

Topic:	Guide for CDDPs Assisting with Application for Medicaid for Child Referred for In-Home Services	
		3/16/2023

Overview

Description: Prior to being enrolled in In-Home Services, a child must be determined eligible for Medicaid. All applications for Medicaid must be processed in the OregONEligibility (ONE) system. This Worker Guide provides guidance to Community Developmental Disabilities Programs (CDDPs) who may be completing service eligibility and/or enrollment information in eXPRS and assisting families with application for Medicaid in ONE.

Purpose/Rationale: Accurate completion and submission of an application for Medicaid is required for a Medicaid eligibility determination in the ONE system. This Worker Guide provides guidance to Community Developmental Disabilities Programs (CDDPs) assisting families with applying for Medicaid through the ONE system when families have requested In-home Services.

Applicability: This worker guide applies to CDDPs who may be completing eligibility and/or enrollment information in eXPRS and assisting families with an application for Medicaid in the ONE system.

Procedure(s):

- The child is determined eligible for I/DD Services and family requests In-home services.
- CDDP looks up the child's Medicaid eligibility in eXPRS. Medicaid eligibility includes MAGI (including CHIP*), non-MAGI (previously OSIP-M) and Child Welfare (CW) Medicaid.
- If the child has Medicaid (as listed above), continue with service planning. Note: CHIP children are only eligible for k-plan services, not waived. See transmittal [APD-PT-20-120](#).
- If the child does not have Medicaid, assist the child/family with applying for Medicaid, complete the ONA and enroll the child onto the waiver. The ONA must be completed prior to submitting DDEE (0337) and prior to the Medicaid eligibility determination being made.

- Submit the DDEE (0337) in eXPRS for enrollment in In-home services.

** If a CHIP child needs waived services (such as vehicle modification, fence, specialized medical supplies, etc), the CDDP will need to contact the CCU (APD.CentralCoordinationUnit@odhsoha.oregon.gov) to initiate a PMDDT referral, as ONE will not automatically do this when the child is eligible for CHIP medical benefits. (A child can only receive k-plan services with CHIP Medical.)*

If the child does not have Medicaid and is receiving SSI:

If the child receives SSI but does not have current Medicaid, the CDDP must assist the family with applying in ONE, as described above. It is important that the family indicate on the application that their child is receiving SSI benefits. If the family has indicated the child is receiving SSI benefits, the ONE system will verify the SSI eligibility and enroll the child in non-MAGI Medicaid. Since the child now has Medicaid, continue with service planning.

If the child does not have Medicaid and does *not* receive SSI:

Assist the family with applying for Medicaid in ONE. The CDDP should provide information to the family regarding the application process. This includes the importance of filling out the application completely. It is important that the following questions be answered YES if a child is disabled and needs services. If these questions are answered YES and the child is over the income limit based on the family's income, ONE should refer to PMDDT for a disability determination. If the questions are not answered YES, then the child will be denied for being over the income limit.

The critical questions that require a 'YES' response in ONE are:

1. Does individual applying for health coverage on this application need help with activities of daily living (like bathing, dressing etc.) or live in a medical facility or nursing home?
2. Does the individual want to request Medicaid Long Term Care services?
3. Is anyone Blind/Disabled?

In order for a child to be considered eligible for non-MAGI Medicaid, ONE looks at the waiver coding to see if the child has been enrolled in waived services. If the ONA and DDEE (0337) have not yet been submitted when ONE is determining Medicaid eligibility, the Medicaid may be denied. The CDDP should complete the ONA and submit the DDEE (0337) to eXPRS at the time the family applies for Medicaid. The CDDP may provide the following guide for families who are applying for Medicaid in ONE: [ODDS Medicaid Guide for Families of Children who Experience Intellectual or Developmental Disabilities](#)

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If the family has answered 'yes' to the questions regarding the child needing assistance with ADLs and having a disability, the State's APD Central Coordination Unit (CCU) will send an email to the CDDP's Eligibility Specialist or other designated mailbox notifying them of the request for services.

If the CDDP is already working with the family, they should continue with service planning by completing the ONA, and then submitting the DDEE (0337) in eXPRS for enrollment in In-home services.

If the CDDP is not yet working with the family, the CDDP should consider this a request for services and reach out to the family to inquire as to whether they are interested.

