

2010 Deficit Reduction Act Policy and CBMS Updates ~ Q & A

The following Q&A document outlines all questions received from the 2010 DRA Policy Updates and CBMS Procedure training. Please send any additional questions to Medicaid.Eligibility@hcpf.state.co.us.

CBMS Programming

1. Is the state looking at other ways to assist clients in acquiring DRA verifications?

A: Yes, we are working towards implementing interfaces with the Social Security Administration, Vital Statistics, and Department of Motor Vehicle to assist with the DRA verifications.

2. What will the new interfaces look like?

A: The Department is currently in the initial planning stages for the upcoming interfaces. We will provide you with more detailed information prior to implementation of each interface.

3. As of 3/1/10 when income is not received will CBMS now deny the FM and CHP+ or is the case going to remain pending until Change Request 2135?

A: The logic that was in CBMS regarding income not received for FM and CHP+ will remain the same as it was prior to March 1st until CR 2135 is implemented. CBMS will not currently deny cases.

4. When will the CR 2135 be implemented in order to deny or close cases for missing DRA?

A: We are currently in the process of developing requirements for this change request. We do not currently have a set date for implementation of this change.

5. Will the acceptable document field have a carat?

A: No, the acceptable document field does not have a carat at this time, but it is a mandatory field that needs to be completed for Medical Assistance programs.

6. Is the verification checklist generated if the verification is not received or the Acceptable Document Field is not entered?

A: Yes, the verification checklist is generated when there is missing verification. No, the verification checklist is not generated when the acceptable document field is not entered with Y or N.

7. Should end users ignore the Effective Begin Date (EBD) & Effective End Date (EED) document as far as using the identity field for HB 1023?

A: Yes, the Effective Begin Date & Effective End Date document is being updated, which will reflect the correct information for data entry. At this time the EBD & EED document incorrectly states that HB 1023 is affected by the acceptable document fields. A CBMS Communication will be sent to notify end users once the EBD & EED document has been changed.

8. Are end users able to use the 'no clt med ver submitd'" button?

A: At this time, this button should not be used to request citizenship and identity documents.

9. Will the Shift F1, Client ID Merge, etc. documents reflect the changes with DRA?

A: These documents are in the process of being updated and all ends users will receive a CBMS Communication once they are completed.

10. Are notarized photocopies for citizenship and/or identity documents prior to January 1, 2008 considered an acceptable document? What verification source for the identity document should be used?

A: Yes, if a document for citizenship and/or identity was verified as a notarized photocopy prior to January 1, 2008, the Acceptable Doc field should = Y. The verification source on the Collect Identification Details Window should = Notarized or Photocopy. For identity documents received on or after January 1, 2008, the only acceptable verification source is Original or Witnessed.

11. Will the verification checklists go out in Spanish?

A: No, not at this time.

12. Is the DRA verification checklist sufficient for noticing the client or is the Manual DRA notice for the interim process sufficient for noticing the client about DRA verification that is needed to determine eligibility?

A: Use the checklist for the new DRA logic and add notes to the checklist explaining to the client what we need from them. Use manual notice for Medicaid applications that are dated prior to 3/1/10.

Data Entry

1. Are we required to continue entering case comments for the DRA documents received?

A: No, CBMS is able to store all DRA documents received in the system. It is not necessary to enter case comments for DRA documents received. However, your eligibility site may choose to maintain this process as part of its business practices.

2. What will happen if I do not receive the redetermination and the family has not submitted their DRA documents?

A: Your case will close for failure to receive the redetermination packet.

3. Will we still be required to enter data on the non compliance screen when DRA is not verified prior to 3/1/10?

A: Yes, data will be entered in the non compliance screen **only** for any application dated prior to 3/1/10.

4. Do we still deny an application up front if all we need is the DRA for applications dated prior to 3/1/10?

A: Yes the application will be denied up front **only** if it is dated prior to 3/1/10. For these applications, follow the DRA interim procedure. If an application is dated after 3/1/10, they will not be denied up front for DRA and will not use the DRA interim procedure.

5. Will CBMS determine eligibility correctly if end users enter actual documents provided?

A: Yes, this change request implemented logic for the decision tables to determine DRA compliance according to the documents provided.

6. For cases that are pending, should the end users create a new case for the household members that are eligible so they can be approved? If one client is pending DRA will the client who has provided DRA be authorized and approved, or will the case remain pending?

A: No, a new case should not be created. Once CR 2135 is implemented, these cases will be taken out of a pending status. If a case has individuals that have provided DRA, these clients will remain pending if another individual on their case is requesting assistance, but has not provided DRA. A Notice of Action may be requested through the Help Desk for clients that are eligible, but are pending because another client on the case is pending DRA.

