

Application Center Monthly Contact

September 20, 2023

Valerie McManus, AC Program Manager

Agenda Items

- Online Application Signatures
- 152-N Form Submission
- MEDT
- EMS
- Train Your Brain
- Reminders

Online Application Signatures



ELECTRONIC SIGNATURE

I certify under penalty of perjury that the information I have given on this application is true, complete, and correct to the best of my knowledge, including the information I have given regarding the U.S. citizenship or immigration status of all household members. I understand that I and any adult household member will be subject to disqualification and prosecution and will be required to repay ineligible benefits or services if we knowingly give false, incorrect, or incomplete information in order to obtain or try to obtain health care assistance. By signing this application, I give permission for the release of information to the Louisiana Department of Health by any persons or agencies who have knowledge of my circumstances.

* Are you a LDH employee, or are you related to a LDH employee? Yes No

*Please check this box to let us know that you have read your rights and responsibilities

*Please check this box to let us know that you have read the "Electronic Signature Agreement".

* Please select the correct description of the person signing this application:

I am the applicant signing for myself

I am signing on the applicant's behalf

* First Name:

* Last Name:

* User PIN:

- When signing applications, select the option that says, “I am the applicant signing for myself” and sign the applicants name.
- Enter the applicant’s first and last name and enter your User Pin on the application.
- The option that says, “I am signing on the applicant’s behalf” should be selected only if the applicant is deceased or incapacitated.

152-N Form Submission

- There has been an influx of errors on 152-N Request for Newborn Medicaid ID Number forms recently.
- Please ensure that the correct mother and child are associated prior to submitting the form. This would prevent programming issues and processing delays.

152-N Form Submission (cont.)

- Please refrain from asking mothers to submit their baby's birth information to the NEU if a 152-N has been created and submitted.
- We want to ensure that the baby does not receive a duplicate Medicaid ID number, as this could result in system and eligibility issues.

- Please ensure that medical records are complete, as incomplete records delay the Medical Eligibility Determination Team (MEDT) decision process.
- The documents that need to be included with the medical records: Doctor's progress notes, tests, medications and discharge summaries
- Email/Rightfax Coversheet including the individual's name, date of birth, Medicaid Person/Case ID# (if known) and all dates of service included in the records.

MEDT (cont.)

- The Form MS (Social Information Interview) should be completed in the words of the applicant/legal representative. MEDT uses these answers to gauge an individual's awareness of their condition, as well as their cognitive level.
- The Medication Administration Record (MAR) should not replace the answers needed in the Medication section of the Form MS. However, it should be included with the medical records.

- Several calls and emails have been received from providers because their EMS claims are being denied. Providers are assuming that EMS patients have active Medicaid (even for non-emergency visits/services) when the coverage is for Emergency Services only.
- Patients must have a medical review by Medicaid before a claim may or may not be paid.
- In an effort to spread the word regarding EMS and possibly reduce the number of denied claims, please take the following actions:

- Communicate with the Registration and Business offices about the reason for the large number of EMS denials.
- Possibly, implement a system where EMS accounts are flagged and referred to the Trusted User so they can assist in obtaining the patient's medical records.
- Fax medical records for all EMS individuals to:
 - (225) 389-2748 Local or (877)747-0996 Toll-free. **This fax account is only for EMS records.**
 - On your fax coversheet, include the individual's name, date of birth, Medicaid Person/Case ID# (if known) and all EMS dates of services included in the records.

Train Your Brain



Question 1

True or False

Social Information Interview forms should be submitted with every application.

Question 1 Answer

False

The form is only needed when a person alleges a disability.

Question 2

True or False

The acronym MEDT stands for Medicaid Eligibility Determinations Team.

Question 2 Answer

False

Although we are Medicaid, MEDT is short for Medical Eligibility Determinations Team.

Question 3

True or False

Online applications can be faxed to Medicaid.

Question 3 Answer

False

Only paper applications can be faxed; however, verifications can be faxed when a paper or online application has been submitted.

Contact Information



Application Centers (AC)

- ApplicationCenter.Service@la.gov
- (225) 342 – 6312
- Valerie McManus

Medical Eligibility Determinations Team (MEDT)

- MEDT@la.gov
- Angel Wilson Jolivette

Newborn Eligibility Unit (NEU)

- NEU@la.gov
- Kiarah Dugas

Medicaid Outreach

- MedicaidOutreach@la.gov

Optional State Supplement (OSS)

- OSS@la.gov
- (225) 342 – 1646
- Paige Logan

Outstation

- Outstation@la.gov
- (225) 342 – 1646
- Paige Logan

Healthy Louisiana

- 1-855-229-6848

Louisiana Medicaid Customer Service

- 1-888-342-6207

Questions

