

**J-0000 MEDICAL ELIGIBILITY CARDS AND
OPTIONAL STATE SUPPLEMENT PAYMENTS****J-100 GENERAL INFORMATION**

The Medical Eligibility Card (MEC) is a plastic swipe identification card referred to as "Health Network for Louisiana". MECs are issued to persons determined eligible for medical assistance. Incorrect eligibility decisions may result in medical eligibility cards being issued to ineligible individuals. In such instances, medical services must be paid totally from State funds.

The monthly Optional State Supplement (OSS) payments are issued to eligible individuals residing in LTC facilities and receiving SSI benefits or meet the criteria for supplemental payments. These funds are designated for the personal care needs of the individual.

J-200 ISSUANCE OF THE MEDICAL ELIGIBILITY CARD **

The MEC is issued by the contractor (fiscal intermediary) based on eligibility information received on the Medicaid Management Information System (MMIS)/Recipient file from the Medicaid Eligibility Data System (MEDS). The MEC is mailed to the enrollee within 48 hours (two working days) after receipt of the information. Seven days should be allowed for delivery, as the cards are mailed from out of state.

MECs will automatically be issued to:

- New enrollees added to MEDS unless the type case does not require a MEC. See J-211.

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- Enrollees being recertified unless the enrollee indicates a replacement card is not needed. If the enrollee indicates that a replacement card is not needed, then the current MEC will be reactivated.

Note:

If the enrollee informs Medicaid that medical services will be required prior to receipt of the MEC, the enrollee shall be provided with his/her Medicaid Person ID number.

J-210 REPLACEMENT ** MEC

The MEC is replaced for the following reasons:

- Enrollee's name has changed; or
- MEC was lost, stolen, or damaged.

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A request to the contactor for a replacement card is made through MEDS. The replacement process will deactivate the previously issued card in an effort to prevent fraud.

J-211 ENROLLEES WHO DO NOT RECEIVE A MEC

A MEC is not issued for:

- A qualified disabled working individual (QDWI);
- A specified low-income Medicare beneficiary (SLMB);
- A qualified individual (QI); or

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- An alien certified for emergency services only.

Eligibility information for alien emergency services is contained on the notice of decision which the provider(s) can use to bill for services. QDWI, SLMB and QI are only eligible for predetermined payments to third parties and receive no Medicaid services for which to bill.

J-212 - J-260 RESERVED**J-300 OPTIONAL STATE SUPPLEMENT (OSS) PAYMENT**

Refer to [H-810.4, LTC, Optional State Supplement](#), for determination of eligibility and amount of payment.

J-310 INITIAL OSS PAYMENTS

OSS payments are sent by electronic funds transfer (EFT) to the facility listed on the segment for the eligible enrollee. MEDS sends a file to Molina for all enrollees eligible for payment each month on the night of cut off.

EFT payments are sent to the facilities the first full week of the month. Once the funds are received, the facility will disburse the funds to the enrollees eligible for an OSS payment.

MEDS initiates the OSS payments for current month and ongoing months. The amount of the payment is determined by the MEDS budget.

If an individual's certification is added to MEDS in the current month after cut off, the current month OSS payment must be considered a retroactive ** payment. See J-320.

J-320 RETROACTIVE OSS PAYMENTS

Retroactive payments are issued electronically through the OSS system.

The Medicaid analyst completes the BHSF Form OSS-1 and submits the form via email to optionalstatesupplements@la.gov for processing. A copy of the form is filed in the electronic case record.

J-330 RETURNED OSS PAYMENT

If an OSS payment must be returned, the facility should return the payment electronically. Advise the the facility to follow the instructions found in the OSS Checks Provider User Guide located at <http://www.lamedicaid.com/provweb1/Forms/forms.htm>.

Inquiries regarding OSS checks should be directed to Louisiana Medicaid Technical Support at lamedicaid@molinahealthcare.com

For OSS checks returned by mail, complete the BHSF Form OSS-2 and mail the form along with the payment to the Division of Management and Finance at:

LDH
P. O. Box 91117, Bin #29
Baton Rouge, LA 70821-9117

J-340 REISSUANCE OF OSS PAYMENTS

Inquiries regarding OSS checks should be directed to LA Medicaid Technical Support at lamedicaid@molinahealthcare.com.

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J-350 OSS RECOVERY

Recovery is not applicable to OSS unless the ineligible amount exceeds \$500.

For amounts that exceed \$500, send report to:

BHSF/TPL/Medicaid Recovery Unit
P. O. Box 91030
Baton Rouge, LA 70821-9030