7. If the client submits DRA months later, will the system approve Medicaid from the date the verification was received?

A: No, client will be approved as of the date of application.

8. If a client has no DRA documentation in their case file or in CBMS case comments, should we discontinue the case or request this verification?

A: Do not discontinue a case for failure to provide DRA. The client must have the opportunity to provide citizenship and identity documents if they have never been requested. Please request verification at RRR.

9. What EBD should we use when we receive DRA verification?

A: Please follow the Navigating Effective Begin Date and End Date document for entering verifications.

10. If the client self declares citizenship, should the acceptable document = N?

A: Yes, client statement is only an acceptable document source for clients other in exempt groups.

11. If an end user selects client statement for citizenship and identity documents, what actions need to be taken if other programs are impacted? Could the end user enter witnessed instead of client statement when the verification is witnessed by a hospital or end user that only processes other programs?

A: Enter the verification that you have received. If a program area does not accept the verification that you have entered for Medical Assistance per their program rules, the program will pend accordingly and verification will need to be requested.

Yes, the end user can enter witnessed when a document is certified by someone from any certifying site listed on Colorado.gov/hcpf. If the end user views the document, use original.

12. In the ID screen, FA workers are entering their ID for their program but cannot enter client statement or FA case will pend.

Example: Adult applied for FA 01/01/10 provided FA worker with an ID but FA worker did not attest to the original document. Attest = document in case file or CBMS that they saw the original document. For FA purpose the FA worker enters in the Identification tab, ID provided, with verification source of photocopy. The same applicant applies 03/01/10 for FM for pregnancy and no longer has their ID and will need to provide ID verification for FM purposes. Should FM worker

Enter a new record in Identification Tab, with verification source client statement and N for acceptable document?

Use the same record as FA and change verification to client statement and N for acceptable document?

A: All end users should work with other end users to verify if the document were viewed as an original document. If an unacceptable document is in CBMS, an acceptable document should be requested and a new record should be created.

13. What does the end user do when the client provides DRA 30 days after denial? Reopen and process?

A: No, if the case is denied and it has been more than 30 days, the client will be required to submit a new application.

14. Does the case comment need to state an original document was received?

A: Yes, case comments should be updated according to the documents in the file.

15. Does the end user need to enter the collect identification detail window for everyone requesting a Medical Assistance program?

A: Yes, complete the case with information that has been provided on the application and/or documentation provided by client.

16. If an applicant is applying for FM for a 5 year old, should the identification detail window be entered with the received documentation?

A: Yes, all clients regardless of age are required to provide proof of identity for DRA; therefore, the documentation should be entered in the identification detail window.

17. Can the end user request citizenship and identity prior to CBMS sending verification checklist requesting income?

A: No. The client should be determined to be otherwise eligible before DRA is requested.

18. Should all end users enter "Citizenship/ID" case comments to document receipt of DRA verifications, rather than "General" or "RRR" case comments?

A: Please follow you current eligibility site's process when entering case comments.

19. When income is reported and not verified, will FM pend for verification if the verification is listed with a source of client statement?

A: Yes, FM will pend for income verification with the verification as "received" and source of "client statement."

Acceptable Documentation

1. What valid values are acceptable in CBMS?

A: Prior to the Deficit Reduction Act Change Request 1042 (CR1042), Medical Assistance programs were not looking at the Secondary Identification detail window. With the CR1042 we have narrowed down to the valid values that are acceptable within the identification window which are as follows:

Allowable Identification Types
School ID
Medical Records
US military records
Driver's License
3 corroborate documents
Daycare records
Federal/State/Local Govt ID
Military Card
Military Dependent ID card
US Merchant Mariner card
Native American Tribal Doc
Cert of Degree of Ind Blood
A US Passport
A Certificate of Naturalization
A Certificate of US Citizenship

Allowable Identification Types (children < 16 years)
School ID
Physician/midwife statement
DRA Identity written affidavit
School Records
Medical Records
US military records
Driver's License
3 corroborate documents
Daycare records
Federal/State/Local Govt ID
Military Card
Military Dependent ID card
US Merchant Mariner card
Native American Tribal Doc
Cert of Degree of Ind Blood
A US Passport
A Certificate of Naturalization
A Certificate of US Citizenship

Allowable Identification Types (Disabled & Institutionalized Individuals)
School ID
Medical Records
US military records
Driver's License
3 corroborate documents
Federal/State/Local Govt ID
Military Card
Military Dependent ID card
US Merchant Mariner card
Native American Tribal Doc
Cert of Degree of Ind Blood
DRA Identity written affidavit
A US Passport
A Certificate of Naturalization
A Certificate of US Citizenship

Allowable documents for both Citizenship (DC1005N) & Identity (DC2005N)
US Passport
Certificate of Naturalization
Certificate of US Citizenship
Cert of Degree of Indian Blood
Tribal membership card

