

## U—Public Health Emergency (PHE) Waiver Discharges and Declinations

### OAAS Waiver Discharge and Declination Procedure during the Coronavirus (COVID-19) Public Health Emergency (PHE)

This section pertains to OAAS waiver discharges and declinations of certified OAAS waiver participants only. OAAS denials (initials/not waiver certified) should follow the procedure as outlined in the Waiver Procedures Manual, OAAS-MAN-17-003.

Per the Families First Coronavirus Response Act, state agencies cannot terminate Medicaid coverage during the Coronavirus (COVID-19) PHE. Following this requirement, if OAAS waiver participants are not eligible for another Medicaid tier 1 program outside of their Medicaid Long Term Care (LTC) coverage, the participants must remain in a Medicaid LTC case since they are not eligible for other Medicaid tier case types. If the participants remain in Medicaid LTC, they must also have an open waiver case.

### M-100 Waiver Discharges

If the SC supervisor determines that the participant meets waiver discharge criteria (other than death), a closure narrative, along with the entire POC packet, including all information to support discharge, will be sent to RO for review.

If RO determines that the individual meets the discharge criteria, RO will:

- **If applicable**, send the case to the OAAS Service Review Panel (SRP) for review. Refer to O-SRP Referral Section of the Waiver Procedures Manual, OAAS-MAN-17-003, for a comprehensive list of discharge criteria cases that must be reviewed/approved by SRP for waiver closure.
- Send the case to the OAAS Area Manager for review and compilation.

Area Manager will:

- Submit the case to the State Office (SO) Program Operations Program Manager.

SO Program Manager will:

- Compile the statewide cases for Medicaid review.

- Submit the cases to Medicaid for Medicaid type case eligibility review.

Medicaid Eligibility Review Team will:

- Review the cases for Medicaid type case eligibility.
- Notify SO Program Manager of whether the participants are eligible for Medicaid Tier 1 programs outside of Medicaid Long Term Care (LTC).

SO Program Manager will notify RO of whether the participant is eligible for Medicaid Tier 1 programs outside of Medicaid Long Term Care (LTC).

- If the participant is eligible for another Medicaid tier 1 program other than Medicaid LTC, the waiver case can close following closure procedures. Refer to Section N-Appeals of the Waiver Procedures Manual, OAAS-MAN-17-003.
- If the participant is NOT eligible for another Medicaid tier 1 program other than Medicaid LTC, the participant will remain in Medicaid LTC coverage. Waiver services with the exception of Support Coordination Services must end and the participant must be notified with appropriate appeal rights.
  - If discharging from waiver services (except for SC services) for NF LOC, RO will send discharge notice OAAS-RF-22-001, with appeal rights, informing the participant of the waiver service discharge except for SC services and Medicaid.
  - If discharging from waiver services (except for SC services) for other waiver discharge criteria, RO will send discharge notice OAAS-RF-22-002, with appeal rights, informing the participant of the waiver service discharge except for SC services and Medicaid.

The SC will:

- Continue to provide Support Coordination services, following SCA timelines, including monthly contacts, quarterly visits, and annual reassessments and Plan of Care (POC) meetings.  
NOTE: If the discharge reason was for not meeting NF LOC, the participant may meet NF LOC when reassessed and OAAS waiver services would be restored.

- Bill for the services provided to receive payment.

## **M-110 Waiver Declinations of Certified Waiver Participants**

**NOTE: This process does NOT apply to initial (not waiver certified) individuals. For initial declinations refer to M-Waiver Declination Section of this Manual and follow the initial declination procedure.**

The Support Coordination Agency (SCA) will submit the signed/completed declination form to Regional Office (RO) for review.

After determining the declination is valid, RO will submit all certified waiver participant declinations to the Area Manager.

Area Manager will:

- Submit the case to the State Office (SO) Program Operations Program Manager.

SO Program Manager will:

- Submit the case to Medicaid for Medicaid type case eligibility review.

SO Program Manager will notify RO of whether the participant is eligible for Medicaid Tier 1 programs outside of Medicaid Long Term Care (LTC).

Medicaid Eligibility Review Team will:

- Review the case for Medicaid type case eligibility.
- Notify SO Program Manager of whether the participant is eligible for Medicaid Tier 1 programs outside of Medicaid Long Term Care (LTC).

SO Program Manager will Notify RO of whether the participant is eligible for Medicaid Tier 1 programs outside of Medicaid Long Term Care (LTC).

- If the participant is not eligible for another Tier 1 program, the participant will remain in Medicaid LTC, with no OAAS services. The Data Management Contractor (DMC) will keep the waiver slot open to justify the Medicaid LTC type case.

- If the participant is eligible for another Tier 1 program, the waiver case can close. OAAS does not send notice or appeal rights since it is a declination.

RO will request a 148W for closure from the SC and process once received following procedure.

The SC will submit the 148W for closure within 1 business day of request/notification.

RO will:

- Process the 148W for closure, electronically signing, saving and uploading to the Louisiana Medicaid Eligibility Determination System (LaMEDS).
- Send a copy of the signed/processed 148W to the Data Management Contractor (DMC) and SCA.
- Submit the signed declination to Medicaid.