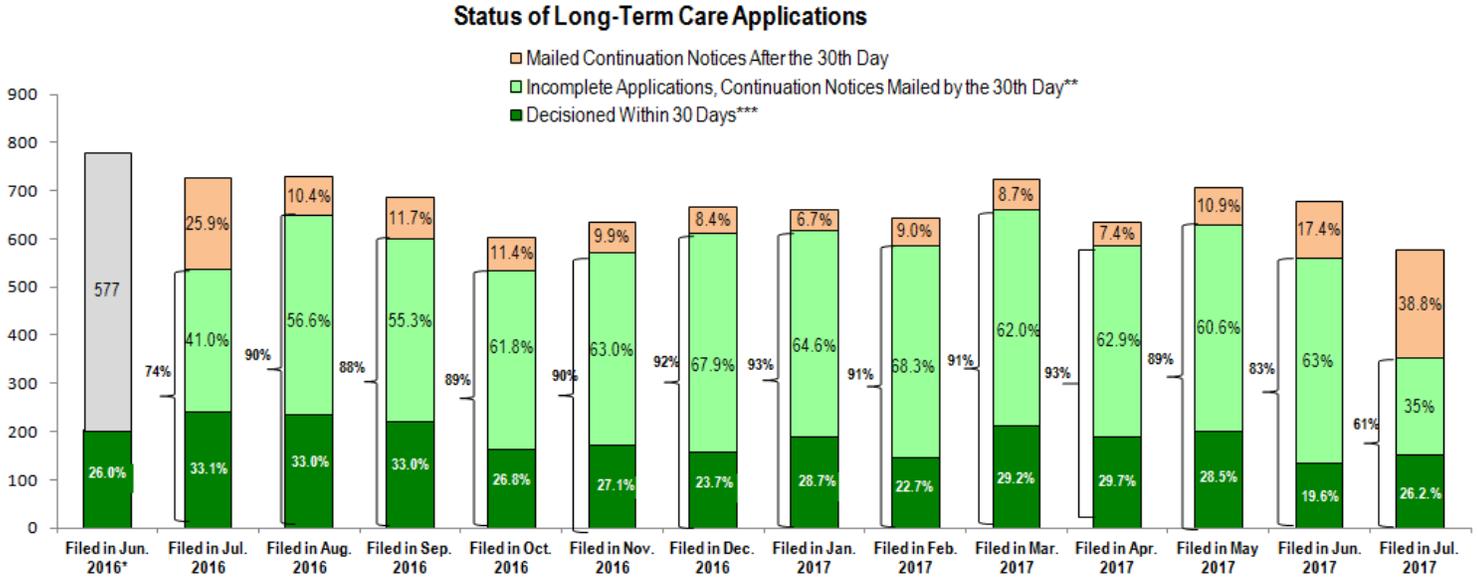
Applications Filed In	Totals	BLTC	Allegany	Calvert	Caroline	Carrdji	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Queen Anne's	St. Mary's	Somerset	Talbot	Washington	Wicomico	Worcester	MDH Waiver Unit
Jun-16	780	416	29	16	6	28	11	11	7	31	3	37	15	2	74	10	13	9	11	33	8	10	0
Jul-16	725	387	37	4	11	15	15	13	6	41	8	21	7	6	57	3	13	9	7	32	19	12	2
Aug-16	730	385	27	9	6	18	12	22	3	29	11	27	20	1	75	7	12	9	4	26	17	7	3
Sep-16	685	351	31	8	4	12	21	13	11	32	10	23	17	5	55	5	8	8	6	36	17	9	3
Oct-16	604	319	26	7	6	23	12	11	6	15	11	28	16	5	58	2	8	6	2	23	18	2	0
Nov-16	635	355	13	4	3	14	15	20	8	22	7	23	16	3	65	2	10	7	1	23	13	6	5
Dec-16	667	382	21	4	6	13	10	13	2	20	7	20	15	7	68	6	15	5	2	28	13	6	4
Jan-17	661	347	18	16	4	24	20	13	17	31	11	24	12	4	42	6	12	8	3	24	14	11	0
Feb-17	644	330	27	15	6	23	14	19	12	30	8	18	9	9	52	5	8	6	5	30	12	6	0
Mar-17	722	398	27	8	3	13	15	12	10	28	15	30	14	4	49	4	20	10	3	32	15	11	1
Apr-17	633	340	20	11	6	14	9	18	7	19	11	25	18	0	57	5	11	7	2	24	15	11	3
May-17	705	367	31	4	4	27	25	17	6	30	11	22	19	6	51	6	11	8	7	29	13	9	2
Jun-17	678	365	20	10	0	15	11	18	9	28	16	27	17	2	56	3	12	5	5	36	16	7	0
Jul-17	577	355	20	8	0	9	6	10	6	21	4	25	3	4	58	1	4	1	1	24	12	1	4

2. Information on pending eligibility cases, including (to the extent available), detailed information on the length of time beyond 30 days it is taking for the State to complete eligibility determinations. A breakdown of the information presented in 15-day increments.