Allowable Citizenship Verification Source Types
Cert of naturalization
Cert of citizenship
Birth Cert. - US amended
Cert of rpt of birth (DS1350)
Rpt of birth abroad (FS240)
Cert of birth (FS545)
US citizen ID card (I-97)
N Mariana ID card (I-873)
AM Indian TX KIC card (I-872)
Final adoption decree
US civil service employment
US military record
SAVE
Hospital record on letterhead
Life/health/other Ins. Record
US religious record

Allowable Citizenship Verification Source Types
School record w/ US birth
Federal/State census record
Seneca Indian tribal census
BIA Navajo tribal census
US BVS birth registration
Delayed US birth record
Physician/midwife statement
BIA Alaska native roll
Institutional admission papers
Medical record w/ US birth
DRA ctzn. written affidavit
N Mariana Islands birth record
Birth certificate – US
US passport
Puerto Rico birth record
U.S. Virgin Islands record
Child Citz Act

2. Can the valid value of DMV ID be used in CBMS?

A: The value of Department of Motor Vehicle Identity (DMV ID) is currently not recognized within CBMS as being acceptable. If a client presents a DMV ID card, please select the valid value of Federal/State/Local Govt ID. This valid value is an acceptable policy option because the DMV ID card is issued by a state agency.

If there is a combination case of a medical program and Colorado Works program, two identity records should be created within the Collect Identification Details window for the *DMV ID* identity verification. One record will use the valid value of Federal/State/Local Govt ID for the medical program and the other record will use the DMV ID value for Colorado Works. We are currently working on implementing changes within CBMS so that the DMV ID Card is recognized as an acceptable identification type. Once this change is implemented, a CBMS Communication will be disseminated to eligibility site end users.

3. If a citizenship or identity document is expired, should the expiration date be entered into CBMS? Will there be an alert created for expired documents?

A: Yes, enter the expired citizenship and identity documents into CBMS. No, an alert will not be created because expired citizenship and identity documents are acceptable.

4. Do identity documents need to be issued from the State of Colorado?

A: No, identity documents must only be issued by a state, federal, or local authority.

5. Do identity documents need to be current?

A: No, we will accept current or expired identification documents.

6. Do affidavits need to be notarized?

A: No.

7. Are temporary documents (such as a temporary driver's license) acceptable?

A: Yes, temporary documents from the official issuing agency are acceptable.

8. Are photocopies acceptable?

A: An official notarized photocopy from the issuing agency is acceptable. Eligibility end users who witness the true original may make a photocopy and attest that the true original was witnessed on that photocopy.

9. Does identity ever need to be verified when a child turns 16 years of age and an affidavit was previously accepted for that individual?

A: No, the identity for the client was already verified through the affidavit.

10. What is acceptable identity documentation for school or daycare records?

A: School records that include the date and place of birth and the parents' names and daycare records that include the date and place of birth are acceptable.

11. The DRA identity rules state that if a person is unable to present proof of identity, they can use three documents to prove identity as long as they were not used for citizenship. What are some examples of acceptable documents?

A: The client can provide any three or more documents together that reasonably corroborate their identity. The document must contain the clients name plus any additional information that establishes their identity. Some examples are: employer ID card, high school and college diplomas from accredited institutions, and marriage certificates.

12. Can we use the original hospital birth certificate for citizenship verification?

A: Yes, the hospital birth certificate can be accepted if it meets all criteria listed at-8.100.3.H.2.c.i. The "Souvenir" birth certificate (with baby foot prints) cannot be accepted.

13. If an applicant is unable to obtain their birth certificate, can we go directly to DRA tier 4 and utilize the affidavit for citizenship?

A: No, you must attempt to obtain another document from the remaining tiers. A citizenship affidavit should only be used as a last resort when no other citizenship documents are available to the client.

14. Can counties use the Ident-a-kid or Safesmile identification cards?

A: No, these documents are not acceptable per federal regulations. The cards do not require the recipient to verify their identity. This means that any individual could obtain a card for any child.

15. Is there a general stamp that sites use to verify citizenship and identity that lists all required information for DRA?

A: No, the Department does not have a general stamp template. Many eligibility sites and community based organizations have purchased a stamp with the required information to certify DRA documents.

16. Is a combination of birth certificate and school ID acceptable for DRA?

A: Yes, the birth certificate meets the citizenship verification under 8.100.3.H.2.b. and the school ID meets the identification requirement under 8.100.3.H.3.b.

17. What should be included on the school ID in order to meet DRA requirements?

A: The ID must include the name and a photograph of the individual.

18. Is a child's birth certificate an acceptable document for the parent's citizenship document?

A: No, it is not listed as an acceptable document under 8.100.3.H.2.

