

## M-Waiver Declinations

### M-110 Initial Waiver Offers

**For ADHC Waiver offers only:** If there are no ADHC providers in the region/area, refer to Section F-Linkages, F-300.5 No Adult Day Health Care (ADHC) Provider in the Area

SC will:

- Mail or hand deliver the appropriate “Declining Waiver” form to the participant and/or legal representative. See Section Z-Appendix for a detailed listing of declining waiver forms.

**NOTE: This declination must be signed by the participant and/or legal representative only.**

Participant and/or legal representative will:

- Complete the form, including the participant’s name, the participant’s last 4 digits of the social security number, and date of birth.
- Sign and date the form.

RO will:

- Review the declination form to determine that it is a valid closure.
- Once determined valid, sign and date the declination form.
- Contact the SCA and request an e-148 for closure.
  - Process the e-148 for for closure.
  - Send processed e-148 to the Data Management Contractor (DMC), SCA, and Medicaid.
- Send the signed declination form and BHSF 142 form for closure (denial) to the Data Management Contractor (DMC), SCA, and Medicaid.
- File the documents in the participant’s electronic file (e-file).

**NOTE: If the participant/representative does not return the declination to the SC or if the declination is not signed by the participant and/or legal representative, RO must send the participant and/or legal representative a “Verification of Declination of Waiver Offer” letter. If there is no response after ten (10) business days, RO will close the waiver case/offer.**

## M-120 Current Waiver Participants

SC will:

- Mail or hand-deliver the appropriate “Declining Waiver” form to the participant and/or legal representative. See Section Z-Appendix for a detailed listing of declining waiver forms.

**NOTE: This declination must be signed by the participant and/or legal representative only.**

Participant and/or legal representative will:

- Complete the form, including the participant’s name, the participant’s last 4 digits of the social security number, and date of birth.
- Sign and date the form.

RO will:

- Review the declination form to determine that it is a valid closure.
- Once determined valid, sign and date the declination form.
- Contact the SCA and request an e-148 for closure.
  - Process the e-148 for for closure.
  - Send processed e-148 to the Data Management Contractor (DMC), SCA, and Medicaid.
- File the documents in the participant’s electronic file (e-file).

**NOTE: If the participant/representative does not return the declination to the SC or if the declination is not signed by the participant and/or legal representative, RO must send the participant and/or legal representative a “Verification of Declination of Waiver Offer” letter. If there is no response after ten (10) business days, RO will close the waiver case/offer.**

## **M-130 Nursing Facility (NF) Transitions**

If a NF resident or legal representative, when presented with a waiver offer, expresses the intent to decline a waiver offer, the OAAS Transition Coordinators (TCs), or other OAAS designee, will obtain the signed declination to ensure the NF resident or legal representative is making an informed decision.

When a NF resident/legal representative notifies a Support Coordinator (SC) of their request to decline waiver services, the SC/SC Supervisor (SCS) will:

- Notify by email, the TC, Regional Office (RO) Manager, and RO inbox, within 1 business day.

The TC will:

- Complete a face to face visit with the resident and responsible representative (if applicable) to discuss the declination request, and complete the declination (when appropriate) within 14 business days.

Note: Same process to be followed should TC receive first knowledge of the request to decline waiver services, when a waiver offer has already been completed and processed.

If the NF resident/legal representative makes the informed decision to decline the waiver offer, participant and/or legal representative will:

- Complete the form, including the participant’s name, the participant’s last 4 digits of the social security number, and date of birth.
- Sign and date the form.

The TC will:

- Send the completed declination form to the SC, Regional Office (RO) Manager, and RO inbox, the same business day.

RO will:

- Review the declination form to determine that it is a valid closure.
- Once determined valid, sign and date the declination form.
- Contact the SCA and request an e-148 for closure.
  - Process the e-148 for closure.
  - Send processed e-148 to the Data Management Contractor (DMC), SCA, and Medicaid.
- Send the signed declination form and BHSF 142 form for closure (denial) to the Data Management Contractor (DMC), SCA, and Medicaid.
- File the documents in the participant's electronic file (e-file).