Within 10 days of the receipt of LTC applications, all applicants or authorized representatives are informed via a written or electronic notice of the required information and verifications needed to determine eligibility, and the applicable pending time limit. On average, more than 86% of all applications are addressed within 30 days. Of that percentage, 28% are approved or denied, and 72% are awaiting documents to validate factors of eligibility. All applications that cannot be decided within 30 days are provided a Continuation Notice to the applicant and/or authorized representative informing them that their applications are still pending and awaiting the return of specified required verifications. The average days to address an application (approve, deny or send a Continuation Notice) is 30.1 days.

During this quarter, DHS continued to track the status of each new long-term care application filed. **Table 2** shows the progress, as of July 31, 2017, with all applications filed from June 2016 through July 2017.

Table 2. Status of Long Term Care Applications, by Month, Filed, Statewide.



* Continuation Notice had not taken effect yet. **Per COMAR 10.09.24.04I(4). ***Per COMAR 10.09.24.04-1D.
 Source: New LTC Applications Tracker files, as of July 31, 2017

Table 3 provides currently available trend data. Notably, the number of applications filed has decreased 26% since tracking began in June 2016. This is likely due to the ability of the staff to resolve inappropriately filed applications (for those nursing home residents who are currently covered by Medicare or another category of Medicaid residents of less than 30 days).

Table 3. Trends in Long Term Care Applications, June 2016 - July 2017 (center chart on page)

Trend Analysis for LTC	Jun 16*	Jul 16	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	% Change
Applications Filed	780	725	730	685	604	635	667	661	644	722	633	705	678	577	-26%
Decided Within 30 Days**	203	240	235	221	162	172	158	190	146	211	188	201	133	151	0%
Incomplete Applications, Continuation Notices Mailed by the 30th Day***		297	413	379	373	400	453	427	440	439	360	433	429	202	-32%
Mailed Continuation Notices After the 30th Day		188	82	85	69	63	56	44	58	63	47	77	118	224	19%
Average Days To Grant Extension *** (Continuation Notice)		40	43	50	44	37	40	34	34	35	37	36	35	38	-5%
Average Days To Eligibility Decision	71	70	70	67	77	72	73	73	69	Applications are still pending during the six month consideration period					-3%
Denial Rate	22%	20%	20%	17%	20%	19%	19%	21%	24%						9%

*Continuation Notice had not taken effect yet.
 **Per COMAR 10.09.24.04-1D.
 ***Per COMAR 10.09.24.04I(4).

3. Steps being taken by the State to achieve compliance with the requirement in State law that eligibility determinations be completed within 30 days after the filing of an application.

- As of May 1, 2017, the Secretary of the Maryland Department of Human Services and the Secretary of the Department of Health directed the formation of a Joint Strategic Team of Long-Term Care and MD THINK Information Technology experts. The team is currently developing a public, interagency, and industry web based portal to automate and streamline Long-Term Care eligibility determinations. Many sub-workgroups meet at predetermined days to work on various initiatives. The full team convenes on a weekly basis to track the progress of activities geared towards modernization and 30-day processing.
- A targeted roundtable meeting was held on July 27, 2017, with DHS, MDH and Long-Term Care industry representatives to address the process of submitting Long-Term Care applications electronically through myDHR. The roundtable discussion focused on how completing and submitting a LTC Applications, as well as uploading documents electronically through myDHR. A PowerPoint presentation was given demonstrating how to enter an application in the myDHR system. The latest roundtable discussion was held on September 28, 2017, to bring HealthDrive and industry representatives together to ensure understanding of the Non-Covered Services and pre-eligibility medical expenses (PEME) request process.
- **Written Guidance and Training for LTC eligibility processing provided to LTC staff:**
 - AT 18-01, Processing Long-Term Care Applications in myDHR, was issued to staff on July 26, 2017, outlining how to handle the online applications.
 - AT 18-02, Tracking and Monitoring Long-Term Care Applications Using the myDHR LTC Management Tool (LMT), was issued to staff on July 28, 2017, for interim instructions for monitoring and tracking online applications until permanent system enhancements are available.
 - Two one-day Spousal Refresher hands-on system training was provided to BLTC staff on August 7, 2017, and August 9, 2017.
 - A Good Faith and Reasonable Certainty Refresher webinar was conducted Statewide for LTC staff on August 10, 2017.
 - A 14-day LTC policy training was provided to new staff with reassignments made to handle LTC case processing, and MD THINK programmers from August 29, 2017, to September 18, 2017.