19. Can the identity affidavit be used for a client that resides in a group home?

A: Yes, An identity affidavit can be accepted as long as the client meets the disability criteria as established by Social Security and is institutionalized per 8.100.3.H.3.j.

20. Why are daycare records acceptable for DRA?

A: Daycare records are only acceptable for identity verification purposes. Our federal authority, Centers for Medicare and Medicaid Services, has stated that these types of documents are allowable.

21. If a passport was issued to a client as a child and they provide it as verification as an adult, can we accept it?

A: Yes, accept current or expired documents as long as it can be reasonably assumed that it is the same individual per 8.100.3.H.3.k.

22. Where is the citizenship affidavit located? Does the client complete this form?

A: We do not have a template for the citizenship affidavit. The citizenship affidavit consists of two affidavits from two different individuals who have personal knowledge of the event(s) establishing the applicant's or client's claim of citizenship and at least one of the individuals making the affidavit cannot be related to the applicant or client. Neither of the two individuals can be the applicant or client. A third affidavit must also be completed by the applicant or client explaining why no other citizenship verification could be submitted. Please refer to 8.100.3.H.2.d.v. for all regulations regarding citizenship affidavits.

23. Is an immunization record considered to be a doctor, clinic, or hospital record?

A: Yes, an immunization record can be considered a doctor, clinic or hospital record for identity purposes. An immunization record cannot be used to verify citizenship.

24. Do immunization records received need to be witnessed?

A: Yes, you are required to attest that you saw the original document.

25. Can we use institutional papers to verify citizenship and the affidavit to verify identity?

A: Yes, institutional admission papers and the affidavit for identity may be used to verify a clients citizenship and identity.

26. Are we required to list the worker name, worker signature, site name, address, and phone number on our DRA stamp?

A: No, you are not required to list all the criteria above on the stamp. However, the end user's name, end user's signature, eligibility site's name, address and phone number are required to be documented on the copy. The process in which each eligibility site verifies citizenship and identity documents is at the discretion of the eligibility site.

27. Can we use the birth worksheet that is completed at the hospital to verify citizenship for a baby that is not a Needy Newborn (NNB)?

A: No, a birth worksheet is not acceptable. You must locate a document that is listed in the DRA acceptable documents.

28. Is an application for a birth certificate acceptable for citizenship?

A: No, an application form is not acceptable. If the mom is on Medicaid or CHP+ when the baby is born, citizenship and identity are assumed at birth and no additional documents are required.

29. Is the identity affidavit acceptable for HCBS clients or only those in a facility?

A: No, a written affidavit may only be used for disabled clients in an institutional care facility. Clients receiving HCBS are not in an institutional care facility and therefore, do not meet the requirements to submit a written affidavit for identity. 8.100.3.H.3.i.

30. Does a client need to submit original school or doctor records?

A: The school or doctor record must be the original or a copy certified by the issuing agency. 8.100.3.H.4.a.

31. Is there a preprinted citizenship affidavit?

A: The Department has not developed an example of a citizenship affidavit. If documentation is by affidavit, the following rules apply:

- There must be at least two affidavits by two individuals who have personal knowledge of the client's citizenship.
- At least one of the individuals making the affidavit cannot be related to the applicant or client.
- The persons making them must provide proof of their own U.S. citizenship and identity.
- If the individuals making the affidavit has information that explains why evidence establishing the applicant or client's claim of citizenship does not exist or cannot be obtained, the affidavit must contain this information.
- The applicant/client or other knowledgeable individual must provide a separate affidavit explaining why the evidence does not exist or cannot be obtained. This affidavit must be signed under penalty of perjury and need not be notarized.

32. Is a prison identification card acceptable for identity?

A: Yes, a prison card may be used as a form of identity documentation if it was issued by the federal, state, or local government with the same information included on drivers license. 8.100.3.H.3.d.

33. Can the Systematic Verification for Entitlements (SAVE) verification (for Naturalized Citizens) serve as verification of citizenship and identity for naturalized citizens?

A: No, although SAVE can verify if a client has become a U.S. citizen, SAVE is not mentioned as a valid form of citizenship and identity verification per 8.100.3.H.3. You must see the original Certificate of Citizenship or Naturalization.

34. Why is the identity affidavit not required to have a witnessed signature?

A: The client is signing under perjury of the law, which is sufficient for DRA. Therefore we do not require the affidavit to be notarized at time of signature.

35. Currently CBMS is pending 16 year old clients that have a signed affidavit prior to age 16, does slide 16 of Frequently Asked Questions also apply to CHP+?

A: Yes, slide 16 does apply to CHP+ as well.

36. What happens to a 16 year old with an affidavit when they apply for benefits on their own case?

A: CBMS will auto-populate this information to new case.

37. In intake mode, if a client turns 16 in application month what happens if the client met DRA in one month and then does not meet it the following month?