Timelines for ONE eligibility decisions:

When a family requests Medicaid services for their child in ONE, ONE automatically assigns a due date of 45 days for the Medicaid determination. If there is no coding for ONE to read from eXPRS by this date that indicates waived services [requires the ONA and DDEE (0337) to be completed in eXPRS], the Medicaid decision may be denied. If the CDDP needs additional time to complete an eligibility determination or complete the ONA, it is critical that the CDDP communicates that an extension of this due date is necessary. The CDDP will need to request this extension from ONE Customer Service (800 699 9075) or the local APD/AAA/SSP storefront office and provide a date by which waived services will begin. (may be only case management to start.)

If a child is found not eligible for MAGI:

If the child is found not eligible for MAGI medical and the appropriate boxes have been marked on the application (answering yes to the child needing assistance with ADLs and having a disability), the ONE system will generate a referral to an Oregon Department of Human Services (ODHS) eligibility worker to review eligibility with the family. If a disability determination is needed to make a Medicaid eligibility determination, the ONE system will generate a referral to the Presumptive Medicaid Disability Determination Team (PMDDT). The CCU will send an email to the CDDP (and copy PMDDT) indicating services have been requested and a disability determination by PMDDT is needed. The CDDP should follow the process as outlined above and either contact the family to start the application process or to complete the ONA and submit the DDEE (0337) in eXPRS (if not already completed).

Upon receipt of the email from the CCU that a referral to the PMDDT has
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occurred, the CDDP shall email the PMDDT at PMDDT.Referrals@odhsoha.oregon.gov, indicating that the email has been received and identifying the primary contact at the CDDP for providing documentation. The CDDP will assemble the appropriate documentation and releases as outlined in PMDDT Checklist (see below). The CDDP will complete and submit the ONA and submit the DDEE (0337) in eXPRS to the Technical Assistance Unit (TAU).

**IMPORTANT: When completing the DDEE (0337), the CDDP will enter the current date for the services enrollment plan “Start Date” and include notes in the “Additional Information to Assist the State with Processing” section that state “Pend for PMDDT determination” and “Tentative start date; TAU may need to amend.”*

Upon receipt of the DDEE (0337), TAU will update the service eligibility code (SELG) and monitor the status of Medicaid eligibility. TAU will not finish processing the DDEE (0337) [will not mark the TAU Status as “complete” and close out the DDEE (0337)] until Medicaid eligibility has been approved or denied.

Once PMDDT has made a disability determination *approval (field** or final)*, PMDDT enters the disability determination in ONE and notifies the ODDS ONE System Liaison at ODDS.ONEquestions@odhsoha.oregon.gov. An ODHS eligibility worker reviews the disability determination and completes Medicaid eligibility determination in ONE. If PMDDT makes a disability determination *denial*, PMDDT enters the disability determination in ONE and sends the decision to ODDS.ONEquestions@odhsoha.oregon.gov.

- Upon notification/review of PMDDT *approval*:
 - ONE System Liaison will send PMDDT approval email to the CDDP.
 - TAU will continue to monitor the status of Medicaid eligibility.
 - ODHS eligibility worker will complete a Medicaid eligibility determination in ONE and ONE will check to see if the waiver service coding in eXPRS and coded into the system [this is coding TAU enters after completion of the ONA and receipt of the DDEE (0337)] If the coding is in place, ONE will approve non-MAGI Medicaid and an approval notice will be sent to the family. (CDDP does not receive a copy of the notice.) If the coding is NOT in place, and the 45-day due date (or extension date) has not passed, the ONE case will ‘pend’ the case for it to be coded by the due date. When/if the due date passes without these items being completed, then ONE will

deny the Medicaid application and issue a denial notice to the family. [It is important that the ONA is completed and the DDEE (0337) be entered in eXPRS as soon as possible so this does not happen.]

- Upon notification/review of PMDDT *denial*:
 - ONE System Liaison will send an email to the CDDP notifying them of the PMDDT denial (copy to TAU). The CDDP can assist the family in the hearings process if the family wants to appeal the Medicaid denial.
 - ODHS eligibility worker completes a Medicaid eligibility determination in ONE and a denial notice is sent to the family. (CDDP does not receive a copy of the notice.)
 - When the CDDP is informed that the child is not eligible for Medicaid, the CDDP shall issue a Notification of Planned Action (NOPA), if appropriate, notifying the family that the child is not eligible for the requested service due to not being eligible for Medicaid (each program rule will have requirement to be Medicaid eligible for OAR citation).