4. A timeline for achieving compliance with the 30-day requirement.

- In an effort to increase the ability to approve or deny an application within 30 days, DHS has procured an Asset Verification System (AVS) with a planned implementation of October 1, 2017. AVS is expected to hasten the processing for the 84% of the applications that require proof of financial and real property assets. Currently, 68% of applications require extensions because of missing proof of financial and real property assets. Quicker availability through AVS is expected to significantly reduce the overall percentage of applications that require extensions beyond the 30th day. Public Consulting Group (PCG) provided eight onsite regional AVS system training sessions for LTC staff, Policy and Training staff from DHS, MDH, and IT staff from DHS between August 21, 2017, and August 29, 2017.
- Although AVS is expected to reduce delays due to missing verification of financial and real property assets, DHS and MDH are complying with the provisions as required by HB 752 (Chapter 203 of the Acts of 2017) to obtain financial records when an applicant indicates that they are unable to obtain the requested documents.

5. Information on improvements made to the technology systems used to determine eligibility.

- **Core Infrastructure Development (CID)** project is currently under way as the first phase of MD THINK. The scope of the proposed solution focuses on ‘Eligibility’ for several benefit programs

including Long-term Care. Solution delivery is based on agile methodology with the number of concurrent streams (Infrastructure, Application, Security, Data etc.) currently executing in parallel. User Acceptance Testing phase for the proposed solution is planned for January and February 2018. Future phases for this project shall incorporate incremental scope delivery to introduce remaining ‘Eligibility’ areas as well integration with multiple other solutions and systems.

- **myDHR** – In the interim, myDHR is currently being upgraded to interface with the new AVS. Additionally, Stakeholders were included in the discussions for input regarding automating the 257 form. The automation of the 257 form is expected to resolve the delays in payment processing attributable to discrepancies with the form. As a result of input from Stakeholders, updates to the online Long-Term Care applications are underway to facilitate ease with entering the data. Dashboards are being created for Stakeholders to view the status of the submitted applications. Additionally, system fixes are underway to automate forms and eliminate many manual activities and workarounds so that staff can devote more time to processing cases within 30 days.
- **Asset Verification System** – DHS has contracted with Public Consulting Group (PCG) for an Asset Verification System. AVS will verify assets in all major financial institutions in the continental United States and the U.S. Virgin Islands. In addition to financial assets, AVS will provide verification of real property. DHS and MDH have reviewed and submitted the technical requirements to PCG. DHS and MDH are in discussions with PCG regarding the benefits of the transmission of data via a web-based service instead of a batch file.