A: Medical Assistance clients are only required to provide citizenship and identity documents once.

38. If a passport and a birth certificate are received, can an end user enter the birth certificate as the verification source for client's birthday, and then enter the passport on citizenship tab and identity windows?

A: Yes, end users will be able to enter the birth certificate for a valid value to verify the birth date and then use the passport to identify the client's citizenship and identity.

39. If the end user enters acceptable document= N, is the end user still required to request citizenship and identity?

A: Yes, when the end user enters the acceptable document= N, this means they are stating they do not have an acceptable document. The end user is required to request acceptable DRA documents.

40. If citizenship and identity are previously entered, should we complete the acceptable field = Y even if we didn't view the original?

A: Check verifications provided in the case file and case comments before entering acceptable document = Y. If there is any question if the document verified was valid please contact the previous end user.

41. How is CBMS going to tell the difference between acceptable documents?

A: An end user determines if documents are acceptable and then enters information into CBMS according to what was supplied.

42. Are the clients required to provide citizenship and identity documents within 14 days from the date requested?

A: Only the FM and CHP+ clients have 14 calendar days to provide citizenship and identity documents. AM and LTC clients have 70 calendar days to provide citizenship and identity documents. Clients will not pend for citizenship and identity documents unless otherwise eligible for Medical Assistance.

43. What source should we use for I-94's?

A: DRA is for U.S. citizens only. If the client provides an I-94 document, please complete the non-citizen window.

44. Do Old Age Pension clients need to meet DRA requirements?

A: Yes, unless they fall under one of the exemption groups noted at 8.100.3.H.1.

45. Will OAP and Long Term Care Medicaid cases be impacted?

A: Yes, DRA applies to all Medicaid categories. OAP-HCP was not included in the DRA because DRA only applies to Medicaid. OAP-HCP follows HB1023 rules.

46. What is the Child Citizenship Act? When do we use this as citizenship verification?

A: The Child Citizenship Act of 2000 (the "Act") allows certain foreign-born, biological and adopted children of U.S. citizens to acquire U.S. citizenship automatically. These children do not acquire U.S. citizenship at birth, but are rather, granted citizenship when they enter the United States as lawful permanent residents (LPRs). To qualify under the terms of the Act, the child must:

- Have at least one American citizen parent by birth or naturalization
- Be under the age of 18
- Live in the legal and physical custody of the American citizen parent
- Be admitted as a Legal Permanent Residence (as verified through SAVE)
- Have a completed and final adoption

The effective date of the Child Citizenship Act is February 27, 2001. Children who met these requirements on that date automatically became U.S. citizens. Children who

were 18 years of age or older on that date did not acquire U.S. citizenship from the Child Citizenship Act of 2000.

Children who meet the provisions above automatically acquire U.S. citizenship.

If a child qualifies for citizenship under the Child Citizenship Act, the child's citizenship status is no longer dependent on the United States Citizenship and Immigration Services approving a naturalization application. The child's parents may, however, file an application for a Certificate of Citizenship on the child's behalf to obtain evidence of citizenship.

You will most likely not know if a child is a U.S. citizen because of the Child Citizenship Act unless the family tells you. If the child has the Certificate of Citizenship, you should choose the verification source of "Certificate of Citizenship" in CBMS as this verifies both citizenship and identity.

Exemption Groups

1. Do citizenship and identity ever need to be verified for newborns born to Medicaid and CHP+ eligible mothers?

A: No, citizenship and identity are assumed at birth.

2. If a child returns home from Foster Care, is DRA verification still required even though they are no longer in Foster Care?

A: No, clients who received adoption or Foster Care assistance under Title IV-E and IV-B of the Social Security Act on or after 7/1/06 are exempt from providing citizenship and identity documents.

3. If there is a new application for Family Medicaid and the mother requests retroactive Medicaid to cover the birth and delivery of her baby, should DRA be requested?

A: Yes, citizenship and identity documents must be collected for mom, but not for the newborn if Medicaid pays for the birth of child retroactively.

4. A Pregnant mom is a Legal Permanent Resident on Medicaid. Mom gives birth in another country. Will the baby be a NNB and be exempt from DRA for life?

A: The child's receipt of U.S. citizenship is dependent on several factors and is reliant on regulations set forth by the United States Citizenship and Immigration Services. You must establish the citizenship and identity for a newborn born outside of the U.S. prior to adding the child as a NNB.

5. How do we verify NNB eligibility if a child was born out of the state of Colorado to a mother on FM/CHP+ in another state?

A: If a client states that their child was exempt in another state, the end user will need to contact the other state to verify. If the end user is unable to verify the exemption of the child, then the client will need to either provide paperwork to show the exemption, or provide the DRA paperwork.

