



Missouri Department of Health and Senior Services

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466

Gail Vasterling
Director



Jeremiah W. (Jay) Nixon
Governor

PM-15-02
VM-15-02

November 26, 2014

MEMORANDUM FOR ALL HOME AND COMMUNITY BASED CARE PROVIDERS

FROM: Celesta Hartgraves, Director *Celesta Hartgraves*
Division of Senior and Disability Services (DSDS)

SUBJECT: Referrals for Home and Community Based Services (HCBS) to the DSDS Call Center

In order to expedite potential authorization of HCBS for new participants, HCBS providers must check Mo HealthNet (Medicaid) eligibility **and** the HCBS Web Tool before contacting the HCBS Call Center. The Call Center continues to receive inappropriate referrals which can delay action for those individuals who are eligible for HCBS. The DSDS Call Center's only function is the intake and processing of **new** referrals for Medicaid funded HCBS. Therefore, individuals referred to the Call Center should be approved for Medicaid benefits and currently **not** authorized for any HCBS through DSDS.

Individuals not eligible for Medicaid may be referred to the Area Agency on Aging <http://health.mo.gov/seniors/pdf/AARegion.pdf> or the Center for Independent Living <http://mosilc.org/> for other resources in the participant's location. Participants currently authorized for HCBS either in the Web Tool or the LTACS/CDS database shall be referred to the appropriate DSDS Regional Evaluation Team. This would include any requests for care plan changes. <http://health.mo.gov/seniors/homecomservices/pdf/BHCS-EvalTeam.pdf>.

To check for Mo HealthNet (Medicaid) eligibility:

As outlined in Mo HealthNet Division's manuals Section 1.2 and Section 3, providers can verify Medicaid eligibility via the Internet or by using the interactive voice response (IVR) system by calling (573)751-2896 and keying in the participant ID number shown on the face of the MO HealthNet ID card. Information regarding the participant's MO HealthNet/Managed Care Eligibility (ME) can also be reviewed in the manual. The ME code helps the provider know program benefits and limitations. Provider manuals are located at <http://manuals.momed.com/manuals/>.

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To check for authorized HCBS in DSDS' other systems (LTACS and CDS database):

Access the HCBS Web Tool for the potential participant. On the Participant Case Summary screen scroll to the Eligibility section and review for the following message. If the following message is noted, participants shall be referred to the appropriate Regional Evaluation Team.



To check for authorized HCBS in the Web Tool:

Access the HCBS Web Tool for the potential participant. On the Participant Case Summary screen scroll to the bottom of the screen and look for an open case in the Case Items Section. No opened case line indicates there is no authorization for HCBS in the Web Tool. If an open case is noted, select the expand button  and review the Case Stages to locate a current Prior Authorization-Care Plan Service (PA). Participants with a current PA shall be referred to the appropriate DSDS Regional Evaluation Team.



HCBS providers may review information regarding HCBS Web Tool enrollment and functionality at <http://health.mo.gov/seniors/hcbs/>.

Any questions regarding this memorandum should be directed to the Central Registry Unit 573/751-4842.

CH/ca

CC: Distribution Lists 3 & 4