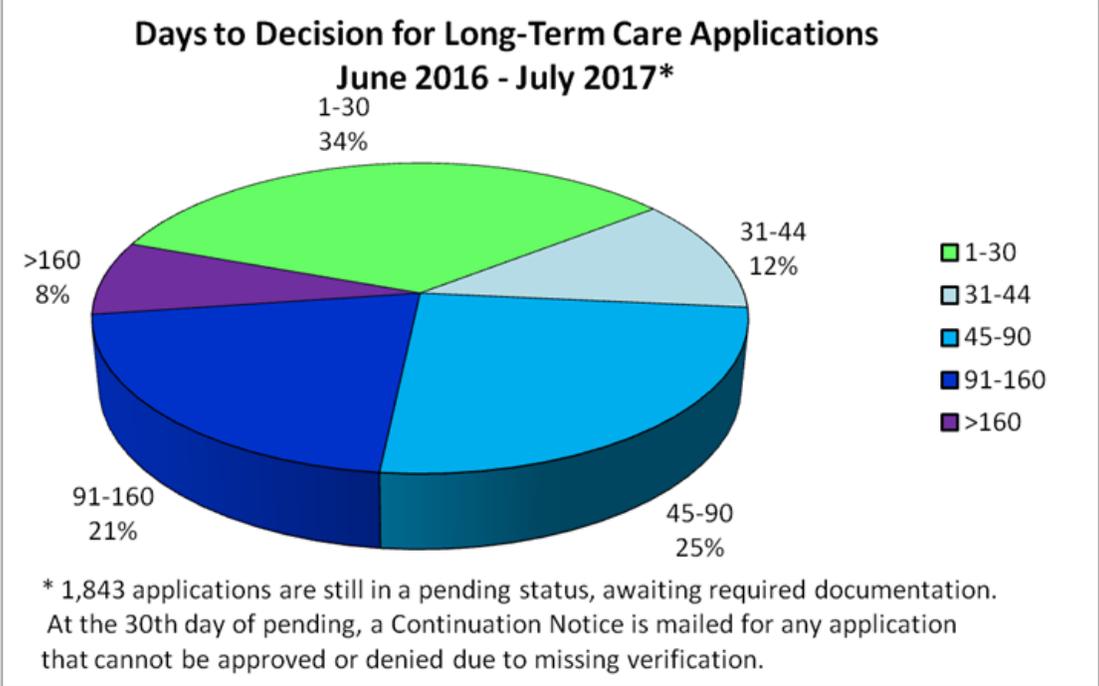
6. MDH, in collaboration with DHS, shall conduct quarterly meetings with interested stakeholders to discuss the report and develop strategies to resolve ongoing issues with and delays in eligibility determinations for long-term care services under the Maryland Medical Assistance Program.

For several years, DHS and MDH have convened quarterly meetings of the Long-Term Care Advisory Workgroup. The latest meeting was held on September 11, 2017. The meetings have a formal agenda, including items that Workgroup members submit in advance, and membership in the workgroup includes key DHS and MDH staff as well as representatives from elder care law firms, Legal Aid Bureau, long-term care facilities and industry groups that represent the interests of long-term care facilities. In order to ensure full representation from the three Maryland industries, LeadingAge Maryland was invited to join the Workgroup along with Health Facilities Association of Maryland (HFAM) and LifeSpan.

After the July 1, 2017 report was submitted to the committees and shared with members of the Advisory Workgroup; comments were received about the report:

- Concerns were raised that the Workgroup meetings need to occur earlier each quarter so that the members can comment on the previous report with inclusion in the next report. As a result, future meetings will be scheduled in advance of the writing of the quarterly legislative report, and workgroup discussions will be summarized in the report. The future meetings will be held in the months of November, February, May and August.
- A request was made that the quarterly legislative reports include a pie chart with a breakdown of data for the applications that were processed within 30 days, 31-44 days, 45-90 days, 91-160 days and more than 160 days. The pie chart appears as Table 4. Out of 9,484 applications filed between June 1, 2016 and July 31, 2017, 7,641 have received an eligibility decision of approved or denied, and 1,843 applications are still in a pending status, awaiting required documentation.

Table 4. Days To Decision for Long-Term Care Applications (center chart on page)



- The 257 is completed on paper and is mailed between the respective providers and agencies. Errors in the completion, submission and processing of the 257 form may cause delays in eligibility and/or payment to providers. In many of these situations, the MDH Problem Resolution Unit must work with the provider and each agency to ensure critical information is accurate before proceeding. Automating this form decreases these errors, increases 257 processing and improves timeliness of eligibility determinations to ensure prompt payments to providers..
- A request was made for DHS to provide by email monthly an updated list of contacts for case managers and supervisors within the DHS Bureau of Long-Term Care and all other local offices. This is helpful for providers to enable communication with the appropriate person to promptly resolve issues that delay eligibility determinations. A revised contact list was sent to all stakeholders for distribution on August 28, 2017.

MDH and DHS will continue to meet on a monthly basis to develop strategies for resolving ongoing issues in regard to delays in eligibility determinations for long-term care services under the Maryland Medical Assistance Program. In order to improve communication and prevent delays in eligibility processing, DHS, MDH and the full membership of the Long-Term Care Advisory Workgroup have an equal responsibility to share meeting discussions with their respective staff, membership and interested parties that each may represent on an ongoing basis.

CONCLUSION

Maryland is committed to collaborating with long-term care providers and advocates in developing strategies to hasten the processing of LTC applications and redeterminations. We will continuously evaluate and explore opportunities to streamline processes and improve compliance with application processing.