6. How far back does the retroactive reversal go for clients that were previously denied for failure to provide DRA?

A: If a client who is part of an exemption group was previously denied for failure to provide DRA verification, eligibility can be reopened as far back as implementation of DRA on 7/1/2006. Please refer to 8.100.3.H.1.f.ii.1.

7. Are SSDI dependent children considered exempt from DRA requirements?

A: Yes, all clients receiving SSDI are exempt from providing citizenship and identity documents.

8. Can a PE site accept an application for Medicaid even if the original application is pending DRA at the eligibility site?

A: Yes, because PE clients are exempt from DRA during their PE period.

9. Is a client who previously received SSI or SSDI still exempt from DRA?

A: If the client was receiving SSI/SSDI at any time from 7/1/2006 to present, DRA should have already been verified for this client and does not have to be verified again. If DRA was not verified and there is no record of SSI/SSDI receipt during this time period, DRA will need to be requested per 8.100.3.H.

10. Will a Medicare Savings Program application pend for citizenship or identity documents?

A: No, if a client is entitled to Medicare, they are exempt from providing citizenship and identity documents.

11. If client is using their Medicare card for citizenship, what do we use as the source in CBMS?

A: A Medicare card is not an acceptable document for citizenship. If a client is entitled to Medicare, they are exempt from providing citizenship and identity documents. This information is captured in the Medicare Expense Detail Window. Client statement may be used in the citizenship field for exempt populations.

12. If an exempt client has client statement entered as the source for identity on the Collect Identification Detail screen, will the verification checklist request the identity document?

A: No, if all required screens are completed, CBMS will identify the client as exempt. A verification checklist will not be requested.

13. Can a valid value for each exempt group be implemented?

A: No, CBMS will identify these clients when the proper windows are completed.

14. Does CBMS read the Supplement Security Income/State Supplementary Payment (SSI/SSP) Details window or the Unearned Income Detail window to determine whether a client should be exempt from citizenship and identity documents? At times applications are received without SSI/SSP Details window completed, would CBMS know that they are exempt?

A: Yes, CBMS reads SSI/SSP Details Window. CBMS will exempt the client from DRA if the Receiving field on SSI/SSP Detail Window =Y or Receiving field on SSI/SSP Detail Window = N and Status field = Eligible, Not Receiving (1619B).

Yes, CBMS reads the Unearned Income Detail window and exempts the client from DRA when the Type =SSI and the record is open (no end date).

The SSI/SSP Details window and Unearned Income Detail window must be completed manually or automatically in order for CBMS to know that the client is exempt.

15. Will CBMS exempt clients on SSI/SSDI/NNB/Medicare for citizenship and identity documents with client statement?

A: Yes, if the client does not have an existing record end users should complete these screens for auditing and research purposes. Needy Newborns born prior to 3/1/10 will pend if you use client statement, this is a known issue. Please submit a Help Desk Ticket (HDT).

16. Do we enter acceptable document = Y or N for NNB to a Medicaid eligible mother?

A: Yes, please enter Acceptable Doc = Y for researching and auditing purposes. Since the client is exempt, client statement is acceptable documentation.

17. When will the user be able to view the lifetime exemption for Needy Newborns (NNB) born to a mother on FM/CHP+? Suggestions: Auto populate field will be appear in CBMS for guaranteed NNB so user can see it immediately.

A: The indicator exempting newborns for citizenship and identity documents for their lifetime is behind the scenes within CBMS so the end user will not be able to view the lifetime exemption.

18. Will a client ID merge move the newborn citizenship and identity indicator to the Merge to ID?

A: No, the indicator is attached to the original client ID. It is up to the end user to identify the "Merge to ID" prior to submitting the client merge document.

19. In the training presentation (slide 12) it mentions that we can "retroactive reverse" members of any groups that were previously denied upon client request. If we receive such a request, what groups would this cover and how far back will we retroactive reverse? Application date?

A: NNB and federally recognized tribes can be reopened back to any application dated on or after 07/1/2006. This applies to applications denied for missing citizenship and identity only. See Agency Letter 09-010.

20. If policy states that newborns born on or after 7/1/06 to Medicaid eligible mothers are exempt from DRA and CBMS procedure states that newborns born to Medicaid/CHP+ mothers on or after 3/1/10 are exempt from DRA, do we need to enter citizenship and identity documents for newborns born prior to 3/1/10?

A: Although all Medicaid/CHP+ newborns are exempt from DRA, currently CBMS is only recognizing those newborns born on or after 3/1/10. The newborns born prior to 3/1/10 will be identified and exempted in a future CBMS change request.

21. Will Needy Newborns (NNB) born between 6/2006 to 2/2010 pend?

A: Yes, submit a HDT. If the client requires medical assistance, a Notice Of Action (NOA) may be requested.

