

## **SECTION V.3. Change & Reassessment Procedures**

### **A. Change Procedures**

1. **Adding a Service:**
  - a. When a person needs to add a new Moderate Needs service, the person's case manager must first contact the new provider to verify funding availability.
  - b. If funds are confirmed available, the case manager will make a referral to the new agency and send a Moderate Needs Change Form to DAIL program manager.
  - c. If funds are not available to add the new service, the case manager must send a copy of the original Moderate Needs application to the new Moderate Needs Service provider with a request to add the person to their Moderate Needs Wait List. *Note that the person does NOT need to complete a new Moderate Needs application.*
  - d. The provider will then add the person's name to their wait list based on the original application date and whether they have Community Medicaid.
2. **Other Changes:** If the individual has a change of address, a change of provider or is removing a service from the Service Authorization, the CM will complete a Moderate Needs Group Change Form and send to the Moderate Needs Coordinator within 10 working days of the change.
3. The Moderate Needs Coordinator will review the Change Form and send the authorize Change Form to the applicant, CM and provider(s) as needed.
4. **Start Date:** The effective start date to add a service will be the date the Moderate Needs Change Form was received at DAIL or a later date as indicated by the CM on the form. The effective date to remove a service or to change an address or provider will be the date the change took effect.
5. **Retroactive Services:** If retroactive services are requested, the CM must submit a request for an exception with a description of the need. DAIL approval for retroactive services is not guaranteed.
6. **Change in Clinical or Financial Status:** If the CM believes the individual no longer meets clinical or financial eligibility, the CM shall complete and submit revised supporting documents to both the Moderate Needs Providers and the Moderate Needs Coordinator. The Moderate Needs Coordinator will review for eligibility and send a termination notice with appeal rights to those who are no longer eligible.

### **B. Reassessments Procedures**

1. Individuals participating in CFC Moderate Needs services must have a reassessment completed on an annual basis.
2. Approximately 4 weeks prior to the end date of the Moderate Needs Group Service Authorization, the CM will complete the ILA (short version), the Permission for Release of

Information, the clinical eligibility worksheet, financial eligibility worksheet, and complete package checklist.

3. The CM will submit the following complete reassessment packet to both the Moderate Needs Coordinator and Moderate Needs provider(s) so that it is received no later than 15 days prior to the end date of the Moderate Needs Group Service Authorization:
  - a. Moderate Needs Group Annual Reassessment form,
  - b. ILA Intake,
  - c. Permission to Release Information,
  - d. Clinical Worksheet,
  - e. Financial Worksheet, and
  - f. Complete Package Checklist
4. The Moderate Needs Coordinator will review for eligibility and if the individual continues to meet the eligibility requirements, will send a Moderate Needs Group Service Authorization to the individual and the Moderate Needs providers.
5. If the Moderate Needs Coordinator determines that the individual no longer meets the criteria for eligibility they will send a denial notice with appeal rights to the individual and notify Moderate Needs providers.

***IMPORTANT: Individuals with an overdue annual reassessment are at risk of being involuntarily terminated from Moderate Needs services. Providers must have a current Service Authorization in order to bill for services provided. All overdue reassessments must be accompanied with an explanation of the reason for being overdue.***

### **C. Monitoring**

Case managers shall monitor the individual's status, needs and service utilization at least once every quarter, by phone or face to face, as determined by the individual's needs.