****A PMDDT *field* approval** is an initial approval that PMDDT is able to make based on the initial documentation provided to them by the CDDP. If it is field approved, PMDDT will continue to work the case and then will still need to issue their final decision. CDDP's should move forward completing the ONA and submitting the DDEE (0337) for service eligibility as soon as they are aware of the PMDDT referral. The PMDDT process can take up to 90 days if records need to be requested or PMDDT needs to schedule exams.

NOTE: A CHILD DOES NOT APPLY FOR PMDDT MEDICAL. PMDDT is part of the eligibility process if a child is disabled and needs services and is only referred for PMDDT if over the income limit as a family.

Upon completing the Medicaid eligibility determination in ONE, the ODHS eligibility worker informs the family of the outcome of the Medicaid eligibility determination by sending an appropriate notice to the family.

Child determined eligible for Medicaid:

- TAU will mark the TAU Status of the DDEE (0337) as "complete," close out the DDEE (0337) and notify the CDDP via email that the child has been determined eligible for Medicaid. The CDDP may also be informed of the outcome by the family, by monitoring the status of the DDEE (0337) for

“complete”, or by monitoring in the ONE system (if the CDDP is an Assister on the ONE system and is associated with the application).

- CDDP reviews the completed DDEE (0337) to confirm the services start date (TAU may have amended the start date based on Medicaid eligibility date).
- CDDP continues with service planning, including authorization of services identified in the ISP.

Child determined ineligible for Medicaid:

- CDDP to be informed of the outcome by the ONE System Liaison.
- CDDP issues a NOPA if appropriate, denying in-home services due to the child not being Medicaid eligible and works with family to access available services other than Medicaid-funded services (e.g., case management, Family Support, referral to other services).

*****NOTE:** Non-MAGI medical eligibility does not begin until a PMDDT determination is approved, an ONA is completed and the DDEE (0337) is submitted in eXPRS. All three pieces must be in place for a child to be eligible for non-MAGI Medicaid.***

Link to Process Map: [CDDP Process Map](#)

PMDDT Checklist:

PMDDT needs **two** years of medical, mental health, and educational records to make a medical determination as to whether the child meets the Social Security Administration (SSA) regulations requirement for disability. The SSA criteria is not identical to the DD criteria, and looks at both the impairment and the current level of functioning.

The following documents are needed to process the case.

- List of the disabling diagnoses
- All records from the DD file that were used in the DD eligibility determination.
- The most recent IEP and any testing/exams by the school or ESD.

- A proper release (ROI) for every provider that the child has seen in the **last 2 years** (with the exception of dental), one for SSA, and one for the current or most recent school. One for SSA is required even if the child is not receiving any SSI benefits.

ROI (MSC 3010 - Authorization for Disclosure, Sharing and Use of Individual Information with or without legal representation): **If you do not have a sample of a 3010 with the language necessary for PMDDT. Please contact PMDDT for a sample.**

Birth 0 – 14 years of age: Parent/Guardian should sign, date and initial the 4 protected lines on the 3010. If all 4 lines are not initialed, many of the providers will not provide the records which will delay a PMDDT decision. The providers will not accept electronic signatures so it must be a “wet signature.”

Providence, OHSU, Legacy and Kaiser along with a few of the mental health providers will not release records to PMDDT, if the child is 14 or older, unless she/he signs, dates and initials the 4 protected lines themselves. An exception would be if the parents have a guardianship order, and PMDDT would need a copy to send with the request. If this cannot be provided, the parents have the option of obtaining the records themselves and submitting them.

When a CDDP, community partner or a local Oregon Department of Human Services (ODHS) office is assisting the family with the application, any available records and releases referenced above should preferably be upload in system ONE. This will streamline the PMDDT process and help quicker processing.

Form(s) and transmittals that apply:

- <http://www.dhs.state.or.us/spd/tools/dd/cm/>
- [ODDS Medicaid Guide for Families of Children Who Experience Intellectual or Developmental Disabilities \(I/DD\)](#)
 - [Russian](#)
 - [Simplified Chinese](#)
 - [Somali](#)
 - [Spanish](#)
 - [Vietnamese](#)

Contact(s):

Name: Barbara Carroll; **Email:** ODDS.ONEquestions@odhsoha.oregon.gov