



## **Policy Clarification 2017-07-02**

### **Title: Additional Time to Provide Information**

**Date: July 6, 2017**

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**Program impacted: All programs**

Recent clarification has been issued by KDHE policy regarding the responsibility of the agency to allow a consumer additional time to provide necessary verification. Additional direction included clarification regarding the responsibility of the agency to provide assistance to a consumer who cannot provide verification, as well as application of the 15 day time frame. This clarification provides additional direction on the topic

The agency must allow the consumer at least 15 days to provide necessary documentation (see KEESM 1321 and subsections). The agency may also allow additional time if the consumer expresses a barrier to returning the information by the original due date. The consumer is responsible for communicating the need for additional time, a legitimate reason for the request, and must offer a date by which the information can be provided. If these are provided, the agency shall allow the consumer a reasonable amount of time to provide the information. Requests for more than 20 days are sent to KDHE Policy for guidance. These may be submitted to the Policy e-mail box.

#### **A. Reasonable Request**

A process whereby staff allows an initial extension of 10 days, with the option for an additional 10 days, has been utilized in the past. This clarification allows Medical Assistance operations staff additional flexibility in implementing the policy by suggesting a routine extension of 5 days for any request. Additional time, up to 20 days, may be granted if the consumer has made a 'reasonable request'. This means the consumer, or representative, must have provided both a legitimate reason for the delay and an estimated due date to provide the information.

1. Clarification is provided regarding a 'reasonable request'. A reasonable request is one where the consumer presents a barrier beyond their immediate control. A delay caused by the consumer failing to open their mail timely or forgetfulness would not constitute reasonable requests. In addition, a request made by a third party requesting additional time because they 'just received the information' is not in itself considered a reasonable request. Note that Medical Assistance operations staff has the flexibility to offer additional time on a case by case basis for situations that do not involve a reasonable request, but are not obligated to do so.

2. Consider the following examples of a reasonable request:

- There is a need for verification of life insurance cash surrender value. The consumer indicates he has called the insurance company, but the company told him the information will be mailed within 10 days, meaning he won't likely have it within the time frame. He states he can provide the information within 8-10 days of the original due date. An additional 10 days is provided.
- Proof of income is required. The consumer states his employer is out of town until the following Friday. He believes he can have the information within 14 days. The consumer is granted an additional 15 days to provide the information.

B. Agency Responsibility to Notify the Consumer

The agency has a responsibility to notify the consumer of the ultimate decision regarding the request for an extension. Although such requests are most commonly made through a verbal channel (phone or in person), the request can also be made in writing. The agencies responsibility to notify applies to both written and verbal requests.

When requests are made verbally, a verbal response to the request is appropriate. The name of the person making the request, the nature of the request, and the decision are to be clearly documented in the journal.

A response is also required for written requests. It is best practice to respond to the written request in writing, but a phone call can be used if sufficient information can be conveyed over the phone. This information could be included in a subsequent notice being sent to the consumer or could be in a special notice solely to address the decision. In addition to the applicant/recipient, any Medical Representative shall also receive the information. Again, the request and outcome must be clearly documented in the journal.

Finally, if the request is made by an individual who is not authorized to make such a request on behalf of the applicant/recipient, the agency must notify the applicant/recipient, as well as the Medical Representative, that such a request was made on their behalf and the outcome.

This clarification is effective upon receipt.