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Date 9-27-07

POLICY MEMO:	
To: All SRS and KHPA Staff	From: Allison Blackwell
	Family Medical Policy Manager
Eligibility Policy Memo No: 2007-10-01	KFMAM: KFMAM Revision # 4
RE: Summary of Changes for Revision # 4	Program(s): All Family Medical Programs

Purpose, Background and Reason for Change for the Kansas Family Medical Assistance Manual (KFMAM) effective October 1, 2007

The purpose of this document is to identify the policy changes implemented in the KFMAM effective October 1, 2007. Implementation instructions for most of these policy changes can also be found in the KEESM Implementation memo effective October 1, 2007.

Overview

This revision implements a new policy for newborns born to SOBRA Medicaid mothers, expands the allowable documentation for citizenship and identity verification requirements, clarifies procedures for TransMed determinations, and clarifies that medical share plans are not treated as comprehensive health insurance for purposes of HealthWave XXI eligibility determination.

Changes

1325.01 is updated to include the exemption of requiring citizenship and identity for foster care recipients, and recipients of adoption support payments. The section has also been updated to remove the thorough instructions for determining appropriate verification of identity. This information has been combined with the citizenship verification in section 2045.

2045 and 2045.01 are updated to combine the requirements of citizenship and identity in one section, for ease of use. This section also clarifies that newborns born to a Title XIX or XXI recipient are not required to provide verification of citizenship and identity to initially receive coverage. This information will be required at the end of their continuous eligibility period.

2045.02 indicates that if a secondary or other document is provided as verification of citizenship, this indicates that a primary document is not available.

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2045.03 is updated to include a reference to the Third and Fourth level documents. Previously, documents beyond the secondary level were included together in an "other" category. These documents have been separated into third and fourth levels to remain in alignment with the CMS standards.

2045.04 clarifies the use of a declaration of citizenship, which had previously been known as an affidavit of citizenship.

2045.05 is a new section which outlines the procedures for using a declaration of identity.

2045.06 is a new section which outlines the ability to use multiple documents as verification of identity when no other form of documentation is available.

2046.01 is updated to clarify the application date for new applicants following a reasonable opportunity period. It also clarifies the use of a reasonable opportunity period for current recipients.

2230 is updated with some wording corrections. Clarification has been added regarding the requirement of a signed TransMed review form to complete the initial TransMed review. Policy has been modified to allow the use of other applications as well as long as they are received in the time frames specified. This section has also been modified to clarify that only ten days are allowed for the consumer to complete their TransMed review when the review is occurring after the fifth month of initial TransMed coverage.

2320 is updated to include children born to women who are only eligible for SOBRA Medicaid as now qualifying for continuous eligibility for newborns.

2412 is a new section which outlines that medical share plans, such as Christian Hospitalization Aid or Christian Care Medi-Share are not comprehensive health insurance policies and do not prohibit a child from being eligible for Title XXI.

2501 clarifies that newborns born to a Title XXI recipient are not required to provide verification of citizenship and identity to initially receive coverage. This information will be required at the end of their continuous eligibility period.

5310.01 is updated with a change to the calculation of child support income. When determining the date of receipt of child support, the date of disbursement on the Kansas Payment center or the KAECSES-CSE system is what shall be used. In addition, if information is available through KAECSES-CSE, this information should be used instead of what is found on the Kansas Payment Center.

Note: Arrears child support continues to be exempt when determining eligibility for medical coverage. When determining medical eligibility combined with a food stamp or child care determination, separate budgeting of child support will be required to ensure accurate determination of the medical coverage.

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Conclusion

If you have any questions about the material included in this memo, please contact:

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Questions regarding any KAECSES issues are directed to the SRS Business Help Desk at helpdeskbusiness@srs.ks.gov .

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