22. How will we know if the mother was on Medicaid at the child's time of birth?

A: CBMS was programmed to identify if the mother was on Medicaid or CHP+ during the month the child was born.

23. Prior to this training some end users would enter a source different than client statement for exempt clients ID or citizenship screens, should the end users at RRR change the source to client statement for auditing purposes?

A: No, if there is a valid source already established within the ID or citizenship windows than these fields do not need to be updated with client statement at RRR.

24. What should an end user do when an individual who was previously on SSI or SSDI comes in and applies for medical assistance? Do we now require DRA citizenship/identity or take their word they were on SSI or SSDI prior (since SSA already verified citizenship and identity). How would an end user address DRA for a client from another state that does not have information in SOLQ?

A: If the end user has no verification of SSI or SSDI benefits, please request verification. Phase 2 of DRA will implement logic to identify these clients and

provide an exemption for them if they were previously receiving SSI or SSDI benefits in the state of Colorado.

25. How much of the DRA training is applicable to Presumptive Eligibility sites? Will the CBMS screens automatically prompt Presumptive Eligibility sites to fill in the appropriate areas?

A: No, this training was for eligibility sites. The CBMS screen will not prompt Presumptive Eligibility sites to fill in the appropriate areas. Presumptive Eligibility sites should email PE.eligibility@hcpf.state.co.us if they have further questions.

Pending Applications

1. Can a site worker leave a case open or pending past the 45/90 day deadline if clients are attempting to get documentation?

A: Yes, an extension beyond the 45 or 90 processing timeframe may be granted at eligibility site discretion.

2. If an application is pending DRA and the client reapplies, do we use the original date of application?

A: Yes, if the original application is still pending, you would use the original date of application.

3. What will happen if a child is pending DRA on one parent's case and the other parent applies and provides DRA verification?

A: Medical Assistance should be approved for whichever parent has the child in their home at the time of application and is able to provide a complete application with all necessary verifications. The first parent, however, should be provided the full 14 days to return missing documentation before any action is taken on the second parent's case.

4. Will site workers need to contact the Help Desk to file a HDT in order to obtain a Notice of Action (NOA) for pending eligible members?

A: Yes, Contact the Help Desk to obtain a NOA. A NOA should be requested if the client needs medical services. Instruct the client to contact you if they need medical services.

5. If a client fails to provide DRA, their case will pend indefinitely. How will the clients be noticed so they receive their appeal rights?

A: Since the client has not been denied, there is nothing to appeal until the case is denied with Change Request 2135. When the change request is implemented, all clients will receive proper noticing. If the client contacts you requesting an appeal

while the case is still pending, inform the client that if they submit the verification we can still approve their case without an appeal.

6. What is the definition of a completed application? What if the client does not turn in their verifications so a completed application is never received? Will the case pend indefinitely or will it eventually be denied?

A: A completed application means that every question on the application is answered, contains the signature of the client and all necessary verifications are received.

You should request the missing verifications or incomplete portions of the application from the client and provide the client 14 calendar days to return to you. If the client fails to provide missing verifications after the 14 calendar days, you will not be able to deny the case for failure to provide verification. Change Request 2135 will deny a case for missing DRA verifications.

7. How does HCPF plan to issue Notices of Action in a timely manner?

A: If a client is eligible for Medicaid, but their case is pending due another family member missing citizenship and identity, please submit a HDT. The Help Desk will work with you to ensure the client receives an eligibility notice as quickly as possible so that they can receive the appropriate benefits.

8. If a client is pending for DRA, will the providers be paid for services provided during the interim?

A: No, if the DRA documents have not been received, the client has not been determined eligible for Medicaid. A client will receive a Notice of Action if they are eligible for Medicaid, but the case is pending because of another household member's DRA pending status. If medical services are provided through a Notice of Action letter, the provider will be paid.

9. Why are we allowing clients to provide their DRA at any point in time while their case is pending during Phase I?

A: Phase I requires cases to remain in a pending status. We are allowing clients to submit their DRA documents because we have not denied the application.

10. What guidelines will the ALJ follow when a client appeals a denial due to inter-county procedure for DRA clients? Will the ALJ support the counties with their inter-county DRA denial procedure? When was "good faith" added to Volume 8 rules?

A: The ALJ will utilize the "Good Faith" regulation 8.100.3.H. It will be up to the eligibility site to provide the burden of proof that the client did not show "good faith" effort in supplying the missing DRA verification. When developing you inter-county procedure we recommend you reference this regulation. The "good faith" regulation has been included in the DRA rules since 7/1/2006.

11. How can we help clients that have monthly medical issues?

A: You should assist the client with securing their DRA documentation to the extent that you are able. If one household member is unable to provide DRA and is causing the case to pend, you should submit a HDT and request a Notice of Action for the client that has medical needs.

12. Will there be a toll free number for clients to contact the state with concerns and questions?

A: No, please work with the client to address their concerns. If you have specific questions, please email the Medicaid Eligibility email.

13. What do we tell the applicants?

A: Tell them they are pending for not providing their DRA documents. Please try to work with the client to obtain these documents.

14. As of 3/1/10, how should we deny or close cases for missing DRA?

A: As of 3/1/10, cases will remain pending for DRA until CR 2135 is implemented.

15. Can we deny these cases manually, using deny/withdraw screen, and manually notice them?

A: Please follow the DRA training. Once CR 2135 is implemented, you will be able to deny appropriately for missing verifications.

16. In cases of mixed household eligibility where CHP+ will not request DRA when there is a Medicaid eligible client and the CHP+ client pends, should end users submit a HDT?

A: No, this is a known issue that will be corrected in a future CBMS change request. If the DRA is provided for the Medicaid eligible client, CBMS will pend for DRA correctly for the CHP+ eligible client.

17. Will the pending cases appear on the EPG reports? Will the state contact us if there is not good reason for delay? What is the correct response for the system not working and pending for no DRA? How will EPG report tell the difference between actual cases that are EPG and the ones that are pending for the CR 2135?

A: Please document in case comments why your case is pending. When the EPG report is viewed for your eligibility site and it is found that the case is pending due to DRA, it will be removed from the EPG list the following week.

18. If at application or RRR the client needs DRA or other verification, the case will stay pending or will the case stay open and we can not close or deny manually in any circumstance?

A: The case will stay pending when verifications are missing. If it is an RRR, the case will remain open until CR 2135 is implemented and allows for the system to deny.

19. For MA Sites that only do intake, will pending cases be held indefinitely or will they be transferred to ongoing case workers?

A: Cases that are pending at intake will remain pending indefinitely. Please follow current eligibility site process.

20. If an end user has a Long-Term Care case pending over the 45-day processing time frame for DRA and other missing verifications then the client turns in DRA on day 45 but the client has not provided other verifications, does the case continue to pend for missing verification until they turn it in?

A: Yes, the case will continue to pend until CR 2135 is implemented to deny for missing verifications.

21. Since individuals will pend for no citizenship/identity until CR 2135 is implemented, what is the procedure when that household moves to another county? In the past the understanding between counties was that we could not transfer a pending case.

A: If the household moves to another county, please follow your current county process used for cases that are pending.

22. If the case is pending for awhile, what should we do about changing circumstances? Do we request new verification for income?

A: No, new income verification should not be requested.

23. If a case is pending for DRA verification only, should the end user submit a HDT? If the end user calls in a HDT, what actions will be taken by the Help Desk? What if the client needs a denial NOA?

A: A HDT should be submitted when the client requires medical assistance or prescriptions. The HDT will provide a NOA for the client to access medical assistance. Please send an eligibility site issued denial NOA if the client needs to be noticed of a denial and please make sure it contains standard appeal rights with correct policy citations.

24. Effective 3/1/10 if DRA is verified for the children in a household but not the parents, can the children still be eligible for Medicaid?

A: DRA is only required for those requesting assistance. The children could be eligible. However, the system pends a case at the case level not the individual level so the children will not approve in CBMS. Please submit a HDT so that we can provide the children with a NOA in order to receive medical assistance.

25. Are all Medicaid cases going to be in pending status after 3/1/10, until all citizenship and identity fields are updated?

A: No, if verification entered is not acceptable in a case in ongoing mode, CBMS will not pend for citizenship and identity documents until RRR.

26. At RRR, will the case pend and will the med span stay open if citizenship and identity documents are missing?

A: The case will pend, but the med span should not be affected.

27. Will clients receive Medicaid while case is pending?

A: In RRR mode, the clients should continue to receive benefits. In intake mode, the clients will not receive benefits unless a HDT is submitted and a NOA is issued to the client.

28. If an end user was not entering identity information into CBMS for children, will the case pend?

A: Yes, children will pend for identity documents at RRR.

29. Presentation slides 55 and 56 states the acceptable document = Y with a client statement will pend the case in CBMS if the client is not part of an exemption group. What will happen if the acceptable document = N?

A: If the Acceptable Doc [Y/N] field reflects N or Null then CBMS will pend the case. Acceptable Doc= N should always be used when client statement is the source unless the client is part of an exemption group.

30. What happens on a case where the mother is active Medicaid and then her 5 year old son moves back into the home; will the whole case pend?

A: No, the 5 year old will be the only household member to pend due to CBMS viewing the 5 year old in intake mode.

31. If the whole case is going to pend for verifications will this also pend other HPLPGs?

A: This could possibly pend the other HPLPG depending on the verifications provided and entered